24.

#### SUBMIT IN TRIPLICATE\*

(Other instructions on reverse side)

Form approved. Budget Bureau No. 42-R1425.

UNITED STATES DEPARTMENT OF THE INTERIOR

45	DEFAILIMENT	OI THE INT			5. LEASE DESIGNATION	AND SERIAL NO.
	GEOLOG	GICAL SURVEY			Jicarilla Co	nt. 110
APPLICATION  a. TYPE OF WORK  DRILL		O DRILL, DEI		JG BACK	6. IF INDIAN, ALLOTTE  JICATILLA D.  7. UNIT AGRSEMENT N	dce, N.M.
D. TYPE OF WELL	L X OTHER			MULTIPLE	8. FARM OR LEASE NA	ME
WELL WELL WELL WELL NAME OF OPERATOR	L QL OTHER				Jicurille A	
Tenneco Oil Con	mpany				9. WELL NO.	
3. ADDRESS OF OPERATOR					4	
P. O. Box 1711;	Durango, Col	orado			10. FIELD AND POOL,	OR WILDCAT
4. LOCATION OF WELL (Rep. At surface	ort location clearly and	in accordance with a	ny State requirements	i. <b>*</b> }	Basin D kota	
1850 FSL, 1850	FWL				11. SEC., T., R., M., OR AND SURVEY OR A	BLK. Rea
At proposed prod. zone					Sec. 19, T2	ón, RSV
14. DISTANCE IN MILES AN	D DIRECTION FROM NEAR	REST TOWN OR POST OF	FFICE*		12. COUNTY OR PARISE	1 13. STATE
		<b>~</b> -			Rio Arriba	New Mexic
15. DISTANCE FROM PROPOSI LOCATION TO NEAREST PROPERTY OR LEASE LIN (Also to nearest drlg.	IE, FT.	16	S. NO. OF ACRES IN LE S2O		O. OF ACRES ASSIGNED THIS WELL	
18. DISTANCE FROM PROPOS TO NEAREST WELL, DRI OB APPLIED FOR, ON THIS	LLING, COMPLETED,	18	7700	20. R	Rotar	
21. ELEVATIONS (Show wheth			1133	<del></del>	22. APPROX. DATE W	ODE WILL COLUMN
ZI, BLEVATIONS (DISON WALCO		6633 <b>G</b> R			Septe ber 1	
23.	I	PROPOSED CASING	AND CEMENTING I	PROGRAM		•
SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEP	тн	QUANTITY OF CEMI	NT
12-1/4"	8-5/8"	24#	4501	225	ax.	
7-7/8"to 7100"	4-1/2"	10.5#	<u> </u>		Stage - 235 ex	
6-3/4"to 7700"	4-1/2"	11.6	6700 -	7700' 2nd		
		ı	1	, с	irculate to sur	face.

We propose to rig up, drill to approximately 7700°. Set easing with stage collar set approximately 300° below bottom of Mesaverde. WOC. Log, perforate and frac Dakota formation and complete as a single Dakota producer. Run 2-3/8" tubing and test.



U. S. GEOLOGICAL SURVEY FARMINGTON, N. M.

IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM: If proposal is to deepen or plug back, 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 preventer program, if any.

Original Signed By  BIGNED HAROLD C. NICHOLS  H. C. NICHOLS	TITLE Senior Production Clerk	9-2-65
(This space for Federal or State office use)		
PERMIT NO.	APPROVAL DATE	
APPROVED BYCONDITIONS OF APPROVAL, IF ANY :	TITLE	DATE



