

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 21, 1994  
 Instructions on back  
 Submit to Appropriate District Office  
 5 Copies

AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

|  |                                 |                        |
|--|---------------------------------|------------------------|
| Operator name and Address<br>Xeric Oil & Gas Corporation<br>PO Box 352<br>Midland, Texas 79702 |                                 | OGRID Number<br>025482 |
| Reason for Filing Code<br>CO Effective 8/1/96  |                                 |                        |
| API Number<br>30-0 25-30954  | Pool Name<br>Hobbs, Grayburg/SA | Pool Code<br>31920     |
| Property Code<br>011886  | Property Name<br>Mexico U       | Well Number<br>3       |

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 |
|---------------|---------|----------|-------|---------|---------------|------------------|---------------|----------------|--------|
| B             | 8       | 19S      | 38E   |         | 590           | North            | 2310          | East           | Lea    |

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 |
|---------------|---------|----------|-------|---------|---------------|------------------|---------------|----------------|--------|
| P             | P       |          |       |         |               |                  |               |                |        |

III. Oil and Gas Transporters

| Transporter OGRID | Transporter Name and Address                                  | POD     | O/G | POD ULSTR Location and Description     |
|-------------------|---|---------|-----|--|
| 037480            | EOTT Energy Corp. L.P.<br>PO Box 1660<br>Midland, Texas 79702 | 2641710 | 0   | Unit B, Sec.8 19S, 38E<br>Lea Co. NM   |
| 009171            | GPM Gas Corp.<br>4044 Pen Brook<br>Odessa, Texas 79762        | 2641730 | G   | Unit B, Sec. 8, 19S, 38E<br>Lea Co. NM |
|                   |   |         |     |  |
|                   |   |         |     |  |

IV. Produced Water

| POD     | POD ULSTR Location and Description |
|---------|------------------------------------|
| 2641750 |                                    |

V. Well Completion Data

| Spud Date | Ready Date           | TD        | PBTD         | 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 | Cap. 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: *Glenda Hunt*  
 Printed name: Glenda Hunt  
 Title: Production  
 Date: 7/19/96 Phone: 915-683-3171

OIL CONSERVATION DIVISION

Approved by: ORIGINAL SIGNED BY  
*GLYNN BARK*  
 Title: FIELD REP. II  
 Approval Date: JUL 25 1996

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

| Previous Operator Signature | Printed Name | Title | Date |
|-----------------------------|--------------|-------|------|
|                             |              |       |      |

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|  |                                 | Reason for Filing Code<br>CO Effective 8/1/96 |
| API Number<br>30-0 25-30954  | Pool Name<br>Hobbs, Grayburg/SA | Pool Code<br>31920                            |
| Property Code<br>011886  | Property Name<br>Mexico U       | Well Number<br>3                              |

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 |
|---------------|---------|----------|-------|---------|---------------|------------------|---------------|----------------|--------|
| B             | 8       | 19S      | 38E   |         | 590           | North            | 2310          | East           | Lea    |

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 |
|---------------|----------------------------|---------------------|---------------------|----------------------|-----------------------|------------------|---------------|----------------|--------|
|               |                            |                     |                     |                      |                       |                  |               |                |        |
| Lee Code<br>P | Producing Method Code<br>P | 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     |
|-------------------|---|---------|-----|--|
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|                   |   |         |     |  |
|                   |   |         |     |  |

IV. Produced Water

|                |                                    |
|----------------|------------------------------------|
| POD<br>2641750 | POD ULSTR Location and Description |
|----------------|------------------------------------|

V. Well Completion Data

| Spud Date | Ready Date           | TD        | PBTD         | 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: *Glenda Hunt*  
 Printed name: Glenda Hunt  
 Title: Production  
 Date: 7/19/96 Phone: 915-683-3171

OIL CONSERVATION DIVISION  
 Approved by:  
 Title:  
 Approval Date: JUL 21 1996

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

|                             |              |       |      |
|-----------------------------|--------------|-------|------|
| Previous Operator Signature | Printed Name | Title | Date |
|-----------------------------|--------------|-------|------|

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

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

## REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.

|  |   |
|--|---|
| Operator<br><b>Xeric Oil &amp; Gas Company</b>   | Well API No.  |
| Address<br><b>P. O. Box 51311 Midland, TX 79710</b>  |   |
| Reason(s) for Filing (Check proper box) <input checked="" type="checkbox"/> Other (Please explain) |   |
| New Well <input type="checkbox"/>  | Change in Transporter of <input type="checkbox"/>                           |
| Recompletion <input type="checkbox"/>  | Oil <input checked="" type="checkbox"/> Dry Gas <input type="checkbox"/>    |
| Change in Operator <input type="checkbox"/>  | Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/> |
| Gas Connection Date  |   |
| If change of operator give name and address of previous operator                                   |   |

### II. DESCRIPTION OF WELL AND LEASE

|                                  |                      |   |  |                            |
|----------------------------------|----------------------|---|--|----------------------------|
| Lease Name<br><b>Mexico "U"</b>  | Well No.<br><b>3</b> | Pool Name, including Formation<br><b>Hobbs (G-S.A.)</b> | Kind of Lease<br>State, Federal or Fee | Lease No.<br><b>E-3290</b> |
| Location<br>Unit Letter <b>B</b> | <b>590</b>           | Feet From The <b>North</b> Line and <b>2310</b>         | Feet From The <b>East</b> Line         |                            |
| Section <b>8</b>                 | Township <b>19-S</b> | Range <b>38-E</b>                                       | NMPM, <b>Lea</b>                       | County                     |

### III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

|  |  |
|--|--|
| Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>         | Address (Give address to which approved copy of this form is to be sent) |
| <b>Petro Source Partners, Ltd.</b>   | <b>9801 Westheimer, Ste. 900, Houston, TX 7704</b>                       |
| Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> | Address (Give address to which approved copy of this form is to be sent) |
| <b>Phillips 66 Natural Gas Co. GPM gas Corp.</b>   | <b>4001 Penbrook Odessa, TX 79761</b>                                    |
| If well produces oil or liquids, give location of tanks.   | When? <b>December 14, 1990</b>   |

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, 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 liquid 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  |

**GAS WELL**

|                                  |                           |                           |                       |
|----------------------------------|---------------------------|---------------------------|-----------------------|
| Actual Prod. Test - MCF/D        | Length of Test            | Bbls Condensate/MCF       | Gravity 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   
Printed Name **Gary S. Barker Operations Mgr.**  
Date **6-01-92** Telephone No. **915/683-3471**

### OIL CONSERVATION DIVISION

Date Approved **6-15-92**  
By **Paul Rantz**  
Title

INSTRUCTIONS: This form is to be filed in duplicate with the O.C.D.

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