



**NEW MEXICO ENERGY, MINERALS
& NATURAL RESOURCES DEPARTMENT**

**OIL CONSERVATION DIVISION
2040 South Pacheco Street
Santa Fe, New Mexico 87505
(505) 827-7131**

February 10, 2000

ARCO Permian
P.O. Box 1610
Midland, Texas 79702

Attention: Laurie Cherry

RE: C-142 Application for New Well Status
Crooked Canyon Federal Well No. 1, API No. 30-015-30559
Barclay Federal Well No. 25, API No. 30-015-30597
Barclay Federal Well No. 11, API No. 30-015-30065

Dear Ms. Cherry:

Pursuant to Division Rule 34.C.(3), the deadline for filing for the New Well Tax Incentive is within sixty (60) days of completion of the well as a producer, therefore your application is hereby denied.

If you have any questions, please contact me at (505) 827-8183.

Sincerely,

A handwritten signature in black ink that reads "Mark Ashley".

Mark Ashley
Petroleum Engineering Specialist

District I - (505) 393-6161
1625 N. French Dr
Hobbs, NM 88240
District II - (505) 748-1283
811 S. First
Artesia, NM 88210
District III - (505) 334-6178
1000 Rio Brazos Road
Aztec, NM 87410
District IV - (505) 827-7131
2040 S. Pacheco
Santa Fe, NM 87505

New Mexico

Energy Minerals and Natural Resources Department

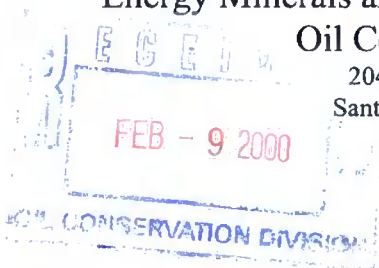
Oil Conservation Division

2040 South Pacheco Street
Santa Fe, New Mexico 87505
(505) 827-7131

1588

Form C-142
Date 06/99

SUBMIT ORIGINAL
PLUS 2 COPIES
TO THE SANTA FE
OFFICE



APPLICATION FOR NEW WELL STATUS

I. Operator and Well

Operator name & address ARCO Permian P. O. Box 1610 Midland, Texas 79702							OGRID Number 000990	
Contact Party LAURIE CHERRY							Phone 915-688-5532	
Property Name CROOKED CANYON FEDERAL					Well Number 1		API Number 30-015-30559	
UL I	Section 35	Township 20S	Range 21E	Feet From The 1650	North/South Line SOUTH	Feet From The 660	East/West Line EAST	County Eddy

II. Date/Time Information

Spud Date 5-28-99	Spud Time	Date Completed 7-27-99	Pool LITTLE BOX CANYON MORROW
----------------------	-----------	---------------------------	----------------------------------

III. Attach copies of Form C-103 or Federal Form 3160-5 showing date/time of drilling commenced and Form C-105 or Federal Form 3160-4 showing well was completed as a producer.

IV. Attach a list of all working interest owners with their percentage interests.

V. AFFIDAVIT:

State of TEXAS)
County of MIDLAND) ss.

LAURIE CHERRY, being first duly sworn, upon oath states:

1. I am the Operator, or authorized representative of the Operator, of the above-referenced well.
2. To the best of my knowledge, this application is complete and correct.

Signature Laurie Cherry Title Reg. / Comp. Asst. Date 1-26-00

SUBSCRIBED AND SWORN TO before me this 26 day of JANUARY, 2000.



LEIGH ANN LANE
Notary Public, State of Texas
My Commission Expires: 12-12-2000

Leigh Ann Lane
Notary Public

My Commission expires: _____

FOR OIL CONSERVATION DIVISION USE ONLY:

VI. CERTIFICATION OF APPROVAL:

This Application is hereby approved and the above-referenced well is designated a New Well. By copy hereof, the Division notifies the Secretary of the Taxation and Revenue Department of this Approval.

Signature	Title	Date
-----------	-------	------

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

NOTICE: The operator must notify all working interest owners of this New Well certification.

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
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.

