

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB NO. 1004-0137
Expires March 31, 2007

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.

SUBMIT IN TRIPLICATE - Other instructions on reverse side

1. Type of Well

☐ Oil Well ☒ Gas Well ☐ Other

2. Name of Operator

XTO Energy Inc.

3a. Address

2700 Farmington Ave., Bldg. K, Ste 1 Farmington,

3b. Phone No. (include area code)

505-324-1090

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

2111' FSL & 2236' FEL SEC 18J-T24N-R05W

5. Lease Serial No.

JIC-69

6. If Indian, Allottee or Tribe Name

JICARTILLA APACHE TRIBE

7. If Unit or CA Agreement, Name and/or No.

AM 9 41

8. Well Name and No.

APACHE FEDERAL #10

9. API Well No.

30-039-05477

10. Field and Pool, or Exploratory Area

BASIN DAKOTA/OTHER ~~W.C. Basin Mancos~~

11. County or Parish, State

SAN JUAN NM

12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

☒ Notice of Intent

☐ Subsequent Report

☐ Final Abandonment Notice

TYPE OF ACTION

☐ Acidize

☐ Alter Casing

☐ Casing Repair

☐ Change Plans

☐ Convert to Injection

☐ Deepen

☐ Fracture Treat

☐ New Construction

☒ Plug and Abandon

☐ Plug Back

☐ Production (Start/Resume)

☐ Reclamation

☒ Recomplete

☐ Temporarily Abandon

☐ Water Disposal

☐ Water Shut-Off

☐ Well Integrity

☒ Other SEA DK, RC

to GP

13. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recompleate horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompleation in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the final site is ready for final inspection.)

WC Basin Mancos
XTO Energy Inc. intends to plug Basin DK & recompleate to ~~GP~~ as follows: 1) MI & set 2 - 400 bbl frac tanks & fill w/2% KCl wtr. 2) MIRU PU. 3) ND WH. NU & PT BOP. 4) TOH w/tbg, nipple & pkr. LD nipple & pkr. 5) PU CIBP. TIH w/CIBP & tbg to approx 5,445' (Top of DK fnt). Spot a 100' cmt plug on top of CIBP fr/6,545'-6,445' w/18 sx cmt w/2% CaCl2. 6) TOH & LD tbg. 7) MIRU WL. RU full lubricator. Log well w/GR/OCL log from PBTD (6,445) to 2,270' (DV Tool). 8) Perf GP (0.32" dia., ttl 26 holes). 9) PU & TIH w/pkr & tbg to 5,350'. Set pkr at 5,350'. PT annulus to 500 psig. 10) RIMO PU. 11) MIRU acid & pmp truck. BD GP perfs from 5,420'-5,605'. A. w/1000 gals of 15% NEFE HCl. Max TP 5,000 psig. Flush w/2,300 gals 2% KCl water (2 bbls over flush). RIMO acid & pmp truck. 12) MIRU frac equip. Frac GP perfs fr/5,420'-5,605' dm tbg at 35 BPM w/62,000 gal 70Q, CO2 foamed, 25# XL gelled, 2% KCl wtr (Pure Gel III) carrying 74,000# 20/40 Ottawa sd & 30,000# 20/40 Super LC RC sd. 13) SWI 4 hrs. RIMO frac equip. Flow back well. 14) MIRU PU. ND WH. NU BOP. 15) TOH & LD tbg & pkr. TIH w/sd bailer, SN & tbg. CO to 6,445' (PBTD). Circ clean. 16) TOH w/tbg & bailer. LD bailer. TIH w/OEMA & weep hole, SN & tbg to surf. LD tbg @ approx 5,680'. SN @ approx 5,650'. TAC @ 5,398'. ND BOP. NU WH. 17) TIH w/pmp, strainer nipple, spiral rod guide, RIMO t1, sub, sinker bars & rods to surf. 18) RIMO PU.

HOLD C104 FOR C-102 Form For Basin Mancos

SEE ATTACHED FOR
CONDITIONS OF APPROVAL

14. I hereby certify that the foregoing is true and correct

Name (Printed/Typed)

LORRI D. BINGHAM

Title

REGULATORY COMPLIANCE TECH

Date 7/24/06

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

Title

Pet. Eng.

Date

8/4/06

Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.

Office

FPO

Title 18 U.S.C. Section 1001, and Title 43 U.S.C. Section 1212, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.



United States Department of the Interior

BUREAU OF LAND MANAGEMENT

Farmington Field Office
1235 La Plata Highway, Suite A
Farmington, New Mexico 87401

Attachment to Notice of Intent for Plug Back

Well: Apache Federal #10

CONDITIONS OF APPROVAL:

1.) Farmington Field Office is to be notified at least 24 hours before the plug back operations commence (505) 599-8907.

3.) The following modifications to your plug back program are to be made:

A.) Set CIBP between 6494' and 6444' (Top Dakota perf @ 6544') and spot 100' of cement on top of CIBP plus 50' excess cement. (Dakota formation top @ 6445')

BLM CONDITIONS OF APPROVAL

WORKOVER AND RECOMPLETION OPERATIONS:

A properly functioning BOP and related equipment must be installed prior to commencing workover and/or recompletion operations.

SURFACE USE OPERATIONS:

The following Stipulations will apply to this well unless a particular Surface Managing Agency or private surface owner has supplied to BLM and operator a contradictory environmental stipulation. The failure of operator to comply with these requirements may result in assessments or penalties pursuant to 43 CFR 3163.1 or 3163.2. A copy of these conditions of approval shall be present on location during construction, drilling and reclamation activity.

An agreement between operator and fee landowner will take precedence over BLM surface stipulations unless (in reference to 43 CFR Part 3160) 1) BLM determines that operator's actions will affect adjacent Federal or Indian surface, or 2) operator does not maintain well area and lease premises in a workmanlike manner with due regard for safety, conservation and appearance, or 3) no such agreement exists, or 4) in the event of well abandonment, minimal Federal restoration requirements will be required.

STANDARD STIPULATIONS: All surface areas disturbed during work-over activities and not in use for production activities will be reseeded. This should occur in the first 90 days after completion of work-over activities.

SPECIAL STIPULATIONS:

1. Pits will be fenced during work-over operation.
2. All disturbance will be kept on existing pad.
3. All pits will be pulled and closed immediately upon completion of the work-over activities.
4. Pits will be lined with an impervious material at least 12 mils thick.

District I - (505) 393-6161
1625 N. French Dr, Hobbs, NM 88240
District II - (505) 748-1283
1301 W. Grand Avenue, Artesia, NM 88210
District III - (505) 334-6178
1000 Rio Brazos Road, Aztec, NM 87410
District IV - (505) 476-3440
1220 So. St. Francis Dr., Santa Fe, NM 87505

New Mexico
Energy Minerals and Natural Resources Department

Form C-140
Revised June 10, 2003

Oil Conservation Division
1220 South St. Francis Dr.
Santa Fe, New Mexico 87505
(505) 476-3440

SUBMIT ORIGINAL
PLUS 2 COPIES
TO APPROPRIATE
DISTRICT OFFICE

APPLICATION FOR
WELL WORKOVER PROJECT

| | | | | | | | | |
|---|----------------------|------------------------|---------------------|------------------------------|------------------------------|-----------------------------------|----------------------------|-----------------------------|
| Operator name & address XTO ENERGY INC. 2700 Farmington Ave, Suite K-1 Farmington, New Mexico 87401 | | | | | | OGRID Number 167067 | | |
| Contact Party MELISSA M OSBORNE, REGULATORY COMPLIANCE TECH | | | | | | Phone (505) 566-7925 | | |
| Property Name APACHE FEDERAL | | | | Well Number 10 | | API Number 30-039-05477 | | |
| UL J | Section 18 | Township 24N | Range 05W | Feet From The 2111 | North/South Line S | Feet From The 2236 | East/West Line E | County RIO ARriba |

| | |
|---|--|
| I. Workover | |
| Date Workover Commenced: 07/01/2004 | Previous Producing Pool(s) (Prior to Workover): BASIN DAKOTA |
| Date Workover Completed: 07/29/2004 | |

- II. Attach a description of the Workover Procedures performed to increase production.
V. Attach a production decline curve or table showing at least twelve months of production prior to the workover and at least three months of production following the workover reflecting a positive production increase.

AFFIDAVIT:

State of New Mexico)
) ss.
County of San Juan)
Melissa M Osborne, being first duly sworn, upon oath states:

- I am the Operator, or authorized representative of the Operator, of the above-referenced Well.
- I have made, or caused to be made, a diligent search of the production records reasonably available for this Well.
- To the best of my knowledge, this application and the data used to prepare the production curve and/or table for this Well are complete and accurate.

