APPENDICES

Appendix A: Records for Original Eunice Gas Plant SWD #1

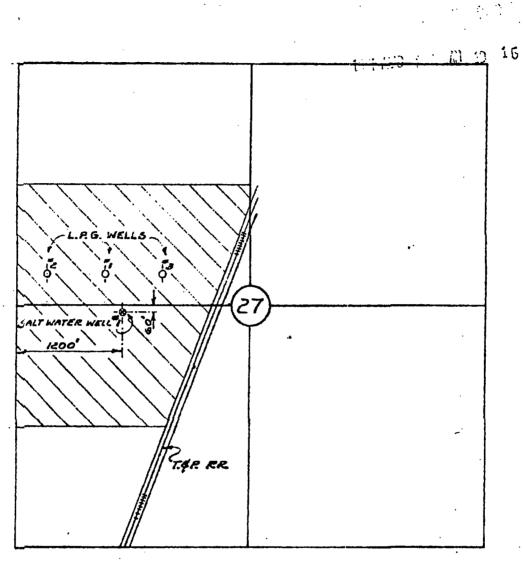
- Intent to Drill, 8/23/1961
- Well Record, 11/21/1961
- C-103 Drilling Reports, 1961
- Change of Operator (Skelley to Getty) 2/18/1977
- C-103, Remedial Work, 11/13/1983
- Change of Operator (Getty to Texaco) 6/1/1985
- C-103, Casing and Cement Repairs, 2/22/1991
- Change of Operator (Texaco Production to Texaco E&P) 7/8/1991
- C-103, Packer Replacement, 5/21/1995
- Change of Operator (Dynergy to Targa Midstream), 8/26/1998

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NEW M ICO OIL CONSERVATION COMMI IN Santa Fe, New Mexico

Form C-101 Revised (12/1/55)

	SERVATIO E, NEW MI	N CO	MMISSION	Columbia		(Date)	
Gentlemen							•
You a	re hereby n	otified t	that it is our i	intention to commence th	ne Drilling of a well to be	known as	
			- 100 C	(Compal.,	or Op. (1)	de bacca - 1 2mp = 11 Gp ; 2 v v c c v v = 28 Gu s s v	•
			(Theares)		, Well No1		(Unit)
located	1200		et from the	Jaok		line and 60	feet from the
					27 , T 22-S	, R37-	·E, NMPM.
(GIVE LC	CATION F	KOM :	SECTION LIP	•	and Gas Lease is No		
D	C !	В	A	If patented land the or Address. Box	wher is Skelly Cill 1650, Tulsa, Okla	. Company shoma	
E	F	G	Н	The status of plugging	bond isOn File		
r	к	J	1	Drilling Contractor	Not selected		:
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We pr	opose to use	the foll	lowing strings		FEOGRAM		Icet.
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					Sincerely yours,		
Approved				19	<i>-1</i>	Ompany (Company or Operator	



SECTION 27-225-37E LEA COUNTY, NEW MEXICO

SKELLY OIL COMPANY	1	MANUFACTURING D	EPARTMENT		
LOCATION OF SALT WATER DISPOSAL WELL#1.					
PLANT EUNICE #1	DRAWN JCK	A. F. E. 7926	GA-935		
DATE 7-20-61 SCALE /"=1000	CH'K'D F. M.	APP'VD DE	GA-233		

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NEW MEXICO OIL CONSERVATION COMMUSSION

