

CMD :
OG6C101

ONGARD
C101-APPLICATION FOR PERMIT TO DRILL

11/26/04 13:59:59
OGOMES -TPEO

OGRID Idn : 163645 API Well No: 30 15 31061 APD Status(A/C/P): A
Opr Name, Addr: JKM ENERGY, LLC Aprvl/Cncl Date : 03-27-2000
26 EAST COMPRESS RD.
ARTESIA,NM 88210

Prop Idn: 25602 SHEARN SHILO FEDERAL

Well No: 1

	U/L	Sec	Township	Range	Lot	Idn	North/South	East/West
Surface Locn :	B	14	17S	27E			FTG 991 P N	FTG 1464 F E
OCD U/L :	B		API County :	15				

Work typ(N/E/D/P/A) : N Well typ(O/G/M/I/S/W/C): O Cable/Rotary (C/R) : R
Lease typ(F/S/P/N/J/U/I): F Ground Level Elevation : 3479

State Lease No: Multiple Comp (S/M/C) : N
Prpsd Depth : 650 Prpsd Frmtn : EMPIRE YATES SEVEN RIVERS

E0009: Enter data to modify record

PF01 HELP	PF02	PF03 EXIT	PF04 GoTo	PF05	PF06 CONFIRM
PF07	PF08	PF09 PRINT	PF10 C102	PF11 HISTORY	PF12

Form 91603
(4-7-1988)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPPLICATE*
(Other instructions on
reverse side)

FORM APPROVED
OMB NO. 1004-0138
Expires: February 28, 1995

APPLICATION FOR PERMIT TO DRILL OR DEEPEN

5. LEASE DESIGNATION AND SERIAL NO
NM-070003

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

1a. TYPE OF WORK

DRILL ☒

DEEPEN ☒

7. UNIT AGREEMENT NAME

25602

8. FARM OR LEASE NAME, WELL NO

Shearn Shilo Fed. #1

9. API WELL NO

30-015-31061

10. FIELD AND POOL OR WILDCAT

Empire Yates / Abco 7 Rivers

11. SEC. T. R. N. OR BLK
AND SURVEY OR AREA

Sec. 14 - T17S - R27E

b. TYPE OF WELL
OR WELL ☒

GAS WELL

OTHER

SINGLE ZONE ☒

MULTIPLE ZONE

2. NAME OF OPERATOR

Gas Well Services

3. ADDRESS AND TELEPHONE NO.

26 East Compress Rd, Artesia, New Mexico 88210

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

At surface

991' FNL and 1464' FEL

At proposed prod. zone

Same

Unit B

14. DISTANCE IN MILES AND DIRECTION FROM NEAREST TOWN OR POST OFFICE

8 Miles east and 2 miles north of Artesia, New Mexico

12. COUNTY OR PARISH

Eddy

13. STATE

NM

15. DISTANCE FROM PROPOSED

LOCATION TO NEAREST

PROPERTY OR LEASE LINE, FT

991'

16. NO. OF ACRES IN LEASE

160

17. NO. OF ACRES ASSIGNED

TO THIS WELL

10

18. DISTANCE FROM PROPOSED LOCATION
TO NEAREST WELL, DRILLING, COMPLETED,
OR APPLIED FOR, ON THIS LEASE, FT

358'

19. PROPOSED DEPTH

650'

20. ROTARY OR CABLE TOOLS

Rotary Rig

21. ELEVATIONS (Show whether OF, RT, OR, etc.)

3479' GL

22. APPROX. DATE WORK WILL START

Upon Approval

23.

PROPOSED CASING AND CEMENTING PROGRAM

SIZE OF HOLE

GRADE, SIZE OF CASING

WEIGHT PER FOOT

SETTING DEPTH

QUANTITY OF CEMENT

43-1/4"

778'

J55 - 5 1/2"

15.5#

650'

WITNESS

100 lbs of Class "C"

Gas Well Services plans to drill this well to a sufficient depth to test the Yates Abo. If productive, 5 1/2" casing will be run and cemented at the total depth. If non-productive, the well will be plug in a manner consistent with BLM requirements. Specific programs are outlined in the following attachments:

Exhibit #1

Location and Elevation plate

Exhibit #2

Well plan

Exhibit #3

Map of existing roads and planned access road

Exhibit #4

Immediate radius Map

APPROVAL SUBJECT TO
GENERAL REQUIREMENTS AND
SPECIAL STIPULATIONS

N SL-4428

IN ABOVE SPACE DESCRIBE PROGRAM: If proposal is to deepen, give data on present productive zone and proposed new productive zone. If proposal is to drill or deepen directionally, give pertinent data on subsurface locations and measured and true vertical depths. Give blowout prevention program, if any.