Signature Melissa M Osborne Title REGULATORY COMPLIANCE TECH Date 02/25/05

E-mail Address _____

SUBSCRIBED AND SWORN TO before me this 25th day of February, 20 05

My Commission expires: 7/27/08

Notary Public
Brenda Wallen

FOR OIL CONSERVATION DIVISION USE ONLY:

- VI. CERTIFICATION OF APPROVAL:
This Application is hereby approved and the above-referenced well is designated a Well Workover Project and the Division hereby verifies the data shows a positive production increase. By copy hereof, the Division notifies the Secretary of the Taxation and Revenue Department of this Approval and certifies that this Well Workover Project was completed on

07-29- 2004

| | | |
|---|----------------------------------|---------------------------|
| Signature District Supervisor <u>Charles D. Horn</u> | OCD District <u>AZTEC III</u> | Date <u>03-07-2005</u> |
|---|----------------------------------|---------------------------|

- VII. DATE OF NOTIFICATION TO THE SECRETARY OF THE TAXATION AND REVENUE DEPARTMENT:

XTO Energy Inc.
APACHE FEDERAL #10
INSTALL PLUNGER

- 7/1/04 BD tbg. SN @ 6,568'. RU swb. BFL 2,000' FS. S. 1 BO, 34 BLW, 7 hrs, 18 runs. FFL 6,500' FS. Well would flw fr/10" to 20" after each run & then load up. RD swb. RIH w/OS & FF SV. POH w/OS & SV. SWIFPBU. RDMO swb rig.
- 7/10/04 Prod inst new 2.3 dual flow L/C on WH & APC 1000 (megabox) ctlr. Dropd new BHBS & new sgl pad plngr. Cycled plngr to surf thru sales. Found OFU on mtr tube leaking. SWI. Called EPFS to rep.
- 7/15/04 SITP 550 psig, SICP 580 psig. Eq well for 24 hrs. Unable to cycle plngr. Rpts suspended until further activity.
- 7/20/04 MIRU SWU. OWU thru byp, plngr cycled to surf in 25". Rec 1 BO, 2 BW, 5 runs, 3 hrs. SWI for 30" to drop plngr. SITP 300 psig, SICP 445 psig. OWU thru byp, plngr cycled to surf in 12". Rec 1 BO, 2 BW. SWI for 30" to drop plngr. SITP 250 psig, SICP 280 psig. OWU thru byp for 45", no plngr arr. RU swb. BFL @ 5,300' FS. S. 4 BO, 6 BW, 5 runs, 3.5 hrs. FFL @ 5,800' FS. Plngr did not cycle. FTP 2 psig, SICP 140 psig. SWI. SDFN.
- 7/21/04 RU swb. BFL @ 4,800' FS. S. 6 BO, 7 BW, 13 runs, 7 hrs. FFL @ 6,300' FS. Plngr cycled after second swb run. Pld plngr fr/WH. FTP 2 psig, SICP 80 psig. Dropd plngr. SWIFPBU. SDFN.
- 7/29/04 SITP 840 psig, SICP 850 psig, LP 290 psig. OWU & RWTP @ 9:00 a.m., 7/28/04.

Well: APACHE FEDERAL No.: 10
 Operator: XTO ENERGY, INC. API: 3003905477
 Township: 24.0N Range: 05W
 Section: 18 Unit: J
 Land Type: J County: Rio Arriba

Year: 2002

Pool Name BASIN DAKOTA (PRORATED GAS)

| Month | Oil(BBLS) | Gas(MCF) | Water(BBL) | Days Produced |
|-----------|-----------|----------|------------|---------------|
| January | 0 | 0 | 0 | 0 |
| February | 0 | 0 | 0 | 0 |
| March | 0 | 25 | 0 | 1 |
| April | 0 | 66 | 0 | 1 |
| May | 0 | 0 | 0 | 0 |
| June | 0 | 0 | 0 | 0 |
| July | 0 | 197 | 0 | 0 |
| August | 0 | 374 | 0 | 8 |
| September | 0 | 365 | 0 | 1 |
| October | 0 | 630 | 0 | 6 |
| November | 0 | 500 | 0 | 6 |
| December | 0 | 17 | 0 | 17 |
| Total | 0 | 2174 | 0 | 40 |

Year: 2003

Pool Name BASIN DAKOTA (PRORATED GAS)

| Month | Oil(BBLS) | Gas(MCF) | Water(BBL) | Days Produced |
|-----------|-----------|----------|------------|---------------|
| January | 0 | 29 | 0 | 29 |
| February | 0 | 0 | 0 | 0 |
| March | 0 | 176 | 0 | 18 |
| April | 0 | 97 | 0 | 1 |
| May | 0 | 0 | 0 | 0 |
| June | 0 | 17 | 0 | 1 |
| July | 0 | 0 | 0 | 0 |
| August | 0 | 0 | 0 | 0 |
| September | 0 | 0 | 0 | 0 |
| October | 194 | 3 | 0 | 31 |
| November | 0 | 10 | 0 | 30 |
| December | 3 | 42 | 0 | 31 |
| Total | 197 | 374 | 0 | 141 |

486

12 mth prod
avg prod
40.5

Year: 2004

Pool Name BASIN DAKOTA (PRORATED GAS)

| Month | Oil(BBLS) | Gas(MCF) | Water(BBL) | Days Produced |
|-----------|-----------|----------|------------|---------------|
| January | 3 | 14 | 0 | 31 |
| February | 0 | 35 | 0 | 28 |
| March | 0 | 23 | 0 | 31 |
| April | 0 | 23 | 0 | 30 |
| May | 0 | 0 | 0 | 0 |
| June | 0 | 0 | 0 | 0 |
| July | 120 | 146 | 0 | 1 |
| August | 0 | 550 | 0 | 31 |
| September | 0 | 254 | 0 | 30 |
| October | 0 | 191 | 0 | 31 |
| November | 0 | 164 | 0 | 30 |
| December | 1 | 38 | 0 | 31 |
| Total | 124 | 1440 | 0 | 214 |

995

3 mth prod
avg prod
331.666667

| |
|-------------------|
| increase/decrease |
| 291.166667 |

District I

1625 N. French Dr., Hobbs, NM 88240

District II

1301 W. Grand Avenue, Artesia, NM 88210

District III

1000 Rio Brazos Road, Aztec, NM 87410

District IV

1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy Minerals and Natural ResourcesOil Conservation Division
1220 South St. Francis Dr.
Santa Fe, NM 87505Form C-104A
Revised June 10, 2003Submit 1 copy of the final affected wells
list along with 1 copy of this form per
number of wells on that list to appropriate
District Office

Change of Operator

Previous Operator Information:

OGRID: 220758
Name: PXP Gulf Coast Inc
Address: 700 Milam Street, Suite 1100
Address: _____
City, State, Zip: Houston, TX 77002-2815

New Operator Information:

Effective Date: 10/1/2003
New Ogrid: 5380-167067
New Name: XTO ENERGY INC.
Address: 810 Houston St.
Address: _____
City, State, Zip: FORT WORTH, TX 76102-
6298

I hereby certify that the rules of the Oil Conservation Division have been complied with and that the information on this form and the attached list of wells is true and complete to the best of my knowledge and belief.

New Operator

Signature: Edwin S. Ryan, Jr.Printed name: Edwin S. Ryan, Jr.Title: SR. V.P. LAND

E-mail _____

Address: _____

Date: 9/10/03Phone: 817.870.2800

Previous operator complete below:

Previous Operator: PXP Gulf Coast IncPrevious OGRID: 220758Signature: Thomas M. GladneyPrinted: Thomas M. Gladney Exec. V.P. Explor. & Prod.

Name: _____

E-mail: tgldney@plainsxp.com

Address: _____

NMOCD Approval

Signature: _____

Printed _____

Name: 378

SUPERVISOR DISTRICT #3

District: _____

OCT 20 2003

Date: _____

Sale 186C
Lot 102

District I
1625 N. French Dr., Hobbs, NM 88240
District II
1301 W. Grand Avenue, Artesia, NM 88210
District III
1000 Rio Brazos Road, Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy Minerals and Natural Resources

Oil Conservation Division
1220 South St. Francis Dr.
Santa Fe, NM 87505

Form C-104A
Revised June 10, 2003

Submit 1 copy of the final affected wells
list along with 1 copy of this form per
number of wells on that list to appropriate
District Office

Change of Operator

Previous Operator Information:

OGRID: 142072
Name: 3 TEC Energy Corporation
Address: 700 Milam Street, Suite 1100
Address: _____
City, State, Zip: Houston, TX 77002-2815

New Operator Information:

Effective Date: 7/1/03
New Ogrid: 220758
New Name: PXP Gulf Coast, Inc.
Address: 700 Milam Street, Suite 1100
Address: _____
City, State, Zip: Houston, TX 77002-2815

I hereby certify that the rules of the Oil Conservation Division have been complied with and that the information on this form and the attached list of wells is true and complete to the best of my knowledge and belief.

New Operator
Signature: Thomas M. Gladney
Printed name: Executive V.P. Exploration & Production
Title: _____
E-mail: TGladney@plainsxp.com
Address: _____
Date: 6/23/03 Phone: 713-821-7100

Previous operator complete below:

Previous Operator: 3 TEC Energy Corporation
Previous OGRID: 142072
Signature: Mark Holt
Printed Name: Mark Holt
E-mail: mholt@3tecenergy.com
Address: _____

| NMOCD Approval | |
|----------------|-------------------------------|
| Signature: | _____ |
| Printed Name: | <u>328</u> |
| | <u>SUPERVISOR DISTRICT #3</u> |
| District: | <u>JUN 27 2003</u> |
| Date: | _____ |

C-104 Operator Changes

| | | | |
|------------------|-------------------------|------------------|-------------------|
| Current OGRID: | 142072 | New OGRID: | 142072 |
| Current Name: | Middle Bay Oil Co. Inc. | New Name: | 3TEC Energy Corp. |
| Address: | 1221 Lamar St. | Address: | 777 Walker |
| Address: | | Address: | Suite 2400 |
| City, State, Zip | Houston, TX 77010 | City, State, Zip | Houston, TX 77002 |

I hereby certify that the rules of the Oil Conservation Division have been complied with and that the information given below is true and complete to the best of my knowledge and belief.

| | |
|--|---|
| Signature: <u>Janna Calhoun</u> | Instructions: Please make two copies of this document for each well listed, one copy for Santa Fe and one for District well files. |
| Printed Name: <u>Janna Calhoun</u> | |
| Title: <u>Operations Administrator</u> | |
| Date: <u>03/24/2000</u> Phone: <u>713-821-7107</u> | |