Santa Fe, New Mexico

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NEW MEXICO OIL CONSERVATION COMMISSION FORM C-103 (Rev 3-55) MISCELLANEOUS REPORTS ON WELLS (Submit to appropriate District Office as per Commission Rule 1106) Name of Company Address Skelly Oil Company Box 38 - Hobbs, New Section Township Vell No. Unit Letter Lease Eunice Gasoline Plant SWD County Date Work Performed Langlie Mettir THIS IS A REPORT OF: (Check appropriate block) Beginning Drilling Operations Y Casing Test and Cement Job Other (Explain): Remedial Work Plugging Detailed account of work done, nature and quantity of materials used, and results obtained. Well spudded October 26, 1961. Set 10 joints of (288') new 10-3/4" OD 32.7# SS H-40 RTMC casing at 300' and cemented with 300 sacks by Halliburton Pump & Plug Process. Cement circulated to surface. Plug down at 8:00 A.H. October 27, 1961. W.O.C. 24 hours. Pressured up to 600# for 30 minutes and casing tested OK. Drilled out cement plug and pressured up to 600# for 30 minutes and casing shut off tested OK. Position Company Witnessed by Robert L. Calhoon Dist. Foreman Skelly Oil Company FILL IN BELOW FOR REMEDIAL WORK REPORTS ONLY ORIGINAL WELL DATA Completion Date D F Elev. TD PRTD Producing Interval Oil String Diameter Oil String Depth Tubing Depth **Tubing Diameter** Perforated Interval(s) Producing Formation(s) Open Hole Interval RESULTS OF WORKOVER Water Production BPD Gas Vell Potential Oil Ptoduction Gas Production GOR Date of Test BPD Cubic feet/Bbl Test Before Worko ver After **Vorkover** I hereby certify that the information given above is true and complete to the best of my knowledge. OIL CONSERVATION COMMISSION Name Position Company

Date

NEW MEXICO OIL CONSERVATION COMMISSION

FORM C-103 (Rev 3-55)

MISCELLANEOUS REPORTS ON WELLS

(Submit to appropriate District Office as per Commission Rule 1106)