24.

SIGNED

Keretta Matthews

TITLE Owner/Operator

DATE 09/10/99

(This space for Federal or State office use)

PERMIT NO

APPROVAL DATE

Application approval does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would enable the applicant to conduct operations thereon
CONDITIONS OF APPROVAL, IF ANY

KALANIS D. BRAY

Assistant Field Manager,
Lands And Minerals

APPROVED BY

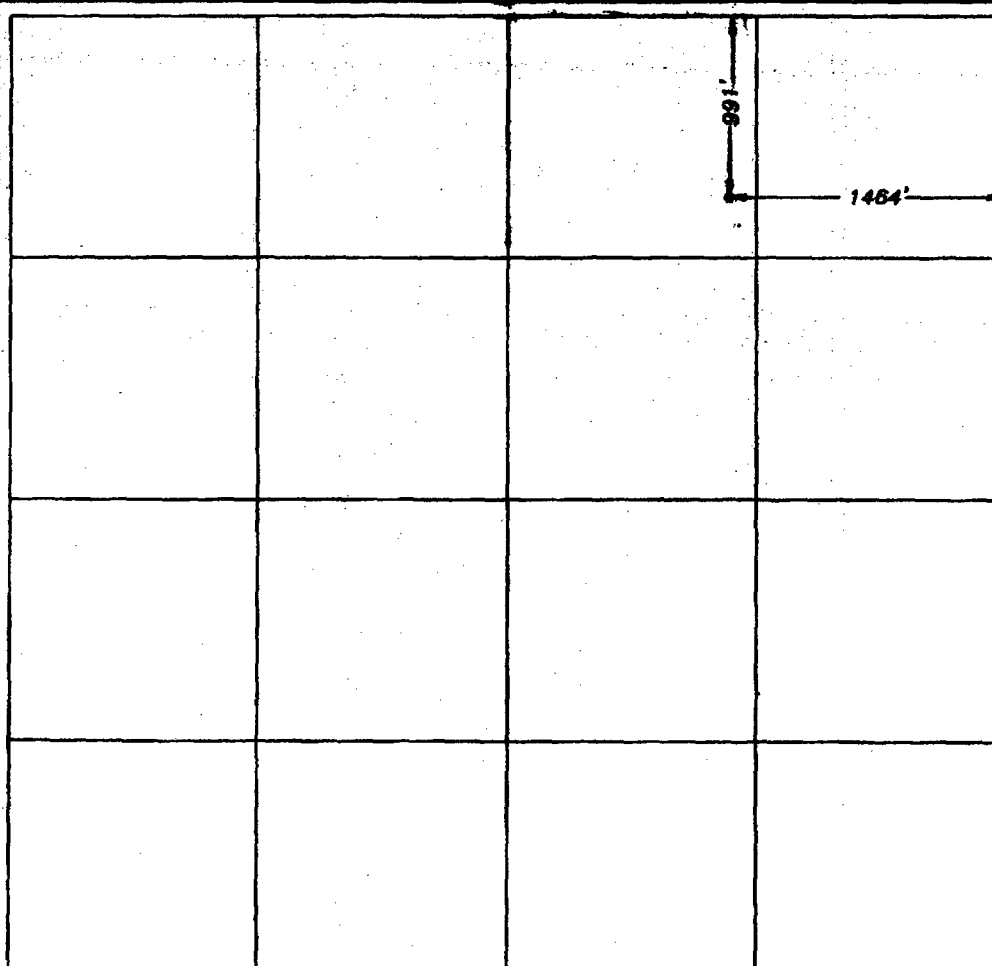
TITLE

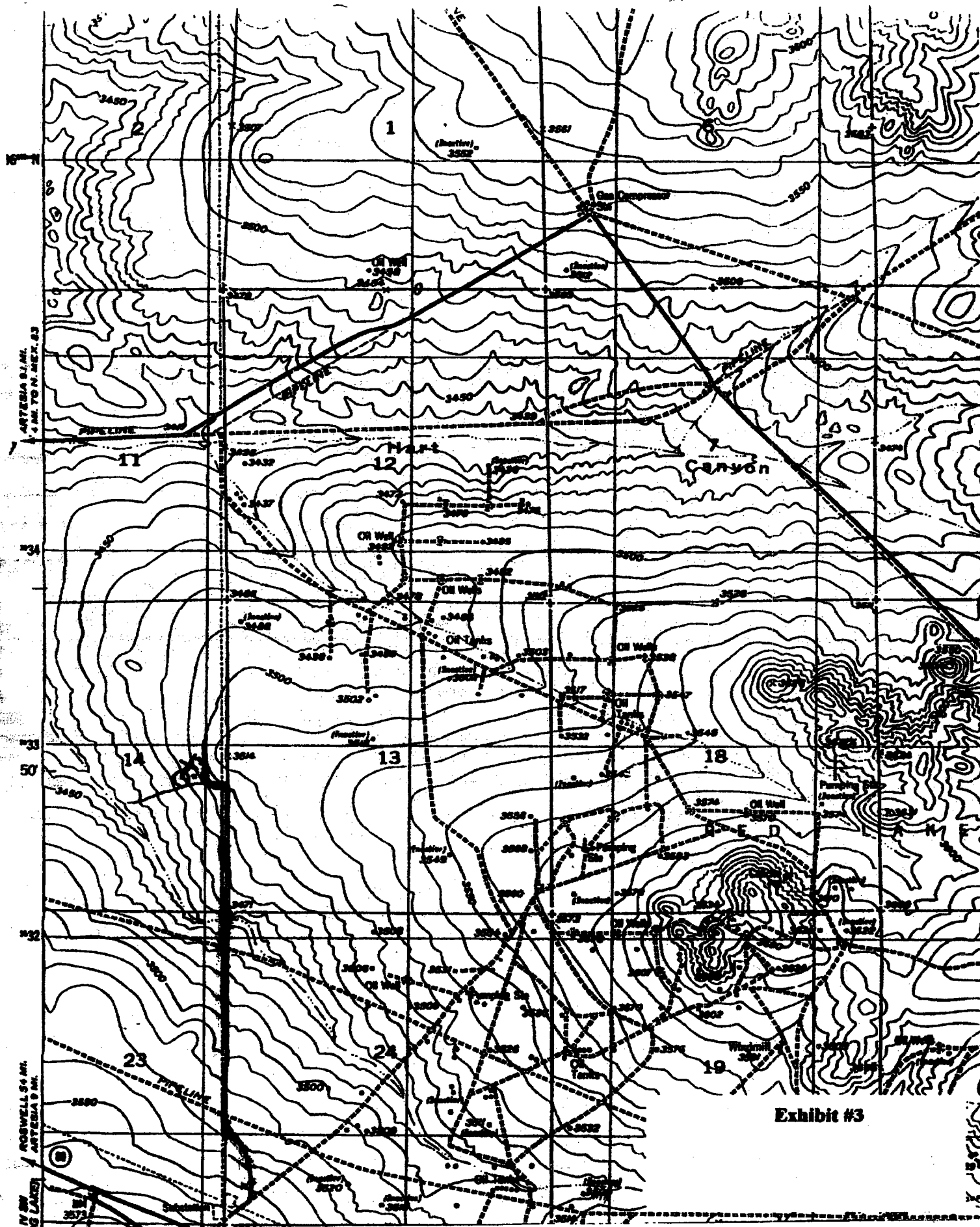
DATE

*See instructions on Reverse Side

APPROVED FOR 1 YEAR

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

	OPERATOR CERTIFICATION <i>I hereby certify the the information contained herein is true and complete to the best of my knowledge and belief.</i> <u>Keretta Matthews</u> Signature <u>Keretta Matthews</u> Printed Name <u>owner/operator</u> Title <u>9/10/99</u> Date SURVEYOR CERTIFICATION <i>I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief.</i> 08/20/1999 Date Surveyed Signature <u>HELM & JONES</u> Professional Surveyor  Certificate No. <u>3640</u> Survey No. <u>3640</u>
