



NEW MEXICO ENERGY, MINERALS and NATURAL RESOURCES DEPARTMENT

GARY E. JOHNSON
Governor
Jennifer A. Salisbury
Cabinet Secretary

October 25, 2001

Lori Wrotenbery
Director
Oil Conservation Division

Ladies and Gentlemen:

Case 12770

You are hereby notified that the New Mexico Oil Conservation Division has filed the referenced Application, a copy of which is enclosed herewith, seeking an Order requiring Sierra Blanca Operating Company or its sureties to properly plug and abandon Ninety (90) wells located in Lea County, New Mexico, specifically identified in said application.

A hearing on this Application will take place before a Division hearing officer on Thursday, November 15, 2001, at 8:15 a.m., in the Division Hearing Room, First Floor, 1220 South St. Francis Drive in Santa Fe, New Mexico. At that hearing you will have an opportunity to show cause, if any there be, why an order should not be entered as requested in the Application.

Inquiries concerning this application may be directed to the undersigned in the Santa Fe office at (505)-476-3450.

Very truly yours,

David K. Brooks
Assistant General Counsel

October 24, 2001

Sierra Blanca Operating Company
808 Turner
Cleburne, TX 76031

Underwriters Indemnity Company
8 Greenway Plaza, Suite 400
Houston, TX 77046

301 N. Main
Roswell, NM 88201

International Fidelity Insurance Company
1309 Broadway
Little Rock, AR 72202

728 Briar Lane
Rockdale, TX 76567

International Fidelity Insurance Company
One Newark Center, 20th Floor
Newark, NJ 07102-5207

C/o Clyde A. Lilley
119 N. Washington Ave, Suite 6

P.O.Box 708
Marble Falls, TX 78654

110 Avenue H, Suite 208
Marble Falls, TX 78654

C/o Rick Dickerson
6350 New Braunfels, Suite 214
San Antonio, TX 78209

210 Angeles
Ruidoso, NM 88345

P.O.Box 1623
Ruidoso, NM 88345

VIA: CERTIFIED MAIL, RETURN RECEIPT REQUESTED

Re: Case No. 12770 : Application of the New Mexico Oil Conservation Division for an Order Requiring Sierra Blanca Operating Company to Properly Plug Ninety (90) Wells in Lea County, New Mexico, Authorizing the Division to Plug Said Wells and Ordering a Forfeiture of Applicable Plugging Bonds and Cash Collateral.

PLACE STICKER AT TOP OF ENVELOPE
TO THE RIGHT OF RETURN ADDRESS
FOLD AT DOTTED LINE

CERTIFIED MAIL



7099 3400 0018 3915 7248
7099 3400 0018 3915 7248

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

Postage \$		Postmark Here
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees \$		
Recipient's Name (Please Print Clearly) (to be completed by mailer) Sierra Blanca Operating Co. Street, Apt. No., or PO Box No. 808 Turner City, State, ZIP+4 Cleburne, TX 76031		
PS Form 3800, February 2000		See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
Sierra Blanca Operating Co.
808 Turner
Cleburne, TX 76031

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) B. Date of Delivery

C. Signature **X** ☐ Agent ☐ Addressee

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Copy from service label) **7099 3400 0018 3915 7248**

12770 FL

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY								
■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits.	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">A. Received by (Please Print Clearly)</td> <td style="width: 50%;">B. Date of Delivery</td> </tr> <tr> <td colspan="2">C. Signature X</td> </tr> <tr> <td></td> <td style="text-align: right;"> ☐ Agent ☐ Addressee </td> </tr> <tr> <td colspan="2">D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No</td> </tr> </table>	A. Received by (Please Print Clearly)	B. Date of Delivery	C. Signature X			☐ Agent ☐ Addressee	D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No	
A. Received by (Please Print Clearly)	B. Date of Delivery								
C. Signature X									
	☐ Agent ☐ Addressee								
D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No									
1. Article Addressed to: Sierra Blanca Operating Co. 301 N. Main Roswell, NM 88201	3. Service Type ☒ Certified Mail ☐ Express Mail ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D.								
2. Article Number (Copy from service label)	4. Restricted Delivery? (Extra Fee) ☐ Yes								