If this is an operator change, and not strictly a company name change, please complete below:

| | |
|--|---|
| Previous Operator: <u>Middle Bay Oil Co., Inc.</u> | NMOCD Approval |
| Previous OGRID: <u>142072</u> | Signature: <u>[Signature]</u> |
| Signature: <u>Janna Calhoun</u> | Printed Name: <u>SUPERVISOR DISTRICT #3</u> |
| Printed Name: <u>Janna Calhoun</u> | District: <u></u> |
| | Date: <u>MAR 31 2000</u> |

| API NUMBER | U/L | SEC | TWP | RNG | POOL | PROP | Property Name | WELL # |
|------------|-------|-----|-----|-----|------|-------|----------------------|--------|
| 25 | 31522 | A | 12 | 16S | 36E | 40760 | 16646 Kim Harris | 2 |
| 39 | 5448 | N | 17 | 24N | 05W | 71439 | 25225 Apache Federal | 1 |
| 39 | 5548 | M | 8 | 24N | 05W | 71439 | 25225 Apache Federal | 2 |
| 39 | 5555 | 4 | 7 | 24N | 05W | 71439 | 25225 Apache Federal | 4 |
| 39 | 5497 | H | 18 | 24N | 05W | 71439 | 25225 Apache Federal | 5 |
| 39 | 5596 | G | 7 | 24N | 05W | 71439 | 25225 Apache Federal | 6 |
| 39 | 5483 | G | 17 | 24N | 05W | 71439 | 25225 Apache Federal | 7 |
| 39 | 5610 | D | 8 | 24N | 05W | 48450 | 25225 Apache Federal | 8 |
| 39 | 5610 | D | 8 | 24N | 05W | 71599 | 25225 Apache Federal | 8 |
| 39 | 23040 | A | 8 | 24N | 05W | 71599 | 25225 Apache Federal | 8E |
| 39 | 5513 | D | 17 | 24N | 05W | 48450 | 25225 Apache Federal | 9 |
| 39 | 5513 | D | 17 | 24N | 05W | 71599 | 25225 Apache Federal | 9 |
| 39 | 5477 | J | 18 | 24N | 05W | 71599 | 25225 Apache Federal | 10 |
| 39 | 22675 | N | 18 | 24N | 05W | 71599 | 25225 Apache Federal | 10E |
| 39 | 5561 | J | 8 | 24N | 05W | 71599 | 25225 Apache Federal | 11 |
| 39 | 22673 | L | 8 | 24N | 05W | 71599 | 25225 Apache Federal | 11E |
| 39 | 5566 | J | 7 | 24N | 05W | 71599 | 25225 Apache Federal | 13 |
| 39 | 22672 | K | 7 | 24N | 05W | 71599 | 25225 Apache Federal | 13E |
| 39 | 5514 | 1 | 18 | 24N | 05W | 71599 | 25225 Apache Federal | 14 |
| 39 | 60125 | 1 | 7 | 24N | 05W | 71439 | 25225 Apache Federal | 15 |



District I
PO Box 1980, Hobbs, NM 88241-1980
District II
PO Drawer DD, Artesia, NM 88211-0719
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
PO Box 2088, Santa Fe, NM 87504-2088

State of New Mexico
Energy, Minerals & Natural Resources Department

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

Form C-104
Revised February 10, 1994
Instructions on back
Submit to Appropriate District Office
5 Copies

☐ AMENDED REPORT

AUTHORIZATION TO TRANSPORT

| | | |
|---|-----------------------------------|--------------------------------|
| I. Middle Bay Oil Company Two Shell Plaza 777 Walker, Suite 2400 Houston, TX 77002 | | " OGRID Number 142072 |
| | | " Reason for Filing Code CH |
| " API Number 30 - 039 - 05477 | " Pool Name Basin Dakota | " Pool Code 71599 |
| " Property Code 004331 25 778 | " Property Name Apache Federal | " Well Number 10 |

II. Surface Location

| UL or lot no. | Section | Township | Range | Lot Ida | Feet from the | North/South line | Feet from the | East/West line | County |
|---------------|---------|----------|-------|---------|---------------|------------------|---------------|----------------|------------|
| J | 18 | 24N | 5W | | 990 2/11 | North | 990 22.36 | West | Rio Arriba |

Bottom Hole Location

| UL or lot no. | Section | Township | Range | Lot Ida | Feet from the | North/South line | Feet from the | East/West line | County |
|-----------------|------------------------------|-----------------------|-----------------------|------------------------|-------------------------|------------------|---------------|----------------|------------|
| J | 18 | 24N | 5W | | 990 | North | 990 | West | Rio Arriba |
| " Loc Code J | " Producing Method Code F | " Gas Connection Date | " C-129 Permit Number | " C-129 Effective Date | " C-129 Expiration Date | | | | |

III. Oil and Gas Transporters

| " Transporter OGRID | " Transporter Name and Address | " POD | " O/G | " POD ULSTR Location and Description |
|---------------------|--|---------|-------|--------------------------------------|
| 009018 | Giant Refining Company P.O. Box 12999 Scottsdale, AZ 85267 | 0972110 | 0 | |
| 007057 | El Paso Natural Gas Company Box 1492 El Paso, TX 79978 | 0972130 | G | |
| | | | | DEC - 6 1999 |
| | | | | |
| | | | | |

IV. Produced Water

| " POD | " POD ULSTR Location and Description |
|---------|--------------------------------------|
| 0972150 | |

V. Well Completion Data

| " Spud Date | " Ready Date | " TD | " FBTD | " Perforations |
|-------------|------------------------|-------------|----------------|----------------|
| | | | | |
| " Hole Size | " Casing & Tubing Size | " Depth Set | " Sacks Cement | |
| | | | | |
| | | | | |
| | | | | |

VI. Well Test Data

| " Date New Oil | " Gas Delivery Date | " Test Date | " Test Length | " Tbg. Pressure | " Csg. Pressure |
|----------------|---------------------|-------------|---------------|-----------------|-----------------|
| | | | | | |
| " Choke Size | " Oil | " Water | " Gas | " AOF | " Test Method |
| | | | | | |

" I hereby certify that the rules of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Signature: *Janna Calhoun*
Printed name: Janna Calhoun

Title: Operations Administrator

etc: 11-22-99 Phone: (713) 222-6275

OIL CONSERVATION DIVISION

Approved by: *27.8*
SUPERVISOR DISTRICT #3

Title:
Approval Date: DEC - 6 1999

" If this is a change of operator fill in the OGRID number and name of the previous operator

Signature: *Leah Moon Becton* Previous Operator Signature
Floyd Oil Company / Leah Moon Becton / Prod. Admin / 11/24/99
OGRID #007931 Printed Name Title Date

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

I.

| | |
|---|--|
| Operator FLOYD OIL COMPANY | Well API No. 30-039-05477 |
| Address 711 LOUISIANA, STE 1740 HOUSTON, TX 77002 | |
| Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain) | |
| New Well <input type="checkbox"/> | Change in Transporter of: |
| Recompletion <input type="checkbox"/> | Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> |
| Change in Operator <input type="checkbox"/> | Casinghead Gas <input type="checkbox"/> Condensate <input checked="" type="checkbox"/> |
| If change of operator give name and address of previous operator | |

II. DESCRIPTION OF WELL AND LEASE

| | | | | |
|---|-----------------------|---|--|--------------------------------|
| Lease Name APACHE FEDERAL | Well No. 10 | Pool Name, Including Formation BASIN DAKOTA | Kind of Lease State, Federal or Fee <input checked="" type="checkbox"/> | Lease No. TRIBAL #69 |
| Location | | | | |
| Unit Letter J : 2111 Feet From The SOUTH Line and 2236 Feet From The EAST Line | | | | |
| Section 18 Township T24N Range 5W , NMPM, R10 ARriba County | | | | |

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

| | | |
|--|--|-------------------|
| Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> GIANT REFINING COMPANY | Address (Give address to which approved copy of this form is to be sent) P.O. BOX 256 FARMINGTON, NM 87499 | |
| Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> EL PASO NATURAL GAS COMPANY | Address (Give address to which approved copy of this form is to be sent) P.O. BOX 1492 EL PASO, TX 79978 | |
| If well produces oil or liquids, give location of tanks. | Unit J | Sec. 18 |
| | Twp. 24N | Rge. 5W |
| | Is gas actually connected? | When? |
| | YES | UNKNOWN |

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

| | | | | | | | | |
|-------------------------------------|-----------------------------|----------|-----------------|----------|--------------|-------------------|------------|------------|
| Designate Type of Completion - (X) | Oil Well | Gas Well | New Well | Workover | Deepen | Plug Back | Same Res'v | Diff Res'v |
| Date Spudded | Date Compl. Ready to Prod. | | Total Depth | | | P.B.T.D. | | |
| Elevations (DF, RKB, KT, GR, etc.) | Name of Producing Formation | | Top Oil/Gas Pay | | | Tubing Depth | | |
| Perforations | | | | | | Depth Casing Shoe | | |
| TUBING, CASING AND CEMENTING RECORD | | | | | | | | |
| HOLE SIZE | CASING & TUBING SIZE | | DEPTH SET | | SACKS CEMENT | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |

V. TEST DATA AND REQUEST FOR ALLOWABLE

OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours.)

| | | | |
|--------------------------------|-----------------|---|-------------|
| Date First New Oil Run To Tank | Date of Test | Producing Method (Flow, pump, gas lift, etc.) | |
| Length of Test | Tubing Pressure | Casing Pressure | Choke Size |
| Actual Prod. During Test | Oil - Bbls. | Water - Bbls. | Gas - Bbls. |

GAS WELL

| | | | |
|----------------------------------|---------------------------|---------------------------|-------------------|
| Actual Prod. Test - MCF/D | Length of Test | Bbls. Condensate | Qty of Condensate |
| Testing Method (pilot, back pr.) | Tubing Pressure (Shut-in) | Casing Pressure (Shut-in) | Choke Size |