TENNECO OIL COMPANY

3-25-68

## WELLS REQUIRING FILE CORRECTIONS ONLY

	•			,	
	LEASE NAME & WELL NUMBER	LOCATION	POOL	PRESENT ACREAGE	CORRECT ACREAGE
	Jicarilla A #1	L-18-26N-5W	Basin Dakota	W 320	w 319.20
<u></u>	Jicarilla A #4	K-19-26N-5W	Basin Dakota	W 320	W 319.16
•	Foster #2	D-18-26N-7W	Basin Dakota	W 320	W 319.52
	Moore B #1	G-3-26N-11W	Basin Dakota	E 320	E 319.63
	Dawson A #1	N-4-27N-8W	Blanco MV	W 320	W 321.33
	Dawson A #1	N-4-27N-8W	Basin Dakota	W 320	W 321.33
	Schwerdtfeger A #3	D-6-27N-8W	Basin Dakota	W 320	W 320.68
	Schwerdtfeger A #5	0-6-27N-8W	Basin Dakota	E 320	E 320.84
į	Florance #65	E-18-27N-8W	Basin Dakota	W 320	W 321.70
	Lodewick #4	F-18-27N-9W	Basin Dakota	N 320	N 321.32 V
	Lodewick #3	M-18-27N-9W	Basin Dakota	S 320	s 321.08
	Bolack A #1	B-2-27N-11W	Basin Dakota	N 320	N 322.68
	Schwerdtfeger A #2 X	D-31-28N-8W	Basin Dakota	W 291	W 291.16
	Storey C #2	M-35-28N-9W	Basin Dakota	W 320	W 323.65
	Schwerdtfeger A #1	C-36-28N-9W	Basin Dakota	W 320	w 318.85
	Florance #30	M-1-29N-8W	Blanco MV	W 323.09	W 323.15 i
	Florance #30	M-1-29N-8W	Basin Dakota	W 320	W 323.154
	Florance #41	A-21-29N-9W	Blanco MV	E 312.90	E 312.80
	Florance #96	H-24-29N-9W	Blanco PC	148.50	148.54
	Dudley Cornell A #1	0-1-29N-12W	Basin Dakota	E 320	E 319.60
	Central Cha Cha Unit #6	N-30-29N-13W	Cha Cha Gal.	85 (S/2 SW/4 &	86.09
	Pritchard #1	M-1-30N-9W	Basin Dakota	SW/4 SE/4) W 320	W 323
	Florance #47 X	G-5-30N-9W	Slanco PC	160	161.80
	Florance #47 X	G-5-30N-9W	Blanco MV	E 320	E 321.80
	Blanco Com 1 #1	G-2-30N-11W	Blanco MV	E 320	E 320.30
	Blanco Com 2 #1	K-2-30N-11W	Blanco MV	W 320	W 320.10
	Coldiron Com A #1	K-2-30N-11W	Basin Dakota	W 320	W 320.10 :-

# HMITED STATES

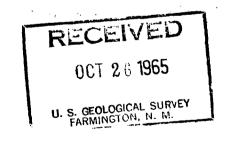
Form approved

	DEPARTMENT OF THE GEOLOGICAL SI		verse side)	<u> </u>	rilla Con	tract 110
	SUNDRY NOTICES AND RE		WELLS			OR TRIBE NAME
	(Do not use this form for proposals to drill or to deel Use "APPLICATION FOR PERMIT-	pen or plug back	to a different reservoir.	Jic	arilla Du	lce, N.M.
	OIL, GAS COTHER			7. UNIT	AGREEMENT NAS	48
2. 1	NAME OF OPERATOR			8. FARM	OR LEASE NAME	E
	Tenneco Oil Company			Jic	arilla "A	7,,
3.	ADDRESS OF OPERATOR			9. WELL	NO.	
	P. O. Box 1714 - Durango, Color	ado			#14	
	LOCATION OF WELL (Report location clearly and in accordance also space 17 below.)  At surface		e requirements.*		in Dakota	
	1850' FSL, 1850' FWL			11. BEC.	, T., R., M., OR BI JEVEY OR ARBA	
						-N, R-5-W
14.	PERMIT NO. 15. ELEVATIONS (She	ow whether DF, RT,	GR, etc.)	12. COU	NTT OR PARISH	18. STATE
	66	533' GR		Rio A	rriba	New Mexico
16.	Check Appropriate Box To	Indicate Natu	re of Notice, Report, o	Other Da	ta	
	NOTICE OF INTENTION TO:	ı	SUBS	EQUENT BEPO	RT OF:	
	TEST WATER SHUT-OFF PULL OR ALTER CASING		WATER SHUT-OFF	X	REPAIRING W	BLL
	FRACTURE TREAT MULTIPLE COMPLETE		FRACTURE TREATMENT		ALTERING CA	SING
	ANAMANA ANAMANA	1 1 1	ATTOCATIVE OR ACIDITATIVE		ADAMONIAN.	