Name of Com			***************************************	Addre				
	Skelly 01	i, Company	• .		Box		be, New Me:	xi.co
Lease Eunie	e Gesoline Pla	ent SWD	Vell No.	Unit Letter		Township		Range 37-E
Date Work Pe		Pool	e Mattix	·		County		
AUT, O L	mm 70 1701		A REPORT	UF: (Check	approbria	tte block)	Lea	·
Beginning Drilling Operations								
Plugging Remedial Work Completing								
Drilled 4140'. Set 123 joints (4000') of new 7" OD 20# 8-R SS J-55 RT&C casing at 4010' and comented with 1750 sacks by Halliburton Pump & Plug Process. Coment circulated to surface. Plug down at 8:30 A.M. November 8, 1961. W. O. C. 36 hours. Pressured up to 1500# for 30 minutes and casing tested OK. Drilled out coment plug and pressured up to 1500# for 30 minutes and casing shut off tested OK. Reached total depth of 4550' on November 12, 1961. Treated open hole section 4010-4550' with 3000 gals. 15% Reg. Acid by Halliburton Company. Well completed as a Salt Water								
Disposal		•	WL	-	•	_		
Wirmessed by			Position	· · · · · · · · · · · · · · · · · · ·	_{!a}	Соприцу	·	
	R. L. Calhoon	<u> </u>		st. Pore			elly Oil Co	трапу
		FILL IN BE				PORTS O	VLY	
D F Elev.	(TD		PBTD	HAL WELL	DATA	Producing	Interval	Completion Date
Tubing Diame	tet	Tubing Depth		Oil Stri	ng Diamet	ter	Oil String	Depth
Perforated Int	erval(s)	<u> </u>		 				
Open Hole Int	erval		· · · · · · · · · · · · · · · · · · ·	Produci	ng Forma	tion(s)		
			RESULT	S OF WORK	COVER		·····	
Test	Date of Test	Oil Production BPD		roduction FPD		rodaction PD	GOR Cubic feet/Bb	Gas Well Potential MCFPD
Before Workover								
After Workover								
	OIL CONSERVA	TION COMMISSION	ч			that the in my knowleds		above is true and complete
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Date		/0		Positi	D:	ist. Sup	t.	
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	A TAFE	REQUEST	CONSERVATION COMM ON FOR ALLOWABLE AND	Form C-104 Supersedes Old C-104 and C- Ellocityo 1-1-05
	G.S.	AUTHORIZATION TO TR.	JANUTAN CHA JIO TROGRA	GAS
	OPERATOR PRORATION OFFICE	<u> </u>		
1.	Operator		·	
	Address D. D. Day 1351	1 0 70700		
	P. O. Box 1351, Midla Reason(s) for filing (Check proper box	nd, Texas 79702	Other (Please explain)	·
	New Well Recompletion Change in Ownership	Change in Transporter of: Oil Dry Go Castaghead Gas Conde	S EFFECTIVE JANUARY COMPANY MERGED INT	31, 1977, SKELLY OIL O GETTY OIL COMPANY
	If change of ownership give name cand address of previous owner		v P.O. Box 1351	Midland Teras
īı.	DESCRIPTION OF WELL AND	LEASE Well No. Pool Name, Including F		79702
	· / / / / / / / / / / / / / / / / / / /	woll Langlie	V 77.	(C)
	Unit Letter; 25	80 Feet From The South Lin	~~~	The West
***		what ZZ Range	3 //E , NMFM,	Lea County
111.	Name of Authorized Transporter of Cit		Address (Give address to which appro	
	Name of Authorized Transporter of Car	Unit Sec. Twp. Age.	Address (Give address to which appro	
	If well produces oil or liquids, give location of lanks.			· · · · · · · · · · · · · · · · · · ·
IV.	COMPLETION DATA	th that from any other lease or pool, Oil Well Gas Well	New Well Workover Deepen	Piug Back Same Res'v. Diff. Res'v.
	Designate Type of Completic	i		
	Date Spudded Elovations (DF, RXB, RT, GR, etc.;	Date Compl. Ready to Prod. Name of Producing Formation	Total Depth Top Oil/Gas Pay	P.S.T.D.
	Perforations		100000000000000000000000000000000000000	Tubing Depth Depth Casing Shoe
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	NOCE SIZE	0.3110 tr 105110 3125	i der in sei	SACKS CEMENT
				<u> </u>
v.	TEST DATA AND REQUEST FO	OR ALLOWABLE (Test must be a	fier recovery of total volume of load oil pih or be for full 24 hours)	and must be equal to or exceed top allow-
	OIL WELL Date First New Cil Run To Tanks	Date of Test	Producting Method (Flow, pump, gas li)	fi, etc.)
	Length of Test	Tubing Pleasure	Casing Pressue	Chote Size
	Actual Prod. During Test	Oil - Bbla.	Water-Bbis.	Gas-MCF
			<u> </u>	
į	Actual Prod. Toet-MCF/D	Length of Test	Bbls, Condensate/MMCF	Gravity of Condensate
	Testing Method (pitot, back pr.)	Tubing Preseure (Shut-in)	Cooing Pressure (Shut-in)	Choke Size
71,	CERTIFICATE OF COMPLIANC	CE .	OIL CONSERVA	TION COMMISSION
	I hereby certify that the rules and r Commission have been complied w	egulations of the Oil Conservation	APPROVED Origi	
	above is true and complete to the	best of my knowledge and belief.	Journ :	Sorting Sorting Sorting
	(SIGNED) LELA	ND FRANZ	This form is to be filed in c	
•	(Signo	we Leland Franz	If this is a request for allow well, this form must be accompant touts taken on the well in accor	nied by a tabulation of the deviation
•	District Product	le)	All sections of this form muse able on new and recompleted we	st be filled out completely for allow-
	February 18,	ir i	Fill out only Sections I. If well name or number, or transport	, III, and VI for changes of owner, en or other such change of condition.
		· · ·		

STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

[:[[[-:40	\top	
MOITHBUTION	1	
BANTAFE	1	
FILE		
U.S.a.S.		
LAND OFFICE		

ORIGINAL SIGNED BY EDDIE	SEAY		<u>OCT 26 1983</u>
Mountain Dun	TITLE	Consultant	DATE 11-13-83
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		数	•
•		.*	
•			
See Attach	ned Sheet	·	·
Describe Proposed or Completed Operational, SEE RULE 1603.	ons (Liearly state all perlinent i	ceiaiis, ana give perfinent dates, ind	luding estimated date of starting any propose
отнея			
A ALTER CABING	CHANGE PLANS	SPE THEM TEST AND CEMENT JUST BATTO	<u> </u>
RFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	DNIERS DNIESTLA PUSMINGONAER DNA DUJA
Check App NOTICE OF INTE	-	Nature of Notice, Report	or Other Data DUENT REPORT OF:
	is, Elevation (Show where	her DF, RT, GR, esc.)	12. County Lea
THELINE, SECTION_	27 TOWNSHIP 22	S RANGE 37 F.	- M M P M .
UNIT LETTER L 25	80 PEET FROM THE	LINE AND 1200 FEE	T FROM
Box 1137	Eunice, N	lew Mexico 88231	Disposal Well
Name of Operator Getty Oil Address of Operator	1 .	·	6. Form of Leose Home Getty Gas Plant #1
OIL WELL .	OTHER Disposal W	Well .	7. Unit Agreement Name
SUNDRY I	NOTICES AND REPORTS	ON WELLS	
OFERATOR			5. State Oli 6 Gas Lease No.
U.S.O.S.			State Fee
FILE		EW MEXICO 87501	