VI. OPERATOR CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Signature *John N. Black*
Printed Name **JOHN N. BLACK** Title **EXE. VP**
Date **6-15-90** Telephone No. **713-222-6275**

OIL CONSERVATION DIVISION

Date Approved **JUN 14 1990**
By *[Signature]*
Title **SUPERVISOR DISTRICT #3**

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

| | | |
|---|---|----------------------|
| Operator FLOYD OIL COMPANY | | Well API No. |
| Address 711 LOUISIANA, STE 1740, HOUSTON, TX 77002 | | |
| Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain) | | |
| New Well <input type="checkbox"/> | Change in Transporter of: | |
| Recompletion <input type="checkbox"/> | Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> | FEB. 10, 1990 |
| Change in Operator <input checked="" type="checkbox"/> | Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/> | |
| If change of operator give name and address of previous operator CHEVRON U.S.A. INC., P.O. BOX 599, DENVER CO 80201 | | |

II. DESCRIPTION OF WELL AND LEASE

| | | | | |
|---|-----------------------|---|--|--------------------------------|
| Lease Name APACHE FEDERAL | Well No. 10 | Pool Name, Including Formation BASIN DAKOTA | Kind of Lease State, Federal or Fee | Lease No. TRIBAL #69 |
| Location Unit Letter J : 2111 Feet From The SOUTH Line and 2236 Feet From The EAST Line Section 18 Township T24N Range 5W , NMPM , RIO ARRIBA Country | | | | |

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

| | | |
|--|---|--|
| Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> PERMIAN CORP. | Address (Give address to which approved copy of this form is to be sent) P.O. BOX 1702 FARMINGTON, NM 87499 | |
| Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> EL PASO NATURAL GAS COMPANY | Address (Give address to which approved copy of this form is to be sent) P.O. BOX 1492 EL PASO, TEXAS 79978 | |
| If well produces oil or liquids, give location of tanks. | Unit J Sec. 18 Twp. 24N Rge. 5W | Is gas actually connected? YES When? UNKNOWN |

If this production is commingling with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

| | | | | | | | | |
|-------------------------------------|-----------------------------|----------|-----------------|----------|-------------------|-----------|------------|------------|
| Designate Type of Completion - (X) | Oil Well | Gas Well | New Well | Workover | Deepen | Plug Back | Same Res'v | Diff Res'v |
| Date Spudded | Date Compl. Ready to Prod. | | Total Depth | | P.B.T.D. | | | |
| Elevations (DF, RKB, RT, GR, etc.) | Name of Producing Formation | | Top Oil/Gas Pay | | Tubing Depth | | | |
| Perforations | | | | | Depth Casing Shoe | | | |
| TUBING, CASING AND CEMENTING RECORD | | | | | | | | |
| HOLE SIZE | CASING & TUBING SIZE | | DEPTH SET | | SACKS CEMENT | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |

V. TEST DATA AND REQUEST FOR ALLOWABLE

OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours.)

| | | | |
|--------------------------------|-----------------|---|------------|
| Date First New Oil Run To Tank | Date of Test | Producing Method (Flow, pump, gas lift, etc.) | |
| Length of Test | Tubing Pressure | Casing Pressure | Choke Size |
| Actual Prod. During Test | Oil - Bbls. | Water - Bbls. | Gas - MCF |
| FEB 26 1990 | | | |

GAS WELL

| | | | |
|----------------------------------|---------------------------|---------------------------|-----------------------|
| Actual Prod. Test - MCF/D | Length of Test | Bbls. Condensate/MMCF | Gravity of Condensate |
| Testing Method (prior, back pr.) | Tubing Pressure (Shut-in) | Casing Pressure (Shut-in) | Choke Size |

VI. OPERATOR CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

John N. Black
Signature
JOHN N. BLACK **EXE V.P.**
Printed Name Title
2-22-90 **713 222-6225**
Date Telephone No.

OIL CONSERVATION DIVISION

Date Approved **FEB 26 1990**
By *Bill D. Shum*
Title **SUPERVISOR DISTRICT #3**

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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| TRANSPORTER | OIL |
| OPERATOR | GAS |
| PRODUCTION OFFICE | |

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-01-78
Format 06-01-83
Page 1

RECEIVED
JUL 12 1985
OIL CON. DIV.
DIST. 3

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator
CHEVRON U.S.A. INC.
Address
P. O. Box 599, Denver, CO 80201
Reason(s) for filing (Check proper box)
☐ New Well ☐ Change in Transporter of:
☐ Recompletion ☐ Oil ☐ Dry Gas
☒ Change in Ownership ☐ Casinghead Gas ☐ Condensate
Other (Please explain)
Name Change Effective 7-1-85
If change of ownership give name and address of previous owner
Gulf Oil Corp., P. O. Box 670, Hobbs, NM 88240

II. DESCRIPTION OF WELL AND LEASE

| | | | | |
|---|-----------------------|---|--|-----------|
| Lease Name <i>Apache Federal</i> | Well No. <i>10</i> | Pool Name, including Formation <i>Basin Dakota</i> | Kind of Lease State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> or Fee | Lease No. |
| Location Unit Letter <i>J</i> : <i>2111</i> Feet From The <i>South</i> Line and <i>2236</i> Feet From The <i>East</i> Line of Section <i>18</i> Township <i>24N</i> Range <i>5W</i> NMPM <i>Rio Arriba</i> County | | | | |

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

| | | |
|--|---|------------------------|
| Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> <i>Permian Corp.</i> | Address (Give address to which approved copy of this form is to be sent) <i>Box 3119, Midland TX 79701</i> | |
| Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> <i>El Paso Natural Gas Co.</i> | Address (Give address to which approved copy of this form is to be sent) <i>Box 1492 El Paso, TX 79999</i> | |
| If well produces oil or liquids, give location of tanks. | Unit <i>J</i> | Sec. <i>18</i> |
| | Twp. <i>24N</i> | Rge. <i>5W</i> |
| | Is gas actually connected? <i>Yes</i> | When <i>Unknown</i> |

If this production is commingled with that from any other lease or pool, give commingling order number:

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.

R. D. Pite
(Signature)

Area Engineer
(Title)

5-31-85
(Date)

OIL CONSERVATION DIVISION

APPROVED *SEP 20 1985*
BY *Franklin D. [Signature]*
TITLE SUPERVISOR DISTRICT *3*

This form is to be filed in compliance with RULE 1104.
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.
All sections of this form must be filled out completely for allowable on new and recompleted wells.
Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.
Separate Forms C-104 must be filed for each pool in multiply completed wells.

| | |
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| OPERATOR | 3 |
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NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

I. Operator
Gulf Oil Corporation
Address
P. O. Box 670, Hobbs, New Mexico 88240
Reason(s) for filing (Check proper box)
New Well: ☐ Change in Transporter oil: ☐ Other (Please explain):
Recompletion: ☐ Change in Ownership: ☐ Change in Transporter, effective 3-1-67

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

| | | | | |
|---|-----------------------|---|---|-----------|
| Lease Name Apache Federal | Well No. 10 | Pool Name, including Formation Basin Dakota | Kind of Lease State, Federal or Fee Indian | Lease No. |
| Location Unit Letter J : 2111 Feet From The south Line and 2336 Feet From The east Line of Section 18 Township 24N Range 5W NMPN Rio Arriba County | | | | |

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

| | | |
|--|---|----------------------|
| Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> | Address (Give address to which approved copy of this form is to be sent) P. O. Box 3119, Midland, Texas 79701 | |
| Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> | Address (Give address to which approved copy of this form is to be sent) Box 1161, El Paso, Texas | |
| If well produces oil or liquids, give location of tanks. Unit J Sec. 18 Twp. 24N Rge. 5W | Is gas actually connected? Yes | When? Unknown |

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

| | | | | | | | | |
|---|-----------------------------|----------|-----------------|----------|-------------------|-----------|--------------|---------------|
| Designate Type of Completion - (X) | Oil Well | Gas Well | New Well | Workover | Deepen | Plug Back | Same Res'tv. | Diff. Res'tv. |
| Date Spudded | Date Compl. Ready to Prod. | | Total Depth | | P.B.T.D. | | | |
| Elevations (DF, RKB, RT, GR, etc.) | Name of Producing Formation | | Top Oil/Gas Pay | | Tubing Depth | | | |
| Perforations | | | | | Depth Casing Shoe | | | |
| TUBING, CASING, AND CEMENTING RECORD | | | | | | | | |
| HOLE SIZE | CASING & TUBING SIZE | | DEPTH SET | | SACKS CEMENT | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

(Test must be after recovery of total volume of load oil and must be equal to or exceed allowable for this depth or be for full 24 hours)

| | | | |
|---------------------------------|-----------------|---|------------|
| Date First New Oil Run To Tanks | Date of Test | Producing Method (Flow, pump, gas lift, etc.) | |
| Length of Test | Tubing Pressure | Casing Pressure | Choke Size |
| Actual Prod. During Test | Oil - Bbls. | Water - Bbls. | Gas - MCF |

GAS WELL

| | | | |
|----------------------------------|---------------------------|---------------------------|-----------------------|
| Actual Prod. Test - MCF/D | Length of Test | Bbls. Condensate/MMCF | Gravity of Condensate |
| Testing Method (pilot, back pr.) | Tubing Pressure (shut-in) | Casing Pressure (shut-in) | Choke Size |

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

ORIGINATOR

(Signature)

Area Production Manager

(Title)

2-24-67

(Date)

OIL CONSERVATION COMMISSION

APPROVED **FEB 24 1967**

BY **Original Signed by Emery C. Arnold**

TITLE **SUPERVISOR DIST. #3**

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.