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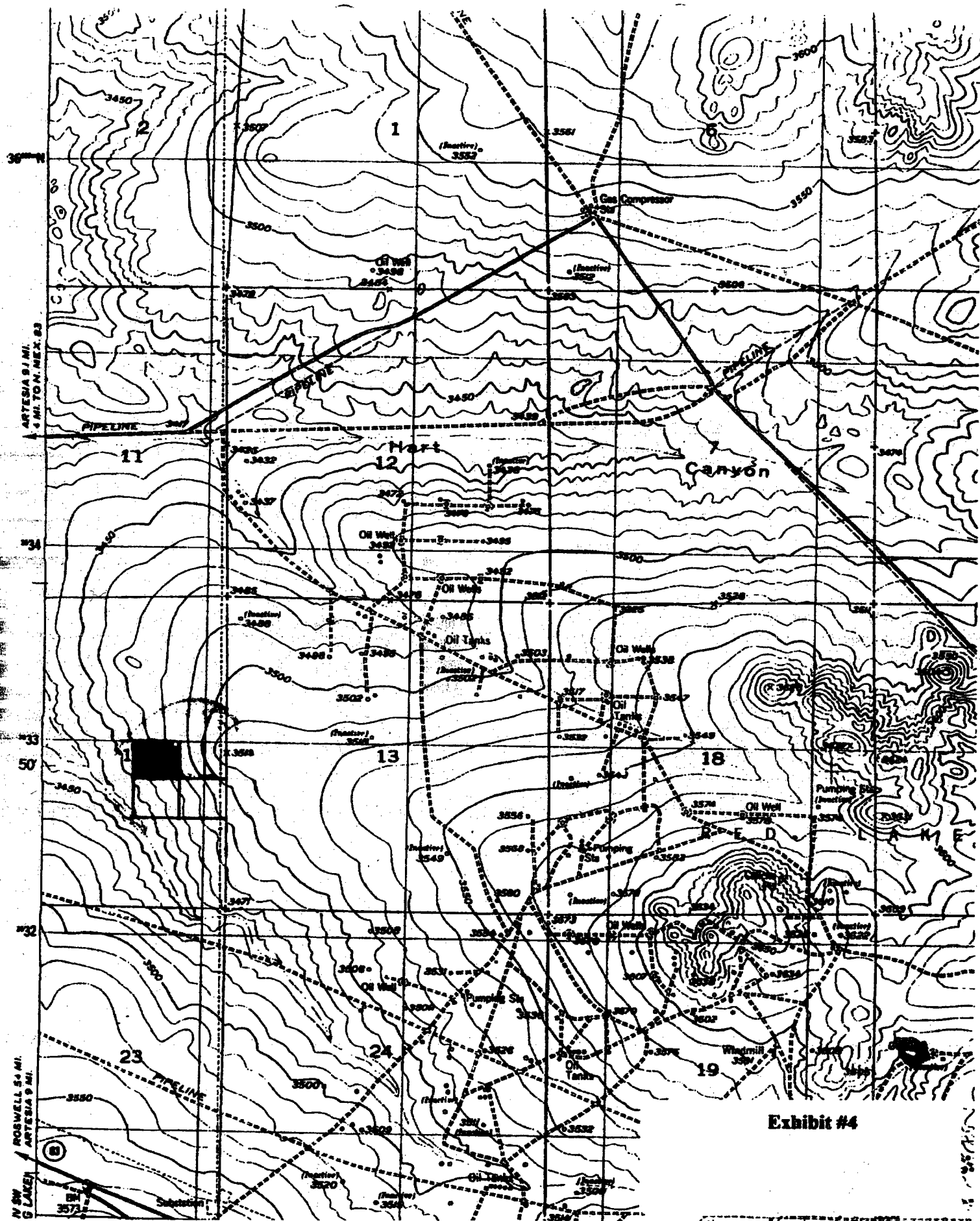


Exhibit #4

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB No. 1004-0135
Expires July 31, 1996

SUNDRY NOTICES AND REPORTS ON WELLS

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

SUBMIT IN TRIPLICATE - Other instructions on reverse side

1. Type of Well
☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator
Gas Well Services, Inc.

3a. Address
26 E. Compress Rd. Artesia, NM

3b. Phone No. (include area code)
(505) 748-2854

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

991' FNL and 1464' FEL
Sec 14-T17s-R27E

5. Lease Serial No.

NM-070603

6. If Indian, Allottee or Tribe Name

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

8. Well Name and No.

Shearn Shilo Fed. #1

9. API Well No.

20-115-31061

10. Field and Pool, or Exploratory Area

Yates/Abo

11. County or Parish, State

Eddy

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

TYPE OF SUBMISSION	TYPE OF ACTION			
☒ Notice of Intent	☐ Acidize	☐ Deepen	☐ Production (Start/Resume)	☐ Water Shut-Off
☐ Subsequent Report	☐ Alter Casing	☐ Fracture Treat	☐ Reclamation	☐ Well Integrity
☐ Final Abandonment Notice	☐ Casing Repair	☒ New Construction	☐ Recomplete	☐ Other
	☐ Change Plans	☐ Plug and Abandon	☐ Temporary Abandon	
	☐ Convert to Injection	☐ Plug Back	☐ Water Disposal	

13. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration there. If the proposal is to deepen directionally or recompleat horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zone. 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 ds following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 shall be filed or testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator determined that the site is ready for final inspection.)