Getty Oil Eunice Gas Plant #1 Salt Water Disposal Well

10-3-83	Rig up pulling unit, BOP, reverse unit and tanks. Pull Halliburton R4 packer and 3½ plastic lined tubing. Run 3½ work string with casing scraper and bit. Pull scraper, run bit through casing to fill Start clean out. Pull bit into casing. Shut in.
10-4-83	Clean well to 4450. Pull bit into casing. Shut in.
10-5-83	Clean out to 4550 ft. Spot 800 gal. 15% HCL at 4545. Flush tubing with 34 bbls. H20. Pull 25 joints. Shut in.
10-6-83	Pull 3½ work string. Return 3½ plastic coated injection string with Halliburton model R4 packer set at 3855 ft. Flush and load annulus with Unichem packer fluid. Set packer in tension. Test packer to 400 psi. Run 5 stage 15,000 gal. matrix acid job with an additional 5500 gal. to remove thick scale deposit on tubing. Resume plant injection

10-10-83 Run step rate injection test. Resume plant injection.

Work done by B & D Well Testers David Bump

for 3 days.

R & T	. Well	Teste	rs								HC	OBBS,	
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STATE OF NEW VEXICO PREEDY NO MINERALS CEPTATMENT

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OIL CONSERVATION DIVISION P. O. BOX 2018 SANTA FE, NEW MEXICO 87501

Form C-136 Revised 10-01-78 Format 06-01-53 Page 8

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operetar		·							
TEXACT Producing Inc.				-					
Address				· · · · · · · · · · · · · · · · · · ·					
P. O. Eox 728, Robbs, New	Mexico 88240				•				
Ressours for Irling (Check proper box)	•		Other (Pleas						
Men Aall	Change in Transporter of:	_	Change of Operator from Getty t						
Recomplation	<u></u> □ 0:1	Dry Gas	TEXACO	Producing Inc 12/31	/84				
Y Change in Ownership	Casinghead Gas	Condensare	<u> </u>						
f change of ownership give name and address of previous owner	•	·							
7 DECEMBER 100 100 100 100 100 100 100 100 100 10									
I. DESCRIPTION OF WELL AND LE	ASE Well No. I Pool Name, Incli	ding Formation		Kind of Lease	Ledge No.				
Caroline Plant Gra		-		State, Federal or Fee FFE	· Chara war				
de Gasoline Plant SWD	l langlie Ma	ttix	 	FIGE					
Unti Letter L : 2580	Feet From The South	Line and	200	Feet From The West	·				
Line of Section 27 Township	. 22S Ren	37E	, NMPM	ı. Lea	County				
Line of Section Township	, new		, par	, <u> </u>	County				
III. DESIGNATION OF TRANSPORT Name of Authorized Transporter of Oil SWD ! Name of Authorized Transporter of Cosungna	or Candensale	Andress		to which approved copy of this form is					
		_							
If well produces cil or liquids, Unit give location of tanks.	Sec. Twp. R	ge. Is gas act	naria comecu	ta? When					
I this production is commingled with the	it from any other lease or	pool, give comm	ungling order	number					
NOTE: Complete Parts IV and V on									
NOTE: Complete Paris IV and V on	reverse size if necessory.	. 11							
VI. CERTIFICATE OF COMPLIANCE		#	OIL C	ONSERVATION DIVISION					
hereby centify that the rules and regulations of	the Oil Conservation Division	have APPRO		6/1	85				
ecen complied with and that the information give	in is true and complete to the t	est of	1-1111	i del F	, 10				
ny knowledge 2012 Seller.		BY	1	The state of the s					
,		TITLE	DISTRIK	T I SUFERVISOR					
11 6 6 6		70.	s form is to	be filed in compliance with auc	E 1104.				
W. D. hel		If t	his is a requ is form must	iont for allowable for a newly drill be accompanied by a tabulation of	led or despense				
Trint Contactions Manage	<u> </u>	łi		vell in accommance with RULE 11 this form must be filled out comp.	-				
/30, 1985 main		abie ca	new and ted	Completed weils.	•				
(C=:e;	· · · · · · · · · · · · · · · · · · ·	well nam	ne or number	actions I. E. II. and VI for the or transportance times about the contract of	ta cl coucritii.				
•			erate Forms diwells.	G-164 must be filed for each p	colin muitts.				