FORM APPROVED
Budget Bureau No. 1004-0135
Expires November 30 2000

5. Lease Serial No.

NM 25336

6. If Indian, Allottee or Tribe Name

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

8. Well Name and No.

CROOKED CANYON 1
FEDERAL

9. API Well No.

30-015-30559

10. Field and Pool, or Exploratory Area

LITTLE BOX
CANYON MORROW

11. County or Parish, State

EDDY NM

SUBMIT IN TRIPLICATE - Other instructions on reverse side

1. Type of Well

☐ Oil Well ☒ Gas Well ☐ Other

2. Name of Operator

ARCO Permian

3a. Address

P.O. Box 1610, Midland, TX 79702

3b. Phone No. (include area code)

915-688-5570

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

SEC. 35, T-20-S, R-21-E, NMPM, EDDY COUNTY, 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

- | | | | |
|---|---|--|---|
| <input type="checkbox"/> Acidize | <input type="checkbox"/> Deepen | <input type="checkbox"/> Production (Start/Resume) | <input type="checkbox"/> Water Shut-Off |
| <input type="checkbox"/> Alter Casing | <input type="checkbox"/> Fracture Treat | <input type="checkbox"/> Reclamation | <input type="checkbox"/> Well Integrity |
| <input type="checkbox"/> Casing Repair | <input type="checkbox"/> New Construction | <input type="checkbox"/> Recomplete | <input checked="" type="checkbox"/> Other <u>SPUD AND SET</u> |
| <input type="checkbox"/> Change Plans | <input type="checkbox"/> Plug and Abandon | <input type="checkbox"/> Temporarily Abandon | <u>CASING.</u> |
| <input type="checkbox"/> Convert to Injection | <input type="checkbox"/> Plug Back | <input type="checkbox"/> Water Disposal | |

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.)

5/28/99 SPUD 12-1/4 HOLE AND SET 9-5/8" 36# j-55 @1402' W/360 SX CLASS C
CMT. TOC @875' W/TEMP. SURV. RUN 1" TBG AND STAGE CMT F/650' BACK
TO SURFACE. CIRC. 3 SX CMT TO PIT.

6/22/99 RUN AND SET 5-1/2" 17# j-55 @8174' W/900 SX CLASS C CMT. 10 CENTRALIZERS
TOC 5200' CALC.

RECEIVED

AUG 13 1999

LAND
ADMINISTRATION

ACCEPTED FOR RECORD

AUG 12 1999

BLM

14. I hereby certify that the foregoing is true and correct
Name (Printed/Typed)

LAURIE CHERRY

Title

REGULATORY/COMPLIANCE

Date 7/30/99

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

Title

Date

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

Title 18 U.S.C. Section 1001, 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.

(Instructions on reverse)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN DUPLICATE*

(See other in-
structions on
reverse side)

FORM APPROVED
OMB NO. 1004-0137

Expires: February 28, 1995

5. LEASE DESIGNATION AND SERIAL NO.

NM 25336

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME, WELL NO.

CROOKED CANYON
FEDERAL

1

9. API WELL NO.

30-015-30559

10. FIELD AND POOL, OR WILDCAT

LITTLE BOX
CANYON MORROW

11. SEC., T., R., M., OR BLK.
AND SURVEY OR AREA

35-20S-21E

12. COUNTY OR
PARISH

EDDY

13. STATE

NM

WELL COMPLETION OR RECOMPLETION REPORT AND LOG*

1a. TYPE OF WELL:

OIL WELL ☐

GAS WELL ☒

DRY ☐

Other _____

b. TYPE OF COMPLETION:

NEW WELL ☒

WORK OVER ☐

DEEP-EN ☐

PLUG BACK ☐

DIFF. RESVR. ☐

Other _____

2. NAME OF OPERATOR

ARCO Permian

3. ADDRESS AND TELEPHONE NO.

P.O. Box 1610, Midland, TX 79702

915-688-5532

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*

At surface

1650' FSL, 660' FEL

At top prod. interval reported below

At total depth

14. PERMIT NO.

DATE ISSUED

15. DATE SPUDDED

5/28/99

16. DATE T.D. REACHED

6/18/99

17. DATE COMPL. (Ready to prod.)

7/27/99

18. ELEVATIONS (DF, RKB, RT, GR, ETC.)*

4425'