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| | GAS | 1 |
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| PRORATION OFFICE | | |

**NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS**

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

I. OPERATOR

Operator Gulf Oil Corporation

Address P. O. Box 670, Hobbs, New Mexico 88240

Reason(s) for filing (Check proper box)

| | | |
|---|---|---|
| New Well <input type="checkbox"/> | Change in Transporter of: <input type="checkbox"/> | Other (Please explain) |
| Recompletion <input type="checkbox"/> | Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> | <u>Change in ownership effective 8-1-66</u> |
| Change in Ownership <input checked="" type="checkbox"/> | Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/> | |

If change of ownership give name and address of previous owner British-American Oil Producing Company, P. O. Box 474, Midland, Texas

II. DESCRIPTION OF WELL AND LEASE

| | | | | |
|-------------------------------------|-----------------------|--|--|-----------|
| Lease Name Apache Federal | Well No. 10 | Pool Name, Including Formation Baskin Dakota | Kind of Lease State, Federal or Fee Indian | Lease No. |
| Location | | | | |
| Unit Letter J | 2111 | Feet From The south Line and 2241 | Feet From The east | |
| Line of Section 18 | Township 24 N | Range 5W | NMPM, Rio Arriba | County |

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

| | |
|--|--|
| Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> | Address (Give address to which approved copy of this form is to be sent) |
| McWood Corporation | Box 1702, Farmington, N.M. |
| Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> | Address (Give address to which approved copy of this form is to be sent) |
| El Paso Natural Gas Co. | Box 1161, El Paso, Texas |
| If well produces oil or liquids, give location of tanks. | Is gas actually connected? When |
| Unit J Sec. 18 Twp. 24N Rge. 5W | Yes Unknown |

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

| | | | | | | | | |
|---|-----------------------------|----------|-----------------|----------|-------------------|-----------|-------------|--------------|
| Designate Type of Completion - (X) | Oil Well | Gas Well | New Well | Workover | Deepen | Plug Back | Same Resrv. | Diff. Resrv. |
| Date Spudded | Date Compl. Ready to Prod. | | Total Depth | | P.B.T.D. | | | |
| Elevations (DF, RKB, RT, GR, etc.) | Name of Producing Formation | | Top Oil/Gas Pay | | Tubing Depth | | | |
| Perforations | | | | | Depth Casing Shoe | | | |
| TUBING, CASING, AND CEMENTING RECORD | | | | | | | | |
| HOLE SIZE | CASING & TUBING SIZE | | DEPTH SET | | SACKS CEMENT | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |

V. TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

| | | |
|---------------------------------|-----------------|---|
| Date First New Oil Run To Tanks | Date of Test | Producing Method (Flow, pump, gas lift, etc.) |
| Length of Test | Casing Pressure | Choke Size |
| Actual Prod. During Test | Water-Bbls. | Gas-MCF |

GAS WELL

| | | | |
|----------------------------------|---------------------------|---------------------------|-----------------------|
| Actual Prod. Test-MCF/D | Length of Test | Bbls. Condensate/MMCF | Gravity of Condensate |
| Testing Method (pilot, back pr.) | Tubing Pressure (Shut-in) | Casing Pressure (Shut-in) | Choke Size |

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Emery C. Arnold
(Signature)
Area Production Manager
(Title)
8-1-66
(Date)

OIL CONSERVATION COMMISSION

APPROVED AUG 3 1966, 19

BY Original Signed by Emery C. Arnold

TITLE SUPERVISOR DIST. #3

This form is to be filed in compliance with RULE 1104.
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.
All sections of this form must be filled out completely for allowable on new and recompleted wells.
Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.
Separate Forms C-104 must be filed for each pool in multiply completed wells.

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| TRANSPORTER | OIL |
| | GAS |
| OPERATOR | |
| PRODUCTION OFFICE | |

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

I. COMPANY

The British-American Oil Producing Company

P. O. Drawer 330, Farmington, N.M.

Reason(s) for filing (check proper box)

Change in Transporter of: ☐ Oil ☐ Dry Gas ☐ Gashead Gas ☐ Condensate ☐

Other (Please explain)

If change of ownership give name and address of previous owner **Gulf Oil Corporation**

II. DESCRIPTION OF WELL AND LEASE

Well Name **JENNIFER Apache** Well No. **10** Pool Name, including Formation **Basin Dakota** Kind of Lease **Fed.**

Location: **2111** Feet From The **South** Line and **2241** Feet From The **East**

Line of Section **18** Township **24N** Range **5W** N.M.P.M. **Rio Arriba** County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☒ **McWood Corp** Address (Give address to which approved copy of this form is to be sent) **P.O. Box 1702, Farmington, New Mexico**

Name of Authorized Transporter of Gashead Gas ☒ or Dry Gas ☐ **El Paso Natural Gas Company** Address (Give address to which approved copy of this form is to be sent) **P. O. Box 1161, El Paso, Texas**

If well produces oil or liquids, give location of tanks. Unit **J** Sec. **18** Twp. **24N** Rge. **5W** Is gas actually connected? **Yes** When

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

Designate Type of Completion - (X) ☒ Oil Well ☐ Gas Well ☐ New Well ☐ Workover ☐ Deepen ☐ Plug Back ☐ Same Res'v. ☐ Diff. Res'v.

Date Drilled ☐ Date Compl. Ready to Prod. ☐ Total Depth ☐ P.B.T.D. ☐

Name of Producing Formation ☐ Top Oil/Gas Pay ☐ Tubing Depth ☐

Depth Casing Shoe ☐

TUBING, CASING, AND CEMENTING RECORD

| HOLE SIZE | CASING & TUBING SIZE | DEPTH SET | SACKS CEMENT |
|-----------|----------------------|-----------|--------------|
| | | | |
| | | | |
| | | | |

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tanks ☐ Date of Test ☐ Producing Method (Flow, pump, gas lift, etc.) ☐

Length of Test ☐ Tubing Pressure ☐ Casing Pressure ☐ Choke Size ☐

Actual Prod. During Test ☐ Oil - Bbls. ☐ Water - Bbls. ☐ Gas - MCF ☐

GAS WELL

Actual Prod. Test - MCF/D ☐ Length of Test ☐ Bbls. Condensate/MMCF ☐ Gravity ☐

Testing Method (pilot, back pr.) ☐ Tubing Pressure ☐ Casing Pressure ☐ Choke ☐

VI. CERTIFICATE OF COMPLIANCE

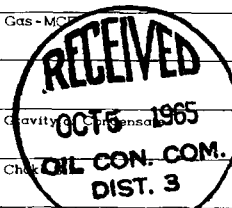
I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

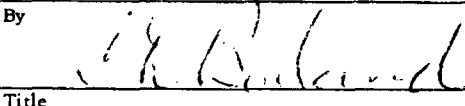
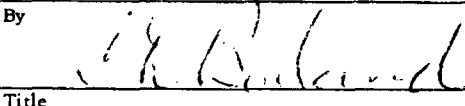
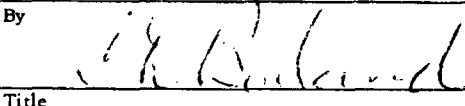
Original Signed By: **Nae R. Stone** (Signature)
Field Superintendent (Title)
October 4, 1965 (Date)

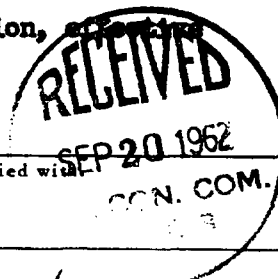
OIL CONSERVATION COMMISSION

APPROVED **OCT 5 1965**, 19
BY **Original Signed Emory C. Arnold**
TITLE **Supervisor Dist. #3**

This form is to be filed in compliance with RULE 1104.
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.
All sections of this form must be filled out completely for allowable on new and recompleted wells.
Fill out Sections I, II, III, and VI only for changes of owner, well name or number, or transporter, or other such change of condition.
Separate Forms C-104 must be filed for each pool in multiply completed wells.



| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|--|---------------------------|------------------------------|---|---|-----------------------|-------------|--------------------------------|-----------------------|-------------------------|----------------------|-------------------------|---|--|--|-----------------------------|--|--|--|---|--|--|--|-------------------------|----------------------|-------------------------|---------------------|--|--|--|--|--|--|-------------------------------|--|--|---|--|--|--|--|--|--|--|--|---|--|------------------------------|--|--|--|--------------------------------|--|------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|---|--|--|--|--|--|--|--|--|--|--|--|-----------------------------|--|--|----|--|--|--|--|--|---|--|--|--|--|--|--|--|--|----------------------------|--|--|---|--|--|
| <table border="1" style="width:100%; border-collapse: collapse;"> <tr><td style="text-align: center;">NUMBER OF COPIES RECEIVED</td></tr> <tr><td style="text-align: center;">DISTRIBUTION</td></tr> <tr><td>SANTA FE</td></tr> <tr><td>FILE</td></tr> <tr><td>U.S.G.S.</td></tr> <tr><td>LAND OFFICE</td></tr> <tr> <td>TRANSPORTER</td> <td>OIL</td> </tr> <tr> <td>PRODUCTION OFFICE</td> <td>GAS</td> </tr> <tr><td>OPERATOR</td></tr> </table> | NUMBER OF COPIES RECEIVED | DISTRIBUTION | SANTA FE | FILE | U.S.G.S. | LAND OFFICE | TRANSPORTER | OIL | PRODUCTION OFFICE | GAS | OPERATOR | <p>NEW MEXICO OIL CONSERVATION COMMISSION SANTA FE, NEW MEXICO</p> <p>CERTIFICATE OF COMPLIANCE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS</p> <p>FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE</p> | <p>FORM C-110 (Rev. 7-60)</p> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| DISTRIBUTION | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| SANTA FE | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| FILE | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| U.S.G.S. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| LAND OFFICE | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| TRANSPORTER | OIL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| PRODUCTION OFFICE | GAS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| OPERATOR | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td colspan="4">Company or Operator Gulf Oil Corporation</td> <td>Lease Apache Federal</td> <td>Well No. 10</td> </tr> <tr> <td>Unit Letter J</td> <td>Section 18</td> <td>Township 24-N</td> <td>Range 5-W</td> <td colspan="2">County Hio Arriba</td> </tr> <tr> <td colspan="4">Pool Basin Dakota</td> <td colspan="2">Kind of Lease (State, Fed, Fee) Federal</td> </tr> <tr> <td colspan="2">If well produces oil or condensate give location of tanks</td> <td>Unit Letter J</td> <td>Section 18</td> <td>Township 24-N</td> <td>Range 5-W</td> </tr> <tr> <td colspan="3">Authorized transporter of oil <input type="checkbox"/> or condensate <input checked="" type="checkbox"/></td> <td colspan="3">Address (give address to which approved copy of this form is to be sent)</td> </tr> <tr> <td colspan="3">The McWood Corporation</td> <td colspan="3">306 V & J Tower Building, MIDLAND, Midland, Tex.</td> </tr> <tr> <td colspan="6" style="text-align: center;">Is Gas Actually Connected? 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R. KENDRICK</td> <td colspan="3">  Title Area Production Manager </td> </tr> <tr> <td colspan="3">Title PETROLEUM ENGINEER DIST. NO. 3</td> <td colspan="3">Company Gulf Oil Corporation</td> </tr> <tr> <td colspan="3">Date SEP 20 1962</td> <td colspan="3">Address Box 2167, Hobbs, New Mexico</td> </tr> </table> | | | Company or Operator Gulf Oil Corporation | | | | Lease Apache Federal | Well No. 10 | Unit Letter J | Section 18 | Township 24-N | Range 5-W | County Hio Arriba | | Pool Basin Dakota | | | | Kind of Lease (State, Fed, Fee) Federal | | If well produces oil or condensate give location of tanks | | Unit Letter J | Section 18 | Township 24-N | Range 5-W | Authorized transporter of oil <input type="checkbox"/> or condensate <input checked="" type="checkbox"/> | | | Address (give address to which approved copy of this form is to be sent) | | | The McWood Corporation | | | 306 V & J Tower Building, MIDLAND, Midland, Tex. | | | Is Gas Actually Connected? 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| Company or Operator Gulf Oil Corporation | | | | Lease Apache Federal | Well No. 10 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Unit Letter J | Section 18 | Township 24-N | Range 5-W | County Hio Arriba | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Pool Basin Dakota | | | | Kind of Lease (State, Fed, Fee) Federal | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Authorized transporter of oil <input type="checkbox"/> or condensate <input checked="" type="checkbox"/> | | | Address (give address to which approved copy of this form is to be sent) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| The McWood Corporation | | | 306 V & J Tower Building, MIDLAND, Midland, Tex. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Is Gas Actually Connected? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Authorized transporter of casing head gas <input type="checkbox"/> or dry gas <input checked="" type="checkbox"/> | | Date Connected Unk | Address (give address to which approved copy of this form is to be sent) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| El Paso Natural Gas Co. | | Unk | Box 997, Farmington, New Mexico | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| If gas is not being sold, give reasons and also explain its present disposition: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <p>REASON(S) FOR FILING (please check proper box)</p> <p>New Well <input type="checkbox"/> Change in Ownership <input type="checkbox"/></p> <p>Change in Transporter (check one) Other (explain below)</p> <p>Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/></p> <p>Casing head gas . <input type="checkbox"/> Condensate.. <input checked="" type="checkbox"/></p> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| <p>The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with</p> <p>Executed this the <u>27th</u> day of <u>September</u>, 19 <u>62</u>.</p> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| OIL CONSERVATION COMMISSION | | | By | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Approved by Original Signed By A. R. KENDRICK | | |  Title Area Production Manager | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Title PETROLEUM ENGINEER DIST. NO. 3 | | | Company Gulf Oil Corporation | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Date SEP 20 1962 | | | Address Box 2167, Hobbs, New Mexico | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |



NEW MEXICO OIL CONSERVATION COMMISSION
SANTA FE, NEW MEXICO

Form C-110
Revised 7/1/55

(File the original and 4 copies with the appropriate district office)

CERTIFICATE OF COMPLIANCE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Company or Operator Gulf Oil Corporation Lease Apache Federal

Well No. 10 Unit Letter J S 18 T 24N R 5W Pool Basin-Dakota

County Rio Arriba Kind of Lease (State, Fed. or Patented) Fed. (Indian)

If well produces oil or condensate, give location of tanks: Unit J S 18 T 24N R 5W

Authorized Transporter of Oil or Condensate El Paso Natural Gas Products Company

Address Box 1161, El Paso, Texas

(Give address to which approved copy of this form is to be sent)

Authorized Transporter of Gas _____

Address _____ Date Connected _____

(Give address to which approved copy of this form is to be sent)

If Gas is not being sold, give reasons and also explain its present disposition:

Reasons for Filing: (Please check proper box) New Well (X)

Change in Transporter of (Check One): Oil () Dry Gas () C'head () Condensate ()

Change in Ownership () Other ()

Remarks: (Give explanation below)

Dakota Condensate will be trucked by Foutz & Bursum Trucking Co., Inc.,
Box 307, Farmington, New Mexico to El Paso Natural Gas Products Company
receiving station at Lybrook, New Mexico. It will then be pipelined to
the Bisti.

The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.

Executed this the 13th day of April 19 61

ORIGINAL SIGNED

By By: T. A. TRAX

Approved APR 17 1961 19

Title Area Production Manager

OIL CONSERVATION COMMISSION

Original Signed By

By A. R. KENDRICK

Company Gulf Oil Corporation

Address Production Department

Title PETROLEUM ENGINEER DIST. NO. 3

Box 1346, Salt Lake City, Utah

NEW MEXICO OIL CONSERVATION COMMISSION
SANTA FE, NEW MEXICO

Form C-110
Revised 7/1/55

(File the original and 4 copies with the appropriate district office)

CERTIFICATE OF COMPLIANCE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Company or Operator Gulf Oil Corporation Lease Apache Federal
Well No. 10 Unit Letter J S 18 T 24N R 5W Pool Basin-Dakota
County Rio Arriba Kind of Lease (State, Fed. or Patented) Fed. (Indian)
If well produces oil or condensate, give location of tanks: Unit S T R
Authorized Transporter of Oil or Condensate _____

Address _____
(Give address to which approved copy of this form is to be sent)
Authorized Transporter of Gas El Paso Natural Gas Company
Address El Paso, Texas Date Connected *
(Give address to which approved copy of this form is to be sent)
If Gas is not being sold, give reasons and also explain its present disposition:
*Waiting for connection.

Reasons for Filing: (Please check proper box) New Well (X)
Change in Transporter of (Check One): Oil () Dry Gas () C'head () Condensate ()
Change in Ownership () Other ()
Remarks: _____
(Give explanation below)

The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.

Executed this the 12th day of January 19 61

ORIGINAL SIGNED

By By: T. A. TRAX

Approved _____ 19 _____

Title Area Production Manager

OIL CONSERVATION COMMISSION

Company Gulf Oil Corporation

By Original Signed Emery G. Arnold

Address Production Department

Title Supervisor Dist. # 3

Box 1346, Salt Lake City, Utah

| | |
|---------------------------|------------|
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| U.S.G.S. | |
| LAND OFFICE | |
| TRANSPORTER | OIL GAS |
| PRODUCTION OFFICE | |
| OPERATOR | |

NEW MEXICO OIL CONSERVATION COMMISSION

Santa Fe, New Mexico

(Form C-104)
Revised 7/1/57

REQUEST FOR (OIL) - (GAS) ALLOWABLE

New Well
Recompletion

This form shall be submitted by the operator before an initial allowable will be assigned to any completed Oil or Gas well. Form C-104 is to be submitted in QUADRUPLICATE to the same District Office to which Form C-101 was sent. The allowable will be assigned effective 7:00 A.M. on date of completion or recompletion, provided this form is filed during calendar month of completion or recompletion. The completion date shall be that date in the case of an oil well when new oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

Salt Lake City, Utah 2-24-61

(Place)

(Date)

WE ARE HEREBY REQUESTING AN ALLOWABLE FOR A WELL KNOWN AS:

Gulf Oil Corporation Apache Federal, Well No. 10, in NW $\frac{1}{4}$ SE $\frac{1}{4}$,
(Company or Operator) (Lease)

J, Sec. 18, T. 24N, R. 5W, NMPM, Basin-Dakota Pool
Unit Letter

Rio Arriba County. Date Spudded 11-1-60 Date Drilling Completed 11-18-60

Please indicate location:

| | | | |
|---|---|---|---|
| D | C | B | A |
| E | F | G | H |
| L | K | J | I |
| M | N | O | P |

Elevation DE 6486' Total Depth 6794' PBD 6733'

Top Oil/Gas Pay 6544' Name of Prod. Form. Basin-Dakota

PRODUCING INTERVAL -

Perforations Notched @6587'; perf 6544'-6584'

Open Hole Depth Casing Shoe 6756' Tubing 6580'

OIL WELL TEST -

Natural Prod. Test: bbls. oil, bbls water in hrs, min. Size

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): bbls. oil, bbls water in hrs, min. Size

GAS WELL TEST -

Natural Prod. Test: MCF/Day; Hours flowed Choke Size

Method of Testing (pitot, back pressure, etc.):

Test After Acid or Fracture Treatment: 1808 MCF/Day; Hours flowed 3 hrs

Choke Size 3/4" Method of Testing: 1 pt Back Pressure

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): 33,600 gal wtr treated w/1% ca cl & 5#/gal J-98 and 24000# 20/40 sand

Casing Tubing Date first new
Press. Press. oil run to tanks

Oil Transporter

Gas Transporter El Paso Natural Gas Co.