Submit 3 Copies to Appropriate District Office

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103

Revised 1-1-89

STRICT I O. Box 1980, Hobbs, NM 88240		ATION DIVISION Box 2088	WELL API NO.
DISTRICT II P.O. Drawer DD, Artesia, NM 88210		Mexico 87504-2088	5. Indicate Type of Lease
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410			STATE FEE K 6. State Oil & Gas Lease No.
(DO NOT USE THIS FORM FOR PRODIFFERENT RESERVATION (FORM C	ICES AND REPORTS C OPOSALS TO DRILL OR TO I RVOIR. USE "APPLICATION -101) FOR SUCH PROPOSAL	DEEPEN OR PLUG BACK TO A FOR PERMIT	7. Lease Name or Unit Agreement Name Texaco Producing Inc. Eunice Gas Plant
1. Type of Well: OIL GAS WELL GAS WELL GAS	отнек S	alt Water Disposal	Sunte Har Bant She
2. Name of Operator Texaco Explo	oration & Product	on Inc.	8. Well No. SWD-29 /
3. Address of Operator	37 Eunice, NM		9. Pool name or Wildcat Langlie Mattix
4. Well Location			Feet From The 26 Co. Line
Section 27	Township 22S 10. Elevation (Show	Range 37E whether DF, RKB, RT, GR, etc.)	NMPM Lea County
11. Check A		licate Nature of Notice, R	eport, or Other Data SEQUENT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING
IPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING	OPNS. DPLUG AND ABANDONMENT
TULL OR ALTER CASING		CASING TEST AND CE	MENT JOB X
OTHER:		OTHER:	
production tubing tested and passed	echanical integrious removed and a contract 2-6-91. Test value	ty testing. Well wa asing cement job do lidated by Mr. R. A	s removed from service, ne to seal leak. Well . Sadler New Mexico Oil ack in service 2-7-91.
I hereby certify that the information expect is true SIGNATURE TYPE OR PRINT NAME J. E. Brit		ledge and belief. THILE Plant Supering	tendent bate 2-11-91 (505)394-2516 TELEPTROME NO.
*			
(This space for State Use)	ogist		

Submit 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-104 Revised 1-1-89 See Instructions at Bottom of Page