19. ELEV. CASINGHEAD

20. TOTAL DEPTH, MD & TVD

8200

21. PLUG, BACK T.D., MD & TVD

8160

22. IF MULTIPLE COMPL.,
HOW MANY*

23. INTERVALS
DRILLED BY

ROTARY TOOLS

X

CABLE TOOLS

24. PRODUCING INTERVAL(S), OF THIS COMPLETION - TOP, BOTTOM, NAME (MD AND TVD)*

7984-8012

25. WAS DIRECTIONAL
SURVEY MADE

N

26. TYPE ELECTRIC AND OTHER LOGS RUN

27. WAS WELL CORED

N

28. CASING RECORD (Report all strings set in well)

CASING SIZE/GRADE	WEIGHT, LB/FT.	DEPTH SET (MD)	HOLE SIZE	TOP OF CEMENT, CEMENTING RECORD	AMOUNT PULLED
9-5/8	36	1402'	12-1/4	CIRC	NA
5-1/2	17	8174'	8-3/4	5200' CALC	NA

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					2-3/8	8012	7877

30. TUBING RECORD

31. PERFORATION RECORD (Interval, size and number)

7984-8012 W/4 SPF

32. ACID SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
7984-8012'	ACID W/7.5% HCl W/730 SCFM:
	FRAC W/19000# SD

33.*

PRODUCTION

DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping - size and type of pump)					WELL STATUS (Producing or shut-in)	
		FLOWING					PRODUCING	
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL - BBL	GAS - MCF.	WATER - BBL	GAS - OIL RATIO	
7/27/99	24		→	0	400	0		
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL - BBL	GAS - MCF.	WATER - BBL	OIL GRAVITY - API (CORR.)		
400		→						

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)

SOLD

TEST WITNESSED BY

35. LIST OF ATTACHMENTS

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records

SIGNED Laurie Cherry

TITLE REGULATORY COMPLIANCE

DATE 8/10/99

*(See Instructions and Spaces for Additional Data on Reverse Side)

Title 18 U.S.C. Section 1001, 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.

CROOKED CANYON FEDERAL #1
API #30-015-30559
EDDY COUNTY, NEW MEXICO
WORKING INTEREST OWNERS

Dennis D. Corkran 1001 Loop 360 South L-100 Austin, TX 78746	2.113636%
David J. Andrews 1001 Loop 360 South, Bldg L, Suite 100 Austin, TX 78746	2.113636%
Sid Cowan 35 Meadow Lane Del Rio, TX 78840	3%
D & D Partnership 830 East Big Briar Way LaCanada, CA 91011	4%
Scott E. Muehlbrad 2511 Terrace Midland, TX 79705	1.056818%
Sutherland Family, LLC 306 West Wall, #700 Midland, TX 79701	10.568182%
Cannon Exploration Company 3608 SCR 1184 Midland, TX 79706	2.113636%
Nadel & Gussman Permian, LLC 3200 First National Tower Tulsa, OK 74103	15.852274%
Reber-Garrett Associates, a Pennsylvania Partnership 4629 State Road Drexel Hill, PA 19026	1.056818%
Atlantic Richfield Company	58.125%

District I - (505) 393-6161

1625 W. French Dr
Hobbs, NM 88240

District II - (505) 748-1283

811 S. First
Artesia, NM 88210

District III - (505) 334-6178

1000 Rio Brazos Road
Aztec, NM 87410

District IV - (505) 827-7131

2040 S. Pacheco
Santa Fe, NM 87505

New Mexico

Energy Minerals and Natural Resources Department

Oil Conservation Division

2040 South Pacheco Street
Santa Fe, New Mexico 87505
(505) 827-7131

1589

Form C-142

Date 06/99

SUBMIT ORIGINAL
PLUS 2 COPIES
TO THE SANTA FE
OFFICE

FEB - 9 2000

OIL CONSERVATION DIVISION

APPLICATION FOR NEW WELL STATUS

I. Operator and Well

Operator name & address ARCO Permian P. O. Box 1610 Midland, Texas 79702							OGRID Number 000990		
Contact Party LAURIE CHERRY							Phone 915-688-5532		
Property Name BARCLAY FEDERAL					Well Number 25		API Number 30-015-30597		
UL D	Section 12	Township 23S	Range 31E	Feet From The 660	North/South Line NORTH	Feet From The 660	East/West Line WEST	County EDDY	

II. Date/Time Information

Spud Date 9-24-99	Spud Time	Date Completed 10-25-99	Pool LIVINGSTON RIDGE (DEL)
----------------------	-----------	----------------------------	--------------------------------

III. Attach copies of Form C-103 or Federal Form 3160-5 showing date/time of drilling commenced and Form C-105 or Federal Form 3160-4 showing well was completed as a producer.