7099 3400 0018 3915 7231

PS Form 3811, July 1999

Domestic Return Receipt

102595-99-M-1789



7099 3400 0018 3915 7231
7099 3400 0018 3915 7231

U.S. Postal Service CERTIFIED MAIL RECEIPT (Domestic Mail Only; No Insurance Coverage Provided)											
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Postage</td> <td style="width: 50%;">\$</td> </tr> <tr> <td>Certified Fee</td> <td></td> </tr> <tr> <td>Return Receipt Fee (Endorsement Required)</td> <td></td> </tr> <tr> <td>Restricted Delivery Fee (Endorsement Required)</td> <td></td> </tr> <tr> <td>Total Postage & Fees</td> <td>\$</td> </tr> </table>	Postage	\$	Certified Fee		Return Receipt Fee (Endorsement Required)		Restricted Delivery Fee (Endorsement Required)		Total Postage & Fees	\$	Postmark Here
Postage	\$										
Certified Fee											
Return Receipt Fee (Endorsement Required)											
Restricted Delivery Fee (Endorsement Required)											
Total Postage & Fees	\$										
Recipient's Name (Please Print Clearly) (to be completed by mailer) Sierra Blanca Operating Co. Street, Apt. No., or PO Box No. 301 N. Main City, State, ZIP+4 Roswell, NM 88201											

PS Form 3800, February 2000

See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Sierra Blanca Operating Co.
728 Briar Lane
Rockdale, TX 76567

2. Article Number (Copy from service label)

7099 3400 0018 3915 7224

PS Form 3811, July 1999

Domestic Return Receipt

102595-99-M-1789

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly)

B. Date of Delivery

C. Signature

X

☐ Agent

☐ Addressee

D. Is delivery address different from item 1?

☐ Yes

If YES, enter delivery address below:

☐ No

3. Service Type

☒ Certified Mail

☐ Express Mail

☐ Registered

☐ Return Receipt for Merchandise

☐ Insured Mail

☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

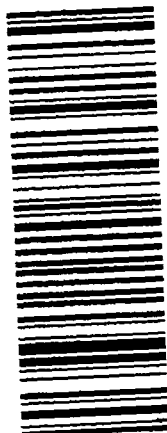
U.S. Postal Service

CERTIFIED MAIL RECEIPT

(Domestic Mail Only; No Insurance Coverage Provided)

PLACE STICKER AT TOP OF ENVELOPE
TO THE RIGHT OF RETURN ADDRESS.
FOLD AT DOTTED LINE

CERTIFIED MAIL



7099 3400 0018 3915 7224
7099 3400 0018 3915 7224

Postage \$

Certified Fee

Return Receipt Fee
(Endorsement Required)

Restricted Delivery Fee
(Endorsement Required)

Total Postage & Fees \$

Postmark
Here

Recipient's Name (Please Print Clearly) (to be completed by mailer)

Sierra Blanca Operating Co.

Street, Apt. No., or PO Box No. 728 Briar Lane

City, State, ZIP+4 Rockdale, TX 76567

PS Form 3800, February 2000

See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE
TO THE RIGHT OF RETURN ADDRESS.
FOLD AT DOTTED LINE

CERTIFIED MAIL



7099 3400 0018 3915 7217
7099 3400 0018 3915 7217

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

Postage	\$	Postmark Here
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees	\$	
Recipient's Name (Please Print Clearly, (to be completed by mailer): Sierra Blanca Operating Company Street, Apt. No., or PO Box No. c/o Clyde A. Lilley 119 N. Washington City, State, ZIP+4 Marble Falls, TX 78654 Avenue Ste. 6 PS Form 3800, February 2000 See Reverse for Instructions		

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Sierra Blanca Operating Co.
c/o Clyde A. Lilley
119 N. Washington Ave. Ste 6
Marble Falls, TX 78654

2. Article Number (Copy from service label)

7099 3400 0018 3915 7217

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly)	B. Date of Delivery
C. Signature X ☐ Agent ☐ Addressee	
D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No	
3. Service Type ☒ Certified Mail ☐ Express Mail ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D.	
4. Restricted Delivery? (Extra Fee) ☐ Yes	

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Sierra Blanca Operating Co.
c/o Clyde A. Lilley
PO Box 708
Marble Falls, TX 78654

2. Article Number (Copy from service label)

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) B. Date of Delivery

C. Signature

X☐ Agent
☐ AddresseeD. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type

☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.4. Restricted Delivery? (Extra Fee) ☐ Yes

7099 3400 0018 3915 7200

PS Form 3811, July 1999

Domestic Return Receipt

102595-99-M-1789

PLACE STICKER AT TOP OF ENVELOPE
TO THE RIGHT OF RETURN ADDRESS.
FOLD AT DOTTED LINE**CERTIFIED MAIL**7099 3400 0018 3915 7200
7099 3400 0018 3915 7200**U.S. Postal Service****CERTIFIED MAIL RECEIPT**

(Domestic Mail Only; No Insurance Coverage Provided)

Postage \$

Certified Fee

Return Receipt Fee
(Endorsement Required)Restricted Delivery Fee
(Endorsement Required)

Total Postage & Fees \$

Postmark
Here

Recipient's Name (Please Print Clearly) (to be completed by mailer)

Sierra Blanca Operating Company

Street, Apt. No., or PO Box No.