We propose to blade the road and location as it will not disturb the terrain as much as caliche, but in the event that we do make a producing well, we will caliche the road and location

We would like to waive the stipulation for plastic lined pits. the cuttings from the air rig will rupture the plastic, and the pits will not contain any contaminants with the air rig, as per conversation with Jim Amos.

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

Jack Matthews

Signature

Jack Matthews

Title

President

Date

3-28-2000

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

(10112.000) JCF C. LARA

Title

Deputy Director

Date

3/30/2000

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 enable the applicant to conduct operations thereon.

Office

CFO

RECEIVED
2000 MAR 29 14:28
BUREAU OF LAND MGMT.
ALBUQUERQUE RESOURCE AREA

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

N.M. Oil Cons - Division
811 S. 1st Street
Artesia, NM 88210-2834

FORM APPROVED
OMB No. 1004-0135
Expires July 31, 1996

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

SUBMIT IN TRIPLICATE - Other instructions on reverse side

1. Type of Well
☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator
JKM Energy, LLC

3a. Address
26 E. Compress Rd. Artesia, NM 88210

3b. Phone No. (include area code)
(505) 748-2854

4. Location of Well (Feebase, Sec., T., R., M., or Survey Description)
S14-T17S-R27E

5. Lease Serial No.

NM 070603

6. If Indian, Allotment or Tribe Name

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

8. Well Name and No.

Shearn Shilo Fed. #1

9. API Well No.

10. Field and Pool, or Exploratory Area

Empire Yates 7 Rivers

11. County or Parish, State

Eddy, NM

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

TYPE OF SUBMISSION	TYPE OF ACTION			
☒ Notice of Intent	☐ Acidize	☐ Deepen	☐ Production (Start/Resume)	☐ Water Shut-Off
☐ Subsequent Report	☐ Alter Casing	☐ Fracture Treat	☐ Reclamation	☐ Well Integrity
☐ Final Abandonment Notice	☐ Casing Repair	☐ New Construction	☐ Recomplete	☒ Other <u>change of</u>
	☐ Change Plans	☐ Plug and Abandon	☐ Temporarily Abandon	<u>business name</u>
	☐ Convert to Injection	☐ Plug Back	☐ Water Disposal	

13. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration there. If the proposal is to deepen directionally or recomplete horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and so. 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 d following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 shall be filed or testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator determined that the site is ready for final inspection.)

We wish to change the business name of this well from Gas Well Services, Inc. to JKM Energy, LLC. Everything else will remain the same. We have a Statewide bond.



APPROVED

JUL 11 2000

AUTHORIZED OFFICER, MINERAL
BUREAU OF LAND MANAGEMENT

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

Jack Matthews

Title

President

Date

04-19-2000

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 enable the applicant to conduct operations thereon.

Office

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-10
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 JKM Energy, LLC 26 E. Compress Rd. Artesia, NM 88210		OGRID Number 163645
		Reason for Filing Code CH 04 effective 5-15-2000
API Number 30-0 15-31061	Pool Name Empire Yates 7 rivers	Pool Code
Property Code 25602	Property Name Shearn Shilo Federal	Well Number #1

II. Surface Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South Line	Feet from the	East/West line	County
B	14	17S	27E		991	FNL	1464	FEL	EDDY

" Bottom Hole Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
Lee Code	Producing Method Code	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

IV. Produced Water

POD	POD ULSTR Location and Description

V. Well Completion Data

Spud Date	Ready Date	TD	FBD	Perforations	DIHC, DC, MC
Hole Size	Casing & Tubing Size	Depth Set	Sacks Cement		

VI. Well Test Data

Date New Oil	Gas Delivery Date	Test Date	Test Length	Thg. 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: <u>Kenetta Matthews</u> Printed name: <u>Kenetta Matthews</u> Title: <u>Member</u> Date: <u>07-13-2000</u> Phone: <u>505 748-2854</u>		OIL CONSERVATION DIVISION Approved by: <u>ORIGINAL SIGNED BY TIM W. GUM</u> Title: <u>DISTRICT II SUPERVISOR</u> Approval Date: <u>AUG - 2 2000</u>	
If this is a change of operator fill in the OGRID number and name of the previous operator <u>Kenetta Matthews</u> <u>163645</u> Previous Operator Signature Printed Name		<u>7-20-00</u> Title Date	