OIL CONSERVATION DIVISION DISTRICT II P.O. Drawer DD, Artesia, NM 88210

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

DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410	BEOUERT			D. = 4410				•	
I,	REQUEST	RANSPORT							
Operator		MINOFONI	- Oil	L AND NA	TURAL GA		API No.		
Texaco Exploration and	l Production	Inc.				_ 3	D-02	15-21-	197
P.O. Box 730 Hobbs.	New Mexico 8	88240-252	8						
Reason(s) for Filing (Check proper box) New Well	Channe	in Transporter o	<i>c</i> .		ner (Please explo	-			
Recompletion	ou [Dry Gas		EF	FECTIVE	6-1-91			
Change in Operator	Casinghead Gas	Condensate							
If change of operator give name and address of previous operator Tex	caco Profucing	Inc.	P.0	. Box 73	0 Hobbs	s, New	Mexico	88240-25	28
II. DESCRIPTION OF WELL		- 			ents.cr	 			·
Lease Name	SWO WELL NO	Pool Name, I	nclud	ing Formation			of Lease Federal of Fe		ease No.
Location					4	2.73		9.1	
Unit Letter	: 2580	Feet From Th	16 <u>)</u>	Pulk_ Lio	e and	<i>DO</i> _F	eet From The	h/cs	Line
Section 2 / Townshi	ip XXS	Range 3	1 4	, N	мрм,			(८५	County
III. DESIGNATION OF TRAN	SPORTER OF C		ATU			· 			
Name of Authorized Transporter of Oil None 5w0	721/ 00 COM			Address (GIV	e address to wh	uh approved	a copy of this j	orm is to be se	ntj
Name of Authorized Transporter of Casing	ghead Gas	or Dry Gas [Address (Giv	e address to wh	ich approved	copy of this f	orm is to be se	nt) .
Mone	Unit Sec.	Im. I				(
If well produces oil or liquids, give location of tanks.	Umit Sec.	Twp.	Rge.	Is gas actually	y connected?	When			
If this production is commingled with that IV. COMPLETION DATA	from any other lease o	r pool, give com	mingl	ing order numl	ber:				
IV. COMPLETION DATA	Oil We	ii Gas W	eil	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Designate Type of Completion			-11	1 1100 1101	110120121	Dechen	Find Date	Same Kes v	
Date Spudded	Date Compl. Ready	to Prod.		Total Depth	•		P.B.T.D.	•	
Elevations (DF, RKB, RT, GR, etc.)		Top Oil/Gas I	Pay		Tubing Dep	th	·		
Perforations	<u></u>			L			Depth Casin	g Shoe	
						<u> </u>	<u> </u>		
HOLE SIZE		I, CASING A UBING SIZE	ND		NG RECORL DEPTH SET	<u> </u>		SACKS CEME	NIT
HOLE SIZE	UASING & I	UDING SIZE			DEFIN SET			MUNG CENIE	:141
							<u> </u>		
V. TEST DATA AND REQUES	T FOR ALLOW	ADIE					<u> </u>		
	ecovery of total volume		must	be equal to or .	exceed top allow	vable for this	s denth or be t	or full 24 hour.	r.)
Date First New Oil Run To Tank	Date of Test				thod (Flow, pun			or <u>j=1 5 : 110 5 :</u>	.,
Length of Test	Tubing Pressure	- ,-	_	Casing Pressu	ne .		Choke Size	·	· • · ·
Actual Prod. During Test	Oil - Bbis.			Water - Bbls.			Gas- MCF		
GAS WELL									
Actual Prod. Test - MCF/D	Length of Test			Bbls. Condens	ate/MMCF		Gravity of C	ondensate	
Testing Method (pitot, back pr.)	Tubing Pressure (Shu	u-in)		Casing Pressur	re (Shut-in)		Choke Size		-
VI. OPERATOR CERTIFICA	ATE OF COM	PLIANCE	┪	Γ	 				
I hereby certify that the rules and regula				C	IL CON	SERV	FNOITA		N
Division have been complied with and t	hat the information giv		ļ	1			1 41 - 1	11 (July	
is true and complete to the best of my k	nowleage and belief.			Date	Approvec				
SICA									
Signature			- 1	Ву	ORIGINAL	SIGNED I	BY Jeepy	SEXTIMAL	
M.C. Duncan	Engineer's		<u>n</u> t		Dis	TRICT I S	UPERVISO	3	
Printed Name 7-8-91	31	Title 9307191		Title_					
7-8-91 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		ephone No.	- 1						

- 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.