IV. Attach a list of all working interest owners with their percentage interests.

V. AFFIDAVIT:

State of TEXAS)
ss.
County of MIDLAND)

LAURIE CHERRY, being first duly sworn, upon oath states:

1. I am the Operator, or authorized representative of the Operator, of the above-referenced well.
2. To the best of my knowledge, this application is complete and correct.

Signature Laurie Cherry Title Reg. / Comp Asst. Date 1-26-00

SUBSCRIBED AND SWORN TO before me this 26th day of JANUARY, 2000.



Notary Public, State of Texas
My Commission Expires: 12-12-2000

Leigh Ann Lane
Notary Public

My Commission expires: _____

FOR OIL CONSERVATION DIVISION USE ONLY:

VI. CERTIFICATION OF APPROVAL:

This Application is hereby approved and the above-referenced well is designated a New Well. By copy hereof, the Division notifies the Secretary of the Taxation and Revenue Department of this Approval.

Signature	Title	Date
-----------	-------	------

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

NOTICE: The operator must notify all working interest owners of this New Well certification.

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN DUPLICATE*

OPERATOR'S COPY
(reverse side)FORM APPROVED
OMB NO. 1004-0137
Expires: February 28, 1995

LEASE DESIGNATION AND SERIAL NO.

NM-22080

WELL COMPLETION OR RECOMPLETION REPORT AND LOG*

1a. TYPE OF WELL: OIL WELL ☒ GAS WELL ☐ DRY ☐ Other _____

b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other _____

2. NAME OF OPERATOR

ARCO Permian

3. ADDRESS AND TELEPHONE NO.

P.O. Box 1610, Midland, TX 79702

915-688-5532

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*

At surface

660' FNL, 660' FWL

At top prod. interval reported below

At total depth

14. PERMIT NO.

DATE ISSUED

12. COUNTY OR PARISH

EDDY

13. STATE

NM

15. DATE SPUDDED

9/24/99

16. DATE T.D. REACHED

10/10/99

17. DATE COMPL. (Ready to prod.)

10/25/99

18. ELEVATIONS (DF, RKB, RT, GR, ETC.)*

3463

19. ELEV. CASINGHEAD

20. TOTAL DEPTH, MD & TVD

8377

21. PLUG, BACK T.D., MD & TVD

8324

22. IF MULTIPLE COMPL., HOW MANY*

23. INTERVALS DRILLED BY

ROTARY TOOLS

X

CABLE TOOLS

24. PRODUCING INTERVAL(S), OF THIS COMPLETION - TOP, BOTTOM, NAME (MD AND TVD)*

6553-6849, 7046-7075, 7483-7512, 8136-8156

25. WAS DIRECTIONAL SURVEY MADE

N

26. TYPE ELECTRIC AND OTHER LOGS RUN

GR

27. WAS WELL CORED

N

28. CASING RECORD (Report all strings set in well)

CASING SIZE/GRADE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	TOP OF CEMENT, CEMENTING RECORD	AMOUNT PULLED
13-3/8	48	854	17-1/2	CIRC	NA
8-5/8	32	4421	11	CIRC	NA
5-1/2	17	8377	7-7/8	1900' TS	NA

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)
				2-7/8

30. TUBING RECORD

SIZE	DEPTH SET (MD)	PACKER SET (MD)
	7737	

31. PERFORATION RECORD (Include size and number)

6553-6849

7046-7075

7483-7512

8136-8156

ACCEPTED FOR RECORD

NOV 23 1999

(ORIG. SGD.) LES BABYAK

32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
8136-8156	1000 GAL 15% 24360 GAL NIK 130; 65000# SD
7483-7512	" " 33000 " " 75000# SD
7046-7075	" " " " " "
6553-6843	" " 66,000 " " 30000# SD

33. BLM PRODUCTION

DATE FIRST PRODUCTION	PRODUCTION METHOD (Flowing, gas lift, pumping - size and type of pump)	WELL STATUS (Producing or shut-in)
10/25/99	PUMPING	PRODUCING

DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL - BBL.	GAS - MCF.	WATER - BBL.	GAS - OIL RATIO
11/1/99	24			15	18	317	1200

FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL - BBL.	GAS - MCF.	WATER - BBL.	OIL GRAVITY - API (CORR.)
200	70					36.8

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)

SOLD

TEST WITNESSED BY

35. LIST OF ATTACHMENTS

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records

SIGNED

Laurie Cherry

TITLE REGULATORY COMPLIANCE

DATE 11/15/99

*(See Instructions and Spaces for Additional Data on Reverse Side)

Title 18 U.S.C. Section 1001, 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.