Remarks:

I hereby certify that the information given above is true and complete to the best of my knowledge.

Approved: , 19 Gulf Oil Corporation
(Company or Operator)

OIL CONSERVATION COMMISSION

ORIGINAL SIGNED

By: T. A. TRAY (Signature)

By: (Original Signed Emery C. Arnold) Title Area Production Manager

Send Communications regarding well to:

Name Gulf Oil Corporation, Prod. Dept.

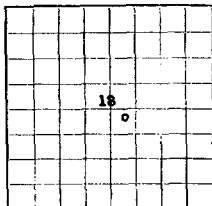
Address Box 1346, Salt Lake City, Utah

Title Supervisor-Dist. # 3

U. S. LAND OFFICE **Apache**

SERIAL NUMBER

5167111-11111-1111 - 62839



LOCATE WELL CORRECTLY

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

LOG OF OIL OR GAS WELL

Company Gulf Oil Corporation Address Prod. Dept., Box 1346, Salt Lake City, Utah
 Lessor or Tract Apache Federal Field Basin-Dakota State New Mexico
 Well No. 10 Sec. 18 T. 24 N. R. 5 W. Meridian NMPM County Rio Arriba
 Location 2111 ft. [N] of [E] Line and 2241 ft. [W] of [E] Line of Section 18 Elevation 6436'
 The information given herewith is a complete and correct record of the well and all work done thereon so far as can be determined from all available records. **ORIGINAL SIGNED**
 Signed By: J. A. TRAX
 Date January 12, 1961 Title Area Production Manager

The summary on this page is for the condition of the well at above date.

Commenced drilling November 1, 1960 Finished drilling November 18, 1960OIL OR GAS SANDS OR ZONES
(Denote gas by G)

No. 1, from 2118' to 2170' (G) No. 4, from 6700' to 6720' (G2)
 No. 2, from 5400' to 5500' No. 5, from _____ to _____
 No. 3, from 6569' to 6600' (G) No. 6, from _____ to _____

IMPORTANT WATER SANDS

No. 1, from NONE TESTED to _____ No. 3, from _____ to _____
 No. 2, from _____ to _____ No. 4, from _____ to _____

CASING RECORD

| Size casing | Weight per foot | Threads per inch | Make | Amount | Kind of shoe | Cut and pulled from | Perforated | Purpose |
|----------------------------|-----------------|------------------|------|---------|--------------|---------------------|-------------|------------|
| 8-5/8" | 24 | 8 | SS | 193.85 | Float Collar | | AS44" 6584" | Production |
| 8-5/8" | 18.8 | 8 | SS | 708.75 | | | | |
| 8-5/8" | 18 | 8 | SS | 5952.14 | | | | |
| 8-5/8" | 18.0 | 8 | SS | 30.21 | | | | |
| 1st Stage - Cam Guide Shoe | | | | | | | | |
| 2nd Stage - Stage Collar | | | | | | | | |

MUDDING AND CEMENTING RECORD

| Size casing | Where set | Number sacks of cement | Method used | Mud gravity | Amount of mud used |
|---|-----------|------------------------|-------------|-------------|--------------------|
| 8-5/8" | 200' | 175 | Pump & Plug | | |
| 8-5/8" | 6756' | | | | |
| 1st stage cam 6770' w/221 ex cam and 83 ex Diesel "B", 24 ex oil. | | | | | |
| 2nd stage thru Baker stage collar 6770' w/110 ex cam | | | | | |

PLUGS AND ADAPTERS

Heaving plug—Material _____ Length _____ Depth set _____
 Adapters—Material _____ Size _____

SHOOTING RECORD

| Size | Shell used | Explosive used | Quantity | Date | Depth shot | Depth cleaned out |
|------|------------|----------------|----------|------|------------|-------------------|
| | | | | | | |
| | | | | | | |

TOOLS USED

Rotary tools were used from Surface feet to TD feet, and from _____ feet to _____ feet
 Cable tools were used from _____ feet to _____ feet, and from _____ feet to _____ feet

DATES

_____ 19____ SI for pipeline connection
EXPERIMENTAL IP Test December 30, 1960
 The production for the first 24 hours was _____ barrels of fluid of which _____ % was oil; _____ %
 emulsion; _____ % water; and _____ % sediment. Gravity, °Bé.

If gas well, cu. ft. per 24 hours 1808 MCF Gallons gasoline per 1,000 cu. ft. of gas _____Rock pressure, lbs. per sq. in. 2360#

EMPLOYEES

_____, Driller _____, Driller
 _____, Driller _____, Driller

FORMATION RECORD

| FROM- | TO- | TOTAL FEET | FORMATION |
|-------|-----------------|------------|--------------------|
| | | | E-LOG TOPS: |
| | Pictured Cliffs | 2120' | Pt. Lookout 4309' |
| | Laventana | 2953' | Mancoes 4518' |
| | Cliff House | 3446' | Gallup 5400' |
| | Manefee | 3790' | 3rd Gallup 5558' |
| | | | Dakota 6545' |
| | | | Morrison 6754' |
| | TD 6794' | PBTD 6733' | |

Notched in 3/4" csg 66587'. Filled hole and broke down formation w/2520 gal wtr treated w/.3% of M-38 and 34# per 1000 gal of J-101. Treated thru csg w/20,160 gal of wtr treated w/.3% M-38, 34# per 1000 gal of J-101 and 35# per 1000 gal of J-98 as follows: 2500 gal w/1# per gal 20/40 sd; 6300 gal w/.12# per gal of 8/12 walnut shells; 6300 gal w/.15# per gal of 8/12 walnut shells; 5040 gal w/.18# per gal of 8/12 walnut shells, flushed w/6720 gal of untreated wtr. Inj rate for treatment 30 bpm. Max pressure 3200#; min 2500#. ISIP 2400#, 10 min 1975#, 1 hr 1675#, 4 hrs 1350#. ~~INJECTOR~~ let perf 6544'-6584', 160 holes. Acidized w/250 gal of breakdown acid at rate of 1/2 bpm. Max pressure 2000#, broke to 1000# after 1/2 of acid was in formation. At end of treatment pressure was 1200#. In 3 min it dropped to 900#, in 30 min to 900#, in 30 min to 50#. Swabbed back. Fraced w/33,600 gal wtr treated w/1% ca cl and 5# per 100 gal of J-98 and 3400# 20/40 sand. Max pressure 3400#. Min pressure 2800#. Avg inject rate 37 bpm. Instant SI 2200#, 1800# 10 min SI, 1025# 1 hr 30 min SI. Teck BHP and open flow tests. BHP 66495' 2360#. Open flow by 1 pt method 1808 MCF.

OIL CONSERVATION COMMISSION
P. O. BOX 871
SANTA FE, NEW MEXICO



October 28, 1960

C
O
P
Y

Gulf Oil Corporation
P. O. Box 1346
Salt Lake City 10, Utah

Attention: Mr. Thomas A. Trax

Administrative Order NSL-235

Gentlemen:

Reference is made to your application for approval of an unorthodox well location for your Apache Federal Well No. 10 to be located 2111 feet from the South line and 2236 feet from the East line of Section 18, Township 24 North, Range 5 West, Dakota Producing Interval, Rio Arriba County, New Mexico.

It is our understanding that this unorthodox well location is based upon extreme topographic conditions in the SE/4 of said Section 18.

By authority granted me under provisions of Order No. R-1287, you are hereby granted approval for the above described unorthodox well location. You must also obtain like approval from the U. S. Geological Survey if the well is located on land subject to the jurisdiction of the United States Geological Survey.

Very truly yours,

A. L. PORTER, Jr.,
Secretary-Director

ALP/OEP/og

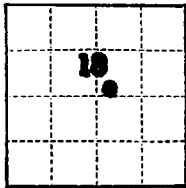
cc: Oil Conservation Commission - Aztec
U. S. Geological Survey - Farmington

(SUBMIT IN TRIPLICATE)

Indian Agency Apache

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

Jicarilla Tribal #69
Allottee 62839
Lease No. _____



SUNDRY NOTICES AND REPORTS ON WELLS

RECEIVED

| | | | |
|---|---|--|-------------------------|
| NOTICE OF INTENTION TO DRILL | | SUBSEQUENT REPORT OF WATER SHUT-OFF | |
| NOTICE OF INTENTION TO CHANGE PLANS | | SUBSEQUENT REPORT OF SHOOTING OR ACIDIZING | NOV 7 1960 |
| NOTICE OF INTENTION TO TEST WATER SHUT-OFF | | SUBSEQUENT REPORT OF ALTERING CASING | |
| NOTICE OF INTENTION TO REDRILL OR REPAIR WELL | | SUBSEQUENT REPORT OF REDRILLING OR REPAIR | U. S. GEOLOGICAL SURVEY |
| NOTICE OF INTENTION TO SHOOT OR ACIDIZE | | SUBSEQUENT REPORT OF ABANDONMENT | CANYINGTON, NEW MEXICO |
| NOTICE OF INTENTION TO PULL OR ALTER CASING | | SUPPLEMENTARY WELL HISTORY | |
| NOTICE OF INTENTION TO ABANDON WELL | X | | |

(INDICATE ABOVE BY CHECK MARK NATURE OF REPORT, NOTICE, OR OTHER DATA)

November 3, 1960

Apache-Federal
Well No. 10 is located 2111 ft. from N line and 2241 ft. from E line of sec. 18
NW NE SE Sec 18 14N 3W N14W
(1/4 Sec. and Sec. No.) (Twp.) (Range) (Meridian)
Undesignated Dakota Rio Arriba New Mexico
(County or Subdivision) (State or Territory)

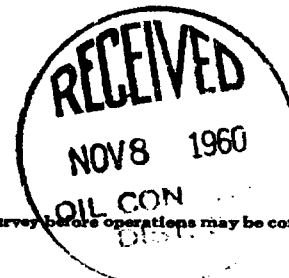
ground level
The elevation of the derrick floor above sea level is 6470 ft.