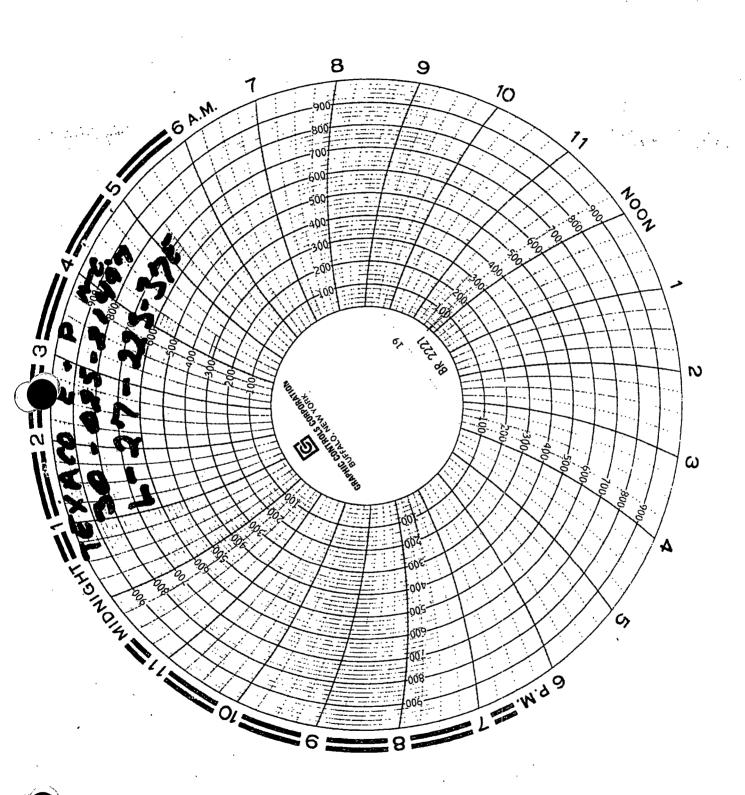
State of New Mexico

to Appropriate District Office	Enday, Minerals and Natural R	esources Department	•		ed <u>1-1</u> -89
ISTRICT I P.O. Box 1980, Hobbs, NM 88240	OIL CONSERVATION	ON DIVISION	WELL API NO		
DISTRICT II	P.O. Box 208	8	<u></u>	30 025 21497	
P.O. Box Drawer DD, Artesia, NM 88210	Santa Fe, New Mexic	o 87504-2088	5. Indicate Typ		
DISTRICT III				STATE	FEE 🛛
1000 Rio Brazos Rd., Aztec, NM 87410			6. State Oil / G	ias Lease No.	
The second secon	TICES AND REPORTS ON WE				
(DO NOT USE THIS FORM FOR PRO	POSALS TO DRILL OR TO DEEPEI	I OR PLUG BACK TO A	7. Lease Nam	e or Unit Agreement Name	ounding H
	RVOIR. USE "APPLICATION FOR F C-101) FOR SUCH PROPOSALS.)	ERMIT	Eunice Gas I	Plant	
4 T 411 11 OIL - GAS					
1. Type of Well: WELL WELL					
2. Name of Operator	· · · · · · · · · · · · · · · · · · ·		8. Well No.	1	
TEXACO EX	PLORATION & PRODUCTION INC.				·
3. Address of Operator P.O. BOX 73	0, HOBBS, NM 88240		9. Pool Name	or Wildcat SWD San Andres	
4. Well Location				341D Sail Millies	
Unit LetterL:	1200 Feet From The WES	T Line and 2580	Feet From T	he SOUTH Line	
			_		
Section 27	Township 22S F	tange 37E NM	IPM	LEA COUNTY	
	10. Elevation (Show whether DF, RKB,	RT,GR, etc.) 3335'			
11. Check A	ppropriate Box to Indicate Na	ture of Notice Report	or Other I	Data	
	• •				
NOTICE OF INTENTIO		50	BSECOE	NT REPORT OF:	
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	L	ALTERING CASING	
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING OPE	RATION 🗌	PLUG AND ABANDONMENT	
PULL OR ALTER CASING		CASING TEST AND CEMEN	T JOB 🔲		
 OTHER:		OTHER:	Replace packe	r and pressure test	🛛
22. Describe Proposed or Completed Ope	rations (Clearly state all pertinent detail	s, and give pertinent dates,	including estin	nated date of starting any pro	posed
work) SEE RULE 1103.				:	
The subject well failed a pressure test 2/1:	3/95.				
Texaco replaced the packer with a 7" plass	tic coated Lok-set packer set @ 3855.				
2/22/95: Pressure tested to 500 psi for 30	minutes <held>.</held>	•			
The original pressure chart is attached to t	his form and a copy can be found on t	he reverse side.			
				· :	
		•			
6/1					