Orig: Vaughn-HU
cc: Gmush-HU
Hartman-HU
Parker

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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.

FORM APPROVED
Budget Bureau No. 1004-0135
Expires November 30 2000

5. Lease Serial No.

NM-22080

6. If Indian, Allottee or Tribe Name

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

8. Well Name and No.
BARCLAY FEDERAL

25

9. API Well No.

3001530597

10. Field and Pool, or Exploratory Area
LIVINGSTON RIDGE (DEL)

11. County or Parish, State

EDDY

NM

SUBMIT IN TRIPLICATE - Other instructions on reverse side

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator

ARCO Permian

3a. Address

P.O. BOX 1610, MIDLAND, TX 79702

3b. Phone No. (include area code)

915-688-5532

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

660' FNL, 660' FWL
SEC 12, T23S, R31E

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

- | | | | |
|---|---|--|---|
| <input type="checkbox"/> Acidize | <input type="checkbox"/> Deepen | <input type="checkbox"/> Production (Start/Resume) | <input type="checkbox"/> Water Shut-Off |
| <input type="checkbox"/> Alter Casing | <input type="checkbox"/> Fracture Treat | <input type="checkbox"/> Reclamation | <input type="checkbox"/> Well Integrity |
| <input type="checkbox"/> Casing Repair | <input type="checkbox"/> New Construction | <input type="checkbox"/> Recomplete | <input checked="" type="checkbox"/> Other <u>SPUD AND SET</u> |
| <input type="checkbox"/> Change Plans | <input type="checkbox"/> Plug and Abandon | <input type="checkbox"/> Temporarily Abandon | <u>CASING</u> |
| <input type="checkbox"/> Convert to Injection | <input type="checkbox"/> Plug Back | <input type="checkbox"/> Water Disposal | |

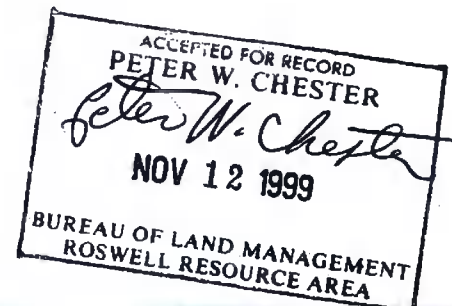
13. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recompleat horizontally, give subsurface locations and measured and true vertical depths 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 recompleat 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.)

9-24-99 SPUD 17-1/2" HOLE. DRILL F/40' TO 175'.

9-25-99 SET 13-3/8" CSG IN 17-1/2" HOLE WITH 700 SK CLASS C CEMENT @ 854'. CIRC 50 SX CMT TO PIT.

10-2-99 SET 8-5/8" CSG IN 11" HOLE WITH 1400 SX CLASS C CMT @ 4421'. CIRC. 197 SX CMT TO PIT.

10-11-99 SET 5-1/2" CSG IN 7-7/8" HOLE WITH 900 SX CLASS H CMT @8377'. TOC @1900' TEMP. SURVEY.



14. I hereby certify that the foregoing is true and correct
Name (Printed/Typed)

Title

REG./COMP. ASSISTANT

Date 10/20/99

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

Title

Date

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

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(Instructions on reverse)

**BARCLAY FEDERAL LEASE
EDDY COUNTY, NEW MEXICO**

WORKING INTEREST OWNERS

Atlantic Richfield Company	100%
P. O. Box 1610	
Midland, Texas 79702	

District I - (505) 393-6161
1625 N. French Dr
Hobbs, NM 88240
District II - (505) 748-8283
811 S. First
Artesia, NM 88210
District III - (505) 334-6178
1000 Rio Brazos Road
Aztec, NM 87410
District IV - (505) 827-7131
2040 S. Pacheco
Santa Fe, NM 87505