(Nors: Report results of multiple completion on Well Completion or Recompletion Report and Log form.) 17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and sones pertinent to this work.) \*

Rig up, spud 9-22-65, drill to 467: Ran 14 joints 8-5/8" 24# J-55 casing set at 434' with 250 sacks cement. Wait on cement. Drill cement and drill to TD 7585' on 10-15-65. Logged. Ran 237 joints 4-1/2" 11.6# and 10.5# J-55 casing set at 7584' with 300 sacks cement on first stage. Second stage with 310 sacks, good circulation. Wait on cement. Cemented third stage with 570 sacks cement. Wait on cement. Released rig 10-15-65. Waiting on completion rig.





3. I hereby certify that the foregoing is true and confect	
SIGNED Statistic Completion Senior Production Clerk	DATE October 22, 1965
(This space for Federal or State office use)	
APPROVED BY TITLE CONDITIONS OF APPROVAL IF ANY:	DATE

#### TABULATION OF DEVIATION TESTS

#### TENNECO OIL COMPANY

JICARILIA "A" 4

DEPTH	INCLINATION
DEPTH  250' 467' 1000' 1450' 2000' 2737' 4493' 5373' 5594'	INCLINATION  10 1-1/-0 10 3/40 1/20 3/40 - 0 - 1/20 3/40
5905†	1/2 1/2
	1/2°
7241' 7 <u>4</u> 33'	1/20

#### AFFIDAVIT

THIS IS TO CERTIFY that to the best of my knowledge the above tabulation details. the deviation test taken on TENNECO OIL COMPANY'S JICARILLA "A" 4, Easin Dakota Field, located in Section 19, T-26-N, R-5-W, Rio Arriba County, New Mexico.

THE STATE OF COLORADO)

COUNTY OF LA PLATA

BEFORE ME, the undersigned authority, on this day personally appeared Harold C. Nichols known to me to be Senior Production Clerk for Tenneco Oil Company , and to be the person whose name is subscribed to the above statement, who, being by me duly sworn on oath, states that he has knowledge of the facts stated herein and that said statement is true and correct.

SUBSCRIBED AND SWORN TO before me, a Notary Public in and for said County and State this 15th day of December, 1965.

Marix.

My commission expires June 28, 1969.

#### Distribution:

1 Copy - New Mexico Oil Conservation Commission

1 Copy - Continental 1 Copy - Atlantic 1 Copy - File



Form 9-331 (May 1963)

# UNITED STATES SUBMIT IN TRIPLICATED Budget Bureau No. 42-R1424 DEPARTMENT OF THE INTERIOR verse side) Form approved. Budget Bureau No. 42-R1424 5. LEASE DESIGNATION AND EXERTAL NO.

GEOLOGICAL SURVEY

Jicarilla Cont. 119

CUVIDDY	NOTICES AND REPORTS C	MATTER	G. IF INDIAN, ALLOTTEE OR TRIBE NAME
(Do not use this form for	proposals to drill or to deepen or plug ba	ck to a different reservoir.	
Use "AI	proposals to drill or to deepen or plug be PPLICATION FOR PERMIT—" for such pro-	oposals.)	Jicarilla Dulce, New Mexic
			T. UNIT AGREEMENT NAME
WELL GAS X OT	ILER		· · · · · · · · · · · · · · · · · · ·
NAME OF OPERATOR			D. FALM OR LEASE NAME
Tenneco Oil Co	vasem		Jicarilla "A"
ADDRESS OF OPERATOR			9. WELL NO.
P. O. Box 1714	- Durango, Colