District I PO Box 1980, Hubbs, NM 88241-1980

State of New Mexico Energy, Minerals & Natural Resources Department

Form C-104 Revised February 21, 1994 Instructions on back Submit to Appropriate District Office 5 Copies

District II

1000 Rio Brazos Rd., Aztec, NM 87410

District IV

PO Drawer DD, Artesia, NM 88211-0719 District III

OIL CONSERVATION DIVISION PO Box 2088 Santa Fe, NM 87504-2088

| O Box 2088, 8   | Santa Fe,         | NM 87504-2<br>REQUI          | EST              | FOR A                            | LLOW           | ABL                 | E AN                  | D AU   | тно                      | RIZAT             | ION TO T             | <u>X</u><br>2 a a d            |                     | ENDED REPO          |  |
|---|-------------------|------------------------------|------------------|----------------------------------|----------------|---------------------|-----------------------|--|--------------------------|-------------------|----------------------|--------------------------------|---------------------|---------------------|--|
|   |                   |                              |                  |                                  | inc and Adi    | urcas               |                       |  |                          | MIZA I            | 1                    | ¹ OGR                          | ID Numi             | ber                 |  |
| CHATEAU OIL & GAS, INC<br>2515 MCKINNEY AVENUE, SUITE 840<br>DALLAS, TX 75201 |                   |                              |                  |                                  |                |                     |                       |  |                          |                   |                      | 159819  Reason for Filing Code |                     |                     |  |
|   | API Numb          |                              | 7                |                                  | <del></del>    |                     | 5 t)                  | hal N  | <del></del>              |                   | Сн                   |                                |                     |                     |  |
| 30 - 045  |                   | BLANCO MESA VERDE            |                  |                                  |                |                     |                       |  | * Pool Code<br>7 2 3 1 9 |                   |                      |                                |                     |                     |  |
| <sup>7</sup> Property Code  |                   |                              |                  | PAN AMERICAN Property Name STATE |                |                     |                       |  |                          |                   | Well Number          |                                |                     |                     |  |
| I. 10   |                   | e Locat                      |                  |                                  |                |                     |                       |  |                          |                   |                      |                                |                     |                     |  |
| Ul or lot no.<br>E  | Section<br>36     |                              | Township<br>32N  |                                  | Lot.ldn        |                     | eet from t<br>1 4 5 0 |  |                          | outh Line         | Feet from the        | Enst/W                         | est line            | S County            |  |
| 11  | Botton            | n Hole I                     | oca              | ltion                            |                | i                   |                       |  |                          |                   |                      |                                |                     |                     |  |
| UL or let no.   | Section           |                              | Township         |                                  | Lot Idn        | ŀ                   | cet from t            | the North  |                          | South line        | Fect from the        | East/West line                 |                     | County              |  |
| " Lae Code  | 13 Prodi          | ucing Metho                  | d Code           | <sup>14</sup> Gas                | Connection     | Date                | <sup>18</sup> C-12    | 29 Permi   | Number                   | r   "             | C-129 Effective      | Date                           | " C-1               | 129 Expiration Date |  |
| II. Oil a   | nd Gas            | s Trans                      | orte             | rs                               | <del></del> -  |                     | <del></del>           |  |                          | <u> </u>          |                      |                                |                     |                     |  |
|   |                   |                              |                  | Transporter Name<br>and Address  |                |                     |                       | <sup>30</sup> POD                                  |                          | <sup>21</sup> O/G | 2 POD ULSTR Location |                                |                     | cation              |  |
| 007057  | EI                | L PASO NATURAL GAS CO.       |                  |                                  |                |                     | 23                    | 304730   |                          | G                 |                      | and D                          | escriptio           | n                   |  |
|   | .O. BOX           | BOX 4990<br>INGTON, NM 87499 |                  |                                  |                |                     | G                     |  |                          |                   |                      |                                |                     |                     |  |
| 09018   | LANT RE           | T REFINING CO. BOX 256       |                  |                                  |                |                     | 0471                  | Ω  | 0                        |                   |                      |                                |                     |                     |  |
|   |                   |                              |                  | NM 87499                         |                |                     |                       | 2304710  |                          |                   |                      |                                |                     |                     |  |
|   |                   |                              |                  |                                  |                |                     |                       |  |                          |                   |                      |                                |                     |                     |  |