New Mexico

Energy Minerals and Natural Resources Department

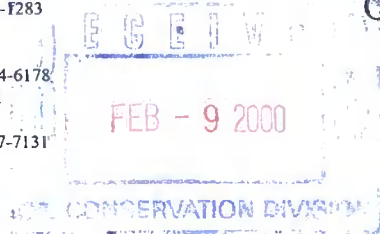
Oil Conservation Division

2040 South Pacheco Street
Santa Fe, New Mexico 87505
(505) 827-7131

1590

Form C-142
Date 06/99

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OFFICE



APPLICATION FOR NEW WELL STATUS

I. Operator and Well

Operator name & address ARCO Permian P. O. Box 1610 Midland, Texas 79702							OGRID Number 000990		
Contact Party <u>LAURIE CHERY</u>							Phone <u>915-688-5532</u>		
Property Name <u>BARCLAY FEDERAL</u>					Well Number <u>11</u>		API Number <u>30-015-30063</u>		
Uh <u>A</u>	Section <u>12</u>	Township <u>23S</u>	Range <u>31E</u>	Feet From The <u>760</u>	North/South Line <u>NORTH</u>	Feet From The <u>660</u>	East/West Line <u>EAST</u>	County <u>EDDY</u>	

II. Date/Time Information

Spud Date <u>10-13-99</u>	Spud Time	Date Completed <u>11-9-99</u>	Pool <u>LIVINGSTON RIDGE (DEL)</u>
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III. Attach copies of Form C-103 or Federal Form 3160-5 showing date/time of drilling commenced and Form C-105 or Federal Form 3160-4 showing well was completed as a producer.

IV. Attach a list of all working interest owners with their percentage interests.

V. AFFIDAVIT:

State of TEXAS)
County of MIDLAND) ss.

LAURIE CHERY, being first duly sworn, upon oath states:

1. I am the Operator, or authorized representative of the Operator, of the above-referenced well.
2. To the best of my knowledge, this application is complete and correct.

Signature Laurie Chery Title Reg./Comp. Asst. Date 1-26-00

SUBSCRIBED AND SWORN TO before me this 26 day of JANUARY, 2000.



LEIGH ANN LANE
Notary Public, State of Texas
My Commission Expires: 12-12-2000

Leigh Ann Lane
Notary Public

My Commission expires: _____

FOR OIL CONSERVATION DIVISION USE ONLY:

VI. CERTIFICATION OF APPROVAL:

This Application is hereby approved and the above-referenced well is designated a New Well. By copy hereof, the Division notifies the Secretary of the Taxation and Revenue Department of this Approval.

Signature	Title	Date
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VII. DATE OF NOTIFICATION TO THE SECRETARY OF THE TAXATION AND REVENUE DEPARTMENT: _____

NOTICE: The operator must notify all working interest owners of this New Well certification.

OPERATOR'S COPY
UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN DUPLICATE*
(See other instructions on reverse side)

FORM APPROVED
OMB NO. 1004-0137

Expires: February 28, 1995

5. LEASE DESIGNATION AND SERIAL NO.

NM-22080

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME, WELL NO.

BARCLAY FEDERAL 11

9. API WELL NO.

30-015-30063 S1

10. FIELD AND POOL, OR WILDCAT

LIVINGSTON RIDGE (DEL)

11. SEC., T., R., M., OR BLK.
AND SURVEY OR AREA

12-T23S-R31E

12. COUNTY OR
PARISH

EDDY

13. STATE

NM

1a. TYPE OF WELL:

OIL WELL ☒GAS WELL ☐DRY ☐

Other _____

b. TYPE OF COMPLETION:

NEW WELL ☒WORK OVER ☐DEEP-EN ☐PLUG BACK ☐DIFF. RESVR. ☐

Other _____

2. NAME OF OPERATOR

ARCO Permian

3. ADDRESS AND TELEPHONE NO.

P.O. Box 1610, Midland, TX 79702

915-688-5532

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*

At surface

760' FNL. 660' FEL

At top prod. interval reported below

At total depth

14. PERMIT NO.

DATE ISSUED

15. DATE SPUDDED

10-13-99

16. DATE T.D. REACHED

10-27-99

17. DATE COMPL. (Ready to prod.)

11/9/99

18. ELEVATIONS (DF, RKB, RT, GR, ETC.)*

3499'