I hereby costify that the info _____TITLE___Engineering_Assistant SIGNATURE_ √Daπell J. Carriger Telephone No. 397-0426 TYPE OR PRINT NAME

ORIGINAL SIGNED BY JERRY SEXTON DISTRICT I SUPERVISOR TITLE APPROVED BY_

DATE MAR 21 1995



District I
PO Hox 1588, Hobbs, NM 50241-1998
District II
Sil South First, Artesia, NM 88219
District III
1000 Rio Brazzo Rd., Antee, NM 87419

State of New Mexico Energy, Minerals & Natural Resources Department

Form C-104
Revised October 18, 1994
Instructions on back
ubmit to Appropriate District Office
5 Copies

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1000 Rio Brazza	Rd., Antec,	NM 87410		2040 Santa	South Fe, N	Pacne M 875	505				_	5 Copies
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	ston,	-	77002							Reseas (or Filing 7/1/	Code √ /98
	PI Number		<u></u>			ool Name	;					Pool Code
30 - 0 25-			 	SWD: S								5121
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T. 10 S	Surface I	Location	l									
Ul or lot no.	Section	Township	Range	Lot Idn	Feet from	the	North/So		Feet from the		ce line	County
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11 1	Bottom I	Tole Lo	cation									
UL or lot no.	Section	Township		Lot Idn	Feet from	the	North/Se	outh line	Feet from the	East/W	est line	Coasty
		<u> </u>										
" Lee Code D	" Producti	Method C	ode "Gas	Connection Date	"C-	129 Permi	it Number	'	C-129 Effective	Date	17 C-1	129 Expiration Date
II. Oil a	nd Gas I		tore		1							
11. Oli al			Transporter I	Vame	$\neg \vdash$	" PO	D	2 O/G		2 POD U	LSTR Lo	cation
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V. Well (Complet											
²⁴ Spo	d Date	2	Ready Date		" TD		" PB	TD	2º Perfor	tions	1	* DHC, DC,MC
	" Hole Size	4		Casing & Tubing	Si	┰┶╴		Depth Se			M Sant	n Cement
	Hote Stre		`	,aatag te 100mg	UIAL .			рерш зе				is Cement
			- -									
77 337-11	Tost Do	to.	'									
VI. Well Date N			Delivery Date	" Test	Date	7	Test Le	th	" Thg. P			" Cag. Pressure
		-										Cag. Indicate
4 Chok	e Size		4 Oil	• W	aler		" Ga	;	4 A	OF		4 Test Method
		<u> </u>		<u> </u>								
				ivision have been of plete to the best of			0	IL CO	NSERVAT	TON I	SIVIC	ION
knowledge and	belief	1 1	رد		ļ							
Signature:	Dune	an \	JAK			Approvi	na by:	0	RIGINAL SIG	inel: t		
Printed name	Sandra	a Royar	ι '			Title:			GART W	E II		
Title: Ad	winist	cative	Assistan	ıt		Approva	d Date:	SE				
-	7-98			13) 507-3	735				1001	<u> </u>		
		rator fil in		nber and name of		ou opera	top .		_	/ 4	,	
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	Previous (perator Sig	nature			Print	ed Name				tle	Date

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State of New Mexico Energy, Minerals and Natural Resources Oil Conservation Division 1220 S. St Francis Dr. Santa Fe, NM 87505

Form C-104B Permit 48138

Change o	f Operal	or Name
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OGRID:	24650		:
Effective Date:	11/1/2006		
	perator Name and Information	•	or Name and Information
Name:	DYNEGY MIDSTREAM SERVICES, LP	Name:	TARGA MIDSTREAM SERVICES, LP
Address:	1000 LOUISIANA	Address:	
Address:	STE 4700	Address:	
City, State, Zip	: HOUSTON, TX 770005050	City, State, Zip:	<u> </u>
knowledge a	and belief.		
Signature:	Joe O' dray		
Printed Nan	no Joe A. Bray		
Title:	Plant Operations Sup	renisor	÷
Date:	3-9-07 Phone: 505-39.	3-2823	•

NMOCD Approval Date: March 09, 2007