|   |                   | <del></del>                  |                  | ·                                |                |                     |                       |  |                          |                   |                      |                                |                     |                     |  |
|   |                   |                              |                  |                                  |                |                     |                       |  |                          |                   |                      |                                |                     |                     |  |
| /. Produ  | ced W             | /ater                        |                  |                                  |                | · · · · ·           |                       |  |                          |                   | <del></del>          |                                |                     |                     |  |
|   |                   |                              |                  |                                  |                |                     | n P                   | od uis   | TR Local                 | ion and De        | scription            |                                |                     |                     |  |
| . Well C  | Comple<br>d Date  | etion Da                     |                  |                                  |                |                     |                       |  |                          |                   |                      |                                |                     |                     |  |
|   | a Date            |                              | 2º Ready Da      |                                  |                | le                  |                       | " T1)  |                          |                   | " เราก               |                                | 2º Perforations     |                     |  |
| 20 Hole Size  |                   |                              |                  | H Casing & Tuhing Size           |                |                     |                       | <sup>11</sup> Depth Set                            |                          |                   |                      |                                | <sup>10</sup> Sacks | Cement              |  |
| <del></del>   |                   |                              | ╬                |                                  |                |                     |                       |  |                          |                   |                      |                                |                     |                     |  |
| ·   |                   |                              |                  |                                  |                |                     |                       |  |                          |                   | <u> </u>             |                                |                     |                     |  |
| . 137-11.0  |                   |                              |                  |                                  |                | :                   |                       |  |                          |                   |                      | <del></del>                    |                     | <del></del>         |  |
| . Well 7  |                   |                              | Delive           | ry Date                          | 30 Y           | Test Dat            |                       |  |                          |                   |                      |                                |                     |                     |  |
| 4 Choke   | Ot.               | ļ                            |                  |                                  |                |                     |                       | " Test Les   |                          | igth              | H Thg. Free          | ISII FE                        | *                   | Cag. Pressure       |  |
| ··· Choke   | Size              |                              | <sup>4</sup> Oil |                                  |                |                     |                       | 4 Gas  |                          |                   | 4 AOF                |                                | 4                   | Test Method         |  |
| hereby certify<br>it and that the<br>owledge and be<br>nature:                | inorniano<br>LiaA | at Bincii apon               | c is tru         | e and compl                      | ric to the bei | cen com<br>st of my |                       | oncoved b  |                          | L CON             | SERVATIO             | ON DI                          | VISIO               | ON                  |  |
| inted name: Dana Dutcher  |                   |                              |                  |                                  |                |                     |                       | Approved by:  77 \$  Title: SUPERVISOR DISTRICT #3 |                          |                   |                      |                                |                     |                     |  |
|   | eside             | nt                           |                  |                                  |                |                     |                       | proval D   | ate:                     | SUPE              | HVISOHDI             | SIHIC                          | #3 از<br>——         | <del></del>         |  |
| ile: [//  | 1/90              | 4                            | ı<br>I           | 110ng 14/                        | 953-0          | 198                 |                       |  |                          |                   | FEB - 3              | 1997                           |                     |                     |  |
| If this is 9 the  | inge of op        | erntor fili)in               | the O            | GRID numl                        | er and nam     | rry                 | previous<br>L. S      | avag   | ;e                       |                   | Attorne              | y-in                           | -fac                | t                   |  |
| <del></del>   | Previous          | Operator Si                  | nature           | Snyc                             | ler Oi         | 1 C                 | orpor                 | Printed !  | Vame                     | 0/2 0             | r 21030              | Title                          |                     | Date                |  |