DETAILS OF WORK

(State names of and expected depths to objective sands; show sizes, weights, and lengths of proposed casings; indicate mudding jobs, cementing points, and all other important proposed work)

Spudded 11-1-60.

Run 6 jts (193.86') 8-5/8", 24", 8 WT, Grade J, Range 2, SS csg. Con at 208' w/175 sz reg con, 2% ea sl. Plug to 177'. Con circ.



I understand that this plan of work must receive approval in writing by the Geological Survey before operations may be commenced.

Company Gulf Oil Corporation
Address Production Department
Box 1246
Salt Lake City, Utah
By _____
Title Area Clerical Supervisor

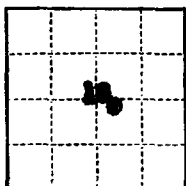
(SUBMIT IN TRIPLICATE)

Indian Agency Apache

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

Allottee Navajo Tribal

Lease No. 62939



SUNDRY NOTICES AND REPORTS ON WELLS

| | | | |
|---|-------------------------------------|--|--|
| NOTICE OF INTENTION TO DRILL | <input checked="" type="checkbox"/> | SUBSEQUENT REPORT OF WATER SHUT-OFF | |
| NOTICE OF INTENTION TO CHANGE PLANS | | SUBSEQUENT REPORT OF SHOOTING OR ACIDIZING | |
| NOTICE OF INTENTION TO TEST WATER SHUT-OFF | | SUBSEQUENT REPORT OF ALTERING CASING | |
| NOTICE OF INTENTION TO REDRILL OR REPAIR WELL | | SUBSEQUENT REPORT OF REDRILLING OR REPAIR | |
| NOTICE OF INTENTION TO SHOOT OR ACIDIZE | | SUBSEQUENT REPORT OF ABANDONMENT | |
| NOTICE OF INTENTION TO PULL OR ALTER CASING | | SUPPLEMENTARY WELL HISTORY | |
| NOTICE OF INTENTION TO ABANDON WELL | | | |

(INDICATE ABOVE BY CHECK MARK NATURE OF REPORT, NOTICE, OR OTHER DATA)

October 29

19 60

Well No. 10 is located 2111 ft. from S line and 2241 ft. from E line of sec. 10

Sec 10
(1/4 Sec. and Sec. No.)

24N
(Twp.)

9W
(Range)

104E
(Meridian)

Undesignated Dakota
(Field)

Rio Arriba
(County or Subdivision)

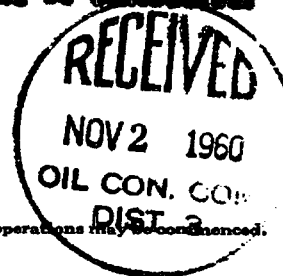
New Mexico
(State or Territory)

The elevation of the ground level 6470 ft.

DETAILS OF WORK

(State names of and expected depths to objective sands; show sizes, weights, and lengths of proposed casings; indicate mudding jobs, cementing points, and all other important proposed work)

It is proposed to drill a development well to test the Pictured Cliffs, Gallup and Dakota to an approximate depth of 6000'. Approx 250' of 8-3/8" surface cas will be set and cemented to top. If well is productive, 2 1/2" cas will be set and cemented through all possible pays. All possible producing zones will be adequately tested by 5-logs, DST's, etc. Should commercial production be found in the Gallup formation, an application for dual completion will be considered.



I understand that this plan of work must receive approval in writing by the Geological Survey before operations may be commenced.

Company Gulf Oil Corporation

Address Production Department

P. O. Box 1346

Salt Lake City, Utah

ORIGINAL SIGNED
By T. A. [illegible]

By

Title Area Production Manager

) CL 5 - USGS

Approved subject to State approval of the northward location.

NEW MEXICO OIL CONSERVATION COMMISSION
Well Location and Acreage Dedication Plat

SECTION A.

Date October 20, 1960

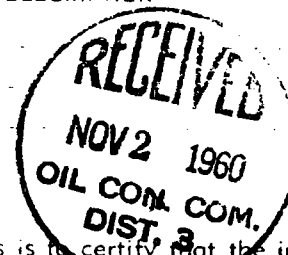
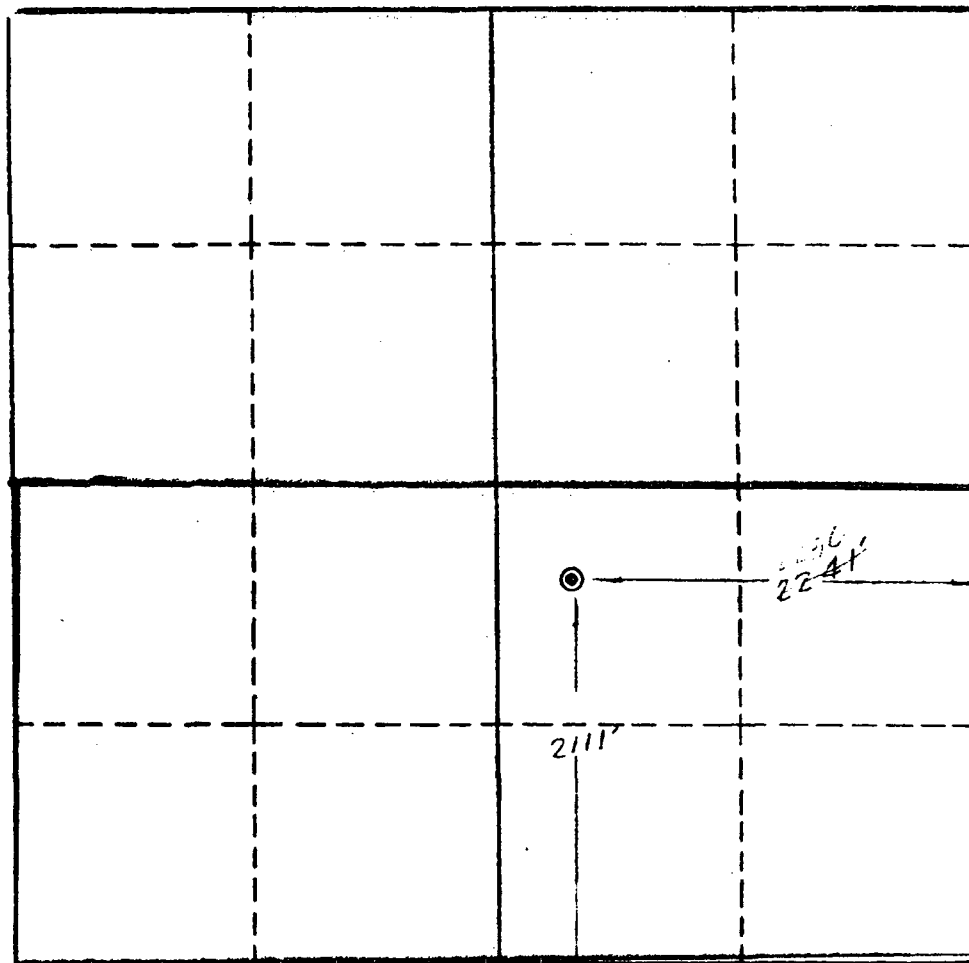
Operator Gulf Oil Corporation Lease Apache Federal
 Well No. 20 Unit Letter 8 Section 18 Township 24-North Range 5-West NMPM
 Located 2111 Feet From South Line, 2241 Feet From East Line
 County Rio Arriba G. L. Elevation 6470 Dedicated Acreage 5 321.50 Acres
 Name of Producing Formation Apache Pool

1. Is the Operator the only owner* in the dedicated acreage outlined on the plat below? Yes ☒ No ☐
2. If the answer to question One is "No," have the interests of all the owners been consolidated by communitization agreement or otherwise? Yes ☐ No ☐ If answer is "Yes," Type of Consolidation _____
3. If the answer to question Two is "No," list all the owners and their respective interests below:

OWNER

LAND DESCRIPTION

SECTION B.



This is to certify that the information in Section A above is true and complete to the best of my knowledge and belief.

Gulf Oil Corporation
 OPERATOR
ORIGINAL SIGNED
By: J. A. TRAX
 Area Production Manager
 Production Department
 P.O. Box 1246, Salt Lake
 ADDRESS: Salt Lake, Utah

This is to certify that the well location shown on the plat in Section B was plotted from field notes of actual surveys made by me or under my supervision and that the same is true and correct to the best of my knowledge and belief.

Date Surveyed 10-25-60
Four States Engineering Co.
 FARMINGTON, NEW MEXICO

Ernest J. Coburn
 REGISTERED ENGINEER OR
 LAND SURVEYOR

Certificate No. 1545

3-25-68

GULF OIL CORPORATION

WELLS REQUIRING FILE CORRECTIONS ONLY

| <u>LEASE NAME & WELL NUMBER</u> | <u>LOCATION</u> | <u>POOL</u> | <u>PRESENT ACREAGE</u> | <u>CORRECT ACREAGE</u> |
|-------------------------------------|-----------------|-----------------|----------------------------|----------------------------|
| Apache Federal #14 | D-18-24N-5W | Basin Dakota | N 320 | N 321.61 ✓ |
| Apache Federal #10 | J-18-24N-5W | Basin Dakota | S 320 | S 321.50 ✓ |
| Western Federal #3 | L-7-26N-11W | Gallegos Gallup | 40 | 39.35 ✓ |