19. ELEV. CASINGHEAD

20. TOTAL DEPTH, MD & TVD

8450'

21. PLUG, BACK T.D., MD & TVD

8403

22. IF MULTIPLE COMPL.,
HOW MANY*23. INTERVALS
DRILLED BY

ROTARY TOOLS

X

CABLE TOOLS

24. PRODUCING INTERVAL(S), OF THIS COMPLETION - TOP, BOTTOM, NAME (MD AND TVD)*

SEE ATTACHED

25. WAS DIRECTIONAL
SURVEY MADE

N

26. TYPE ELECTRIC AND OTHER LOGS RUN

GAMMA RAY, CPN

27. WAS WELL CORED

N

28. CASING RECORD (Report all strings set in well)

CASING SIZE/GRADE	WEIGHT, LB/FT.	DEPTH SET (MD)	HOLE SIZE	TOP OF CEMENT, CEMENTING RECORD	AMOUNT PULLED
13-3/8	48	858	17-1/2	CIRC	NA
8-5/8	32	4440	11	CIRC	NA
5-1/2	17	8450	7-7/8		NA

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)

30. TUBING RECORD

SIZE	DEPTH SET (MD)	PACKER SET (MD)
2-7/8	7504	

31. PERFORATION RECORD (Interval, size and number)

SEE ATTACHED

ACCEPTED FOR RECORD

DEC 28 1999

BLM 1/13/00

32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
SEE ATTACHED	

33. PRODUCTION

DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping - size and type of pump)				WELL STATUS (Producing or shut-in)	
11-9-99		PUMPING				PRODUCING	
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD. FOR TEST PERIOD	OIL - BBL	GAS - MCF	WATER - BBL	GAS - OIL RATIO
11/22/99	24			230	130	378	565
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL - BBL	GAS - MCF	WATER - BBL	OIL GRAVITY - API (CORR.)	
						36.6	

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)

SOLD

TEST WITNESSED BY

35. LIST OF ATTACHMENTS

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records

SIGNED

Laurie Cherry

TITLE REGULATORY COMPLIANCE

DATE 12/10/99

*(See Instructions and Spaces for Additional Data on Reverse Side)

Title 18 U.S.C. Section 1001, 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
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.

FORM APPROVED
Budget Bureau No. 1004-0135
Expires November 30 2000

5. Lease Serial No.

NM-22080

6. If Indian, Allottee or Tribe Name

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

8. Well Name and No.

BARCLAY FEDERAL 11

9. API Well No.

30-015-30063

10. Field and Pool, or Exploratory Area
LIVINGSTON RIDGE (DEL)

11. County or Parish, State

EDDY NM

SUBMIT IN TRIPLICATE - Other instructions on reverse side

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator

ARCO Permian

3a. Address

P.O. BOX 1610, MIDLAND, TX 79702

3b. Phone No. (include area code)

915-688-5532

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

760' FNL. 660' FEL
SEC 12, T23S, R31E

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

<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other <u>SPUD AND</u>
<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	<u>SET CASING</u>
<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

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 recompleat 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 recompleat 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.)

10/13/99 SPUD 17-1/2" HOLE. DRILL 17-1/2" HOLE FROM 40' TO 425'.

10/14/99 SET 13-3/8" 48# H-40 CASING @858 W/700 SX CLASS C CEMENT.
CIRC. 75 SX CMT TO SURFACE.

10/20/99 SET 8-5/8" 32# J-55 CASING @4440' W/1400 SX CLASS C CEMENT.
CIRC. 167 SX CMT TO SURFACE.

10/28/99 SET 5-1/2" 17# J-55 CASING @8450' W/900 SX CLASS H CEMENT.
DID NOT CIRC. CEMENT.

14. I hereby certify that the foregoing is true and correct
Name (Printed/Typed)

LAURIE CHERRY

Title

REG./COMP. ASST.

Date 12/10/99

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

Title

Date

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

Title 18 U.S.C. Section 1001, 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.

(Instructions on reverse)

**BARCLAY FEDERAL LEASE
EDDY COUNTY, NEW MEXICO**

WORKING INTEREST OWNERS

Atlantic Richfield Company	100%
P. O. Box 1610	
Midland, Texas 79702	