PO Box 708

C/o Clyde A Lilley

City, State, ZIP+4

Marble Falls, TX 78654

PS Form 3800, February 2000

See Reverse for Instructions

7099 3400 0018 3915 7194

2. Article Number (Copy from service label)

3. Service Type	
☒ Certified Mail	☐ Registered
☐ Express Mail	☐ Return Receipt for Merchandise
☐ Insured Mail	☐ C.O.D.
4. Restricted Delivery? (Extra Fee)	
☐ Yes	
D. Is delivery address different from item 1? ☐ Yes ☐ No	
If YES, enter delivery address below:	
C. Signature ☒ Agent ☐ Addressee	
A. Received by (Please Print Clearly) B. Date of Delivery	

Sierra Blanca Operating Company
110 Avenue H, Suite 208
Marble Falls, TX 78654

1. Article Addressed to:

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

SENDER: COMPLETE THIS SECTION

COMPLETE THIS SECTION ON DELIVERY



4912 7194
5165 7194
8100 8100
004E 004E
6602 6602

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

Postage	\$	Postmark Here
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees		\$
Recipient's Name (Please Print Clearly) (to be completed by mailer) Sierra Blanca Operating Company Street, Apt. No., or PO Box No. 110 Avenue H, Suite 208 City, State, ZIP+4 Marble Falls, TX 78654		

PS Form 3800, February 2000

See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE
TO THE RIGHT OF RETURN ADDRESS.
FOLD AT DOTTED LINE

CERTIFIED MAIL



7000 0520 0021 6896 3416
7000 0520 0021 6896 3416

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

Postage	\$	Postmark Here
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees	\$	

Recipient's Name (Please Print Clearly) (To be completed by mailer)
Sierra Blanca Operating Company
Street, Apt. No., or PO Box No. PO Box 1623
City, State, ZIP+ 4 Ruidoso, NM 88345
 PS Form 3800, February 2000 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
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- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
 Sierra Blanca Operating Company
 PO Box 1623
 Ruidoso, NM 88345

COMPLETE THIS SECTION ON DELIVERY

12770 FL

A. Received by (Please Print Clearly)	B. Date of Delivery
C. Signature X ☐ Agent ☐ Addressee	
D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No	

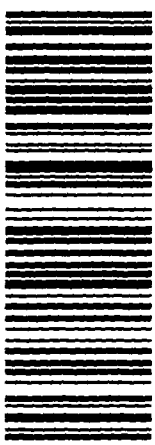
3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Copy from service label) 7000 0520 0021 6896 3416

12770 FL

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. 1. Article Addressed to: Underwriters Indemnity Co. 8 Greenway Plaza, Suite 400 Houston, TX 77046	A. Received by (Please Print Clearly) _____ B. Date of Delivery _____ C. Signature _____ ☐ Agent ☒ Addressee D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No
2. Article Number (Copy from service label)	3. Service Type ☒ Certified Mail ☐ Express Mail ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D. 4. Restricted Delivery? (Extra Fee) ☐ Yes
7000 0520 0021 6896 3423	
PS Form 3811, July 1999 Domestic Return Receipt 102595-00-M-0952	

U.S. Postal Service CERTIFIED MAIL RECEIPT (Domestic Mail Only; No Insurance Coverage Provided)											
PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF RETURN ADDRESS. FOLD AT DOTTED LINE CERTIFIED MAIL  7000 0520 0021 6896 3423	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Postage</td> <td style="width: 50%;">\$</td> </tr> <tr> <td>Certified Fee</td> <td></td> </tr> <tr> <td>Return Receipt Fee (Endorsement Required)</td> <td></td> </tr> <tr> <td>Restricted Delivery Fee (Endorsement Required)</td> <td></td> </tr> <tr> <td>Total Postage & Fees</td> <td>\$</td> </tr> </table> Postmark Here	Postage	\$	Certified Fee		Return Receipt Fee (Endorsement Required)		Restricted Delivery Fee (Endorsement Required)		Total Postage & Fees	\$
Postage	\$										
Certified Fee											
Return Receipt Fee (Endorsement Required)											
Restricted Delivery Fee (Endorsement Required)											
Total Postage & Fees	\$										
Recipient's Name (Please Print Clearly) (To be completed by mailer) Street, Apt. No.; or PO Box No. City, State, ZIP+ 4											
PS Form 3800, February 2000 See Reverse for Instructions											

UNITED STATES POSTAL SERVICE



First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

OIL CONSERVATION DIVISION
1220 SO. ST. FRANCIS
SANTA FE, NM 87505

PLACE STICKER AT TOP OF ENVELOPE
TO THE RIGHT OF RETURN ADDRESS.
FOLD AT DOTTED LINE

CERTIFIED MAIL



7000 0520 0021 6896 3447
7000 0520 0021 6896 3447

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only: No Insurance Coverage Provided)

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

Postmark
Here

Recipient's Name (Please Print Clearly) (To be completed by mailer)
International Fidelity Insurance Co.

Street, Apt. No., Box No.
1309 Broadway

City, State, ZIP+4
Little Rock, Arkansas 77202

PS Form 3800, February 2000

See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE
TO THE RIGHT OF RETURN ADDRESS.
FOLD AT DOTTED LINE

CERTIFIED MAIL



7000 0520 0021 6896 3454
7000 0520 0021 6896 3454

**U.S. Postal Service
CERTIFIED MAIL RECEIPT**
(Domestic Mail Only: No Insurance Coverage Provided)

Postage	\$	Postmark Here
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees	\$	

Recipient's Name (Please Print Clearly) (To be completed by mailer)
International Fidelity Insurance Co.
 Street, Apt. No.; or PO Box No.
One Newark Center, 20th Floor
 City, State, ZIP+ 4 **Newark, NJ 07102-5207**
 PS Form 3800, February 2000 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
**International Fidelity
 Insurance Company
 One Newark Center, 20th Floor
 Newark, New Jersey 07102-5207**

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) B. Date of Delivery
 C. Signature ☐ Agent
☐ Addressee
X
 D. Is delivery address different from item 1? ☐ Yes
 If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Copy from service label) **7000 0520 0021 6896 3454**

PLACE STICKER AT TOP OF ENVELOPE
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FOLD AT DOTTED LINE

CERTIFIED MAIL



7000 0520 0021 6896 3546
7000 0520 0021 6896 3546

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

Postmark
Here

Recipient's Name (Please Print Clearly) (To be completed by mailer)

Sierra Blanca Operating Co.
Street, Apt. No., or PO Box No. 6350 New Braunfels, Ste 214 c/o Rick Dickerson
City, State, ZIP+4 San Antonio, TX 78209

PS Form 3800, February 2000

See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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c/o Rick Dickerson
6350 New Braunfels, Ste. 214
San Antonio, TX 78209

2. Article Number (Copy from service label)

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PS Form 3811, July 1999

Domestic Return Receipt

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A. Received by (Please Print Clearly) B. Date of Delivery

C. Signature

☐ Agent

☐ Addressee

D. Is delivery address different from item 1?
If YES, enter delivery address below:

☐ Yes

☐ No

3. Service Type

☒ Certified Mail

☐ Express Mail

☐ Registered

☐ Return Receipt for Merchandise

☐ Insured Mail

☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

102595-99-M-1789

Seq. N	API Well #	Well Name	Well #	Operator Name	Type	Stat	County	UL	Sec	Tw	N/S	Rng	Feet	NS	Fl	EW
1	30-025-00238-00-00	NORTH CAPROCK QUEEN UNIT	001	SIERRA BLANCA OPERATING COMPANY	O	A	Lea	A	7	13	S	32 E	660 N			660 E
2	30-025-00234-00-00	NORTH CAPROCK QUEEN UNIT	002	SIERRA BLANCA OPERATING COMPANY	I	A	Lea	2	6	13	S	32 E	654 N			1982 E
3	30-025-24595-00-00	NORTH CAPROCK QUEEN UNIT	002Y	SIERRA BLANCA OPERATING COMPANY	O	A	Lea	B	7	13	S	32 E	1310 N			1330 E
4	30-025-00213-00-00	NORTH CAPROCK QUEEN UNIT	003	SIERRA BLANCA OPERATING COMPANY	O	A	Lea	3	5	13	S	32 E	660 N			1980 W
5	30-025-00223-00-00	NORTH CAPROCK QUEEN UNIT	003	SIERRA BLANCA OPERATING COMPANY	O	A	Lea	3	6	13	S	32 E	660 N			1980 W
6	30-025-00253-00-00	NORTH CAPROCK QUEEN UNIT	003	SIERRA BLANCA OPERATING COMPANY	O	A	Lea	C	7	13	S	32 E	660 N			1980 W
7	30-025-00264-00-00	NORTH CAPROCK QUEEN UNIT	004	SIERRA BLANCA OPERATING COMPANY	I	A	Lea	D	8	13	S	32 E	660 N			660 W
8	30-025-24596-00-00	NORTH CAPROCK QUEEN UNIT	004Y	SIERRA BLANCA OPERATING COMPANY	O	A	Lea	D	8	13	S	32 E	1310 N			10 W
9	30-025-00214-00-00	NORTH CAPROCK QUEEN UNIT	005	SIERRA BLANCA OPERATING COMPANY	O	A	Lea	E	5	13	S	32 E	1980 N			660 W
10	30-025-00257-00-00	NORTH CAPROCK QUEEN UNIT	005	SIERRA BLANCA OPERATING COMPANY	O	A	Lea	E	8	13	S	32 E	1980 N			660 W
11	30-025-00208-00-00	NORTH CAPROCK QUEEN UNIT	006	SIERRA BLANCA OPERATING COMPANY	I	A	Lea	F	32	12	S	32 E	1980 N			1981 W
12	30-025-00239-00-00	NORTH CAPROCK QUEEN UNIT	006	SIERRA BLANCA OPERATING COMPANY	I	A	Lea	F	7	13	S	32 E	1980 N			2043 W
13	30-025-00259-00-00	NORTH CAPROCK QUEEN UNIT	006	SIERRA BLANCA OPERATING COMPANY	I	A	Lea	F	8	13	S	32 E	1980 N			1980 W
14	30-025-00222-00-00	NORTH CAPROCK QUEEN UNIT	006F	SIERRA BLANCA OPERATING COMPANY	I	S	Lea	F	6	13	S	32 E	1980 N			1980 W
15	30-025-00205-00-00	NORTH CAPROCK QUEEN UNIT	007	SIERRA BLANCA OPERATING COMPANY	O	A	Lea	G	32	12	S	32 E	1980 N			1980 E
16	30-025-00233-00-00	NORTH CAPROCK QUEEN UNIT	007	SIERRA BLANCA OPERATING COMPANY	O	A	Lea	G	6	13	S	32 E	1980 N			1980 E
17	30-025-00236-00-00	NORTH CAPROCK QUEEN UNIT	007	SIERRA BLANCA OPERATING COMPANY	O	A	Lea	G	7	13	S	32 E	1980 N			1980 E

Seq. N	API WELL #	Well Name	Well #	Operator Name	Type Stat	Lea	Unit	UL	Sec	Typ	N/S	Rng	E	Feet	NS	Fl	EW
18	30-025-00245-00-00	NORTH CAPROCK QUEEN UNIT	008	SIERRA BLANCA OPERATING COMPANY	I	A	Lea	H	7	13	S	32	E	1897	N		723 E
19	30-025-00235-00-00	NORTH CAPROCK QUEEN UNIT	009	SIERRA BLANCA OPERATING COMPANY	O	A	Lea	I	6	13	S	32	E	1980	S		660 E
20	30-025-00254-00-00	NORTH CAPROCK QUEEN UNIT	009	SIERRA BLANCA OPERATING COMPANY	O	A	Lea	I	7	13	S	32	E	1980	S		660 E
21	30-025-00202-00-00	NORTH CAPROCK QUEEN UNIT	010	SIERRA BLANCA OPERATING COMPANY	I	A	Lea	J	32	12	S	32	E	1980	S		1980 E
22	30-025-24597-00-00	NORTH CAPROCK QUEEN UNIT	010Y	SIERRA BLANCA OPERATING COMPANY	O	A	Lea	J	7	13	S	32	E	2630	S		1330 E
23	30-025-00230-00-00	NORTH CAPROCK QUEEN UNIT	011	SIERRA BLANCA OPERATING COMPANY	O	A	Lea	K	6	13	S	32	E	1980	S		1980 W
24	30-025-00263-00-00	NORTH CAPROCK QUEEN UNIT	011	SIERRA BLANCA OPERATING COMPANY	O	A	Lea	K	8	13	S	32	E	1650	S		1980 W
25	30-025-00244-00-00	NORTH CAPROCK QUEEN UNIT	011	SIERRA BLANCA OPERATING COMPANY	O	S	Lea	K	7	13	S	32	E	1880	S		1980 W
26	30-025-00209-00-00	NORTH CAPROCK QUEEN UNIT	012	SIERRA BLANCA OPERATING COMPANY	I	A	Lea	L	32	12	S	32	E	1980	S		660 W
27	30-025-00216-00-00	NORTH CAPROCK QUEEN UNIT	012	SIERRA BLANCA OPERATING COMPANY	I	A	Lea	L	5	13	S	32	E	1980	S		660 W
28	30-025-00229-00-00	NORTH CAPROCK QUEEN UNIT	012	SIERRA BLANCA OPERATING COMPANY	I	A	Lea	6	6	13	S	32	E	3300	N		4620 E
29	30-025-00260-00-00	NORTH CAPROCK QUEEN UNIT	012	SIERRA BLANCA OPERATING COMPANY	I	A	Lea	L	8	13	S	32	E	1650	S		660 W
30	30-025-00200-00-00	NORTH CAPROCK QUEEN UNIT	013	SIERRA BLANCA OPERATING COMPANY	I	A	Lea	M	32	12	S	32	E	660	S		660 W
31	30-025-00261-00-00	NORTH CAPROCK QUEEN UNIT	013	SIERRA BLANCA OPERATING COMPANY	O	A	Lea	M	8	13	S	32	E	330	S		660 W
32	30-025-00206-00-00	NORTH CAPROCK QUEEN UNIT	014	SIERRA BLANCA OPERATING COMPANY	I	A	Lea	N	32	12	S	32	E	660	S		1978 W
33	30-025-00232-00-00	NORTH CAPROCK QUEEN UNIT	014	SIERRA BLANCA OPERATING COMPANY	I	A	Lea	N	6	13	S	32	E	660	S		1980 W
34	30-025-00262-00-00	NORTH CAPROCK QUEEN UNIT	014	SIERRA BLANCA OPERATING COMPANY	I	A	Lea	N	8	13	S	32	E	330	S		1980 W

Seq. #	API Well #	Well Name	Well #	Operator Name	Type	Stat	Unit	UL	Sec	Tw	N/S	Rng	E	Feet	NS	Fl.	EW
35	30-025-00227-00-00	NORTH CAPROCK QUEEN UNIT	015	SIERRA BLANCA OPERATING COMPANY	O	A	Lea	O	6	13	S	32	E	660	S	1980	E
36	30-025-00179-00-00	NORTH CAPROCK QUEEN UNIT	016	SIERRA BLANCA OPERATING COMPANY	I	A	Lea	P	30	12	S	32	E	660	S	810	E
37	30-025-00131-00-00	NORTHEAST CAPROCK QUEEN UNIT	001	SIERRA BLANCA OPERATING COMPANY	I	A	Lea	L	16	12	S	32	E	1650	S	990	W
38	30-025-00133-00-00	NORTHEAST CAPROCK QUEEN UNIT	002	SIERRA BLANCA OPERATING COMPANY	O	A	Lea	K	16	12	S	32	E	1980	S	1980	W
39	30-025-00135-00-00	NORTHEAST CAPROCK QUEEN UNIT	003	SIERRA BLANCA OPERATING COMPANY	I	A	Lea	J	16	12	S	32	E	1980	S	1980	E
40	30-025-00129-00-00	NORTHEAST CAPROCK QUEEN UNIT	004	SIERRA BLANCA OPERATING COMPANY	O	A	Lea	I	16	12	S	32	E	1980	S	660	E
41	30-025-00124-00-00	NORTHEAST CAPROCK QUEEN UNIT	005	SIERRA BLANCA OPERATING COMPANY	I	A	Lea	L	15	12	S	32	E	1980	S	660	W
42	30-025-00138-00-00	NORTHEAST CAPROCK QUEEN UNIT	006	SIERRA BLANCA OPERATING COMPANY	I	A	Lea	P	17	12	S	32	E	731	S	589	E
43	30-025-00132-00-00	NORTHEAST CAPROCK QUEEN UNIT	007	SIERRA BLANCA OPERATING COMPANY	O	A	Lea	M	16	12	S	32	E	660	S	660	W
44	30-025-00134-00-00	NORTHEAST CAPROCK QUEEN UNIT	008	SIERRA BLANCA OPERATING COMPANY	I	A	Lea	N	16	12	S	32	E	660	S	1980	W
45	30-025-00136-00-00	NORTHEAST CAPROCK QUEEN UNIT	009	SIERRA BLANCA OPERATING COMPANY	O	A	Lea	O	16	12	S	32	E	660	S	1980	E
46	30-025-00137-00-00	NORTHEAST CAPROCK QUEEN UNIT	010	SIERRA BLANCA OPERATING COMPANY	I	A	Lea	P	16	12	S	32	E	660	S	660	E
47	30-025-00125-00-00	NORTHEAST CAPROCK QUEEN UNIT	011	SIERRA BLANCA OPERATING COMPANY	O	A	Lea	O	15	12	S	32	E	330	S	1650	E
48	30-025-00126-00-00	NORTHEAST CAPROCK QUEEN UNIT	012	SIERRA BLANCA OPERATING COMPANY	I	A	Lea	P	15	12	S	32	E	660	S	660	E
49	30-025-00120-00-00	NORTHEAST CAPROCK QUEEN UNIT	013	SIERRA BLANCA OPERATING COMPANY	O	A	Lea	M	14	12	S	32	E	660	S	660	W
50	30-025-00121-00-00	NORTHEAST CAPROCK QUEEN UNIT	014	SIERRA BLANCA OPERATING COMPANY	I	A	Lea	N	14	12	S	32	E	330	S	1650	W
51	30-025-00148-00-00	NORTHEAST CAPROCK QUEEN UNIT	015	SIERRA BLANCA OPERATING COMPANY	I	A	Lea	B	20	12	S	32	E	660	N	1983	E

Seq. #	API Well #	Well Name	Well #	Operator Name	Type	Stat	Unit	UL	Sec	Trp	N/S	Rng	E	Feet	NS	Fl	EW
52	30-025-00147-00-00	NORTHEAST CAPROCK QUEEN UNIT	016	SIERRA BLANCA OPERATING COMPANY	O	A	Lea	A	20	12	S	32	E	660	N	660	E
53	30-025-00151-00-00	NORTHEAST CAPROCK QUEEN UNIT	017	SIERRA BLANCA OPERATING COMPANY	I	A	Lea	D	21	12	S	32	E	660	N	660	W
54	30-025-00153-00-00	NORTHEAST CAPROCK QUEEN UNIT	018	SIERRA BLANCA OPERATING COMPANY	O	A	Lea	C	21	12	S	32	E	660	N	1980	W
55	30-025-00155-00-00	NORTHEAST CAPROCK QUEEN UNIT	019	SIERRA BLANCA OPERATING COMPANY	I	A	Lea	B	21	12	S	32	E	660	N	1980	E
56	30-025-00156-00-00	NORTHEAST CAPROCK QUEEN UNIT	020	SIERRA BLANCA OPERATING COMPANY	O	A	Lea	A	21	12	S	32	E	330	N	990	E
57	30-025-00161-00-00	NORTHEAST CAPROCK QUEEN UNIT	021	SIERRA BLANCA OPERATING COMPANY	I	S	Lea	D	22	12	S	32	E	660	N	660	W
58	30-025-00162-00-00	NORTHEAST CAPROCK QUEEN UNIT	022	SIERRA BLANCA OPERATING COMPANY	O	A	Lea	C	22	12	S	32	E	660	N	1980	W
59	30-025-00160-00-00	NORTHEAST CAPROCK QUEEN UNIT	023	SIERRA BLANCA OPERATING COMPANY	I	A	Lea	B	22	12	S	32	E	660	N	1981	E
60	30-025-00167-00-00	NORTHEAST CAPROCK QUEEN UNIT	025	SIERRA BLANCA OPERATING COMPANY	I	A	Lea	D	23	12	S	32	E	660	N	660	W
61	30-025-00168-00-00	NORTHEAST CAPROCK QUEEN UNIT	026	SIERRA BLANCA OPERATING COMPANY	I	A	Lea	C	23	12	S	32	E	330	N	1650	W
62	30-025-00145-00-00	NORTHEAST CAPROCK QUEEN UNIT	027	SIERRA BLANCA OPERATING COMPANY	O	A	Lea	G	20	12	S	32	E	1980	N	1980	E
63	30-025-00149-00-00	NORTHEAST CAPROCK QUEEN UNIT	028	SIERRA BLANCA OPERATING COMPANY	I	A	Lea	H	20	12	S	32	E	1980	N	661	E
64	30-025-00152-00-00	NORTHEAST CAPROCK QUEEN UNIT	029	SIERRA BLANCA OPERATING COMPANY	O	A	Lea	E	21	12	S	32	E	1980	N	660	W
65	30-025-00154-00-00	NORTHEAST CAPROCK QUEEN UNIT	030	SIERRA BLANCA OPERATING COMPANY	I	A	Lea	F	21	12	S	32	E	1980	N	1980	W
66	30-025-00163-00-00	NORTHEAST CAPROCK QUEEN UNIT	031	SIERRA BLANCA OPERATING COMPANY	I	A	Lea	H	22	12	S	32	E	1650	N	560	E
67	30-025-00165-00-00	NORTHEAST CAPROCK QUEEN UNIT	032	SIERRA BLANCA OPERATING COMPANY	O	A	Lea	E	23	12	S	32	E	1980	N	660	W
68	30-025-00169-00-00	NORTHEAST CAPROCK QUEEN UNIT	033	SIERRA BLANCA OPERATING COMPANY	I	A	Lea	F	23	12	S	32	E	1980	N	1980	W

Seq. #	API WELL #	Well Name	Well #	Operator Name	Type	Stat	ount	UL	Sec	Tw	N/S	Rig	/E	Feet	NS	FL	EW
69	30-025-00150-00-00	NORTHEAST CAPROCK QUEEN UNIT	034	SIERRA BLANCA OPERATING COMPANY	I	A	Lea	L	21	12	S	32	E	2310	S	330	W
70	30-025-28581-00-00	NORTHEAST CAPROCK QUEEN UNIT	035Y	SIERRA BLANCA OPERATING COMPANY	O	A	Lea	N	16	12	S	32	E	1265	S	2565	W
71	30-025-08073-00-00	YOUNG UNIT	002	SIERRA BLANCA OPERATING COMPANY	O	A	Lea	D	16	18	S	32	E	660	N	660	W
72	30-025-08078-00-00	YOUNG UNIT	003	SIERRA BLANCA OPERATING COMPANY	I	A	Lea	A	17	18	S	32	E	660	N	330	E
73	30-025-08084-00-00	YOUNG UNIT	005	SIERRA BLANCA OPERATING COMPANY	I	A	Lea	G	17	18	S	32	E	2310	N	2310	E
74	30-025-08077-00-00	YOUNG UNIT	006	SIERRA BLANCA OPERATING COMPANY	O	A	Lea	H	17	18	S	32	E	1980	N	660	E
75	30-025-08072-00-00	YOUNG UNIT	007	SIERRA BLANCA OPERATING COMPANY	I	A	Lea	E	16	18	S	32	E	1980	N	660	W
76	30-025-08083-00-00	YOUNG UNIT	009	SIERRA BLANCA OPERATING COMPANY	I	A	Lea	I	17	18	S	32	E	2350	S	1025	E
77	30-025-08081-00-00	YOUNG UNIT	010	SIERRA BLANCA OPERATING COMPANY	O	A	Lea	K	17	18	S	32	E	1650	S	1980	W
78	30-025-08079-00-00	YOUNG UNIT	011	SIERRA BLANCA OPERATING COMPANY	O	A	Lea	N	17	18	S	32	E	510	S	1685	W
79	30-025-08096-00-00	YOUNG UNIT	012	SIERRA BLANCA OPERATING COMPANY	I	A	Lea	D	20	18	S	32	E	660	N	660	W
80	30-025-08092-00-00	YOUNG UNIT	013	SIERRA BLANCA OPERATING COMPANY	O	A	Lea	C	20	18	S	32	E	660	S	1980	W
81	30-025-00862-00-00	YOUNG UNIT	014	SIERRA BLANCA OPERATING COMPANY	I	A	Lea	B	20	18	S	32	E	990	N	2310	E
82	30-025-08097-00-00	YOUNG UNIT	015	SIERRA BLANCA OPERATING COMPANY	O	A	Lea	C	20	18	S	32	E	1214	N	1426	W
83	30-025-08093-00-00	YOUNG UNIT	016	SIERRA BLANCA OPERATING COMPANY	I	A	Lea	E	20	18	S	32	E	1980	N	660	W
84	30-025-00860-00-00	YOUNG UNIT	018	SIERRA BLANCA OPERATING COMPANY	I	A	Lea	G	20	18	S	32	E	2310	N	2310	E
85	30-025-08094-00-00	YOUNG UNIT	019	SIERRA BLANCA OPERATING COMPANY	I	A	Lea	H	20	18	S	32	E	2310	N	990	E

Seq. N	API WELL #	Well Name	Well #	Operator Name	Type	Stat	ounty	UL	Sec	Tw	N/S	Rng	E	Feet	NS	Fl	EW
86	30-025-08101-00-00	YOUNG UNIT	021	SIERRA BLANCA OPERATING COMPANY	O	A	Lea	J	20	18	S	32	E	1980	S	1980	E
87	30-025-08099-00-00	YOUNG UNIT	022	SIERRA BLANCA OPERATING COMPANY	O	A	Lea	K	20	18	S	32	E	1980	S	1980	W
88	30-025-08100-00-00	YOUNG UNIT	024	SIERRA BLANCA OPERATING COMPANY	O	A	Lea	N	20	18	S	32	E	990	S	2310	W
89	30-025-08091-00-00	YOUNG UNIT	025	SIERRA BLANCA OPERATING COMPANY	I	A	Lea	O	20	18	S	32	E	990	S	1650	E
90	30-025-00875-00-00	YOUNG UNIT	030	SIERRA BLANCA OPERATING COMPANY	I	A	Lea	C	29	18	S	32	E	330	N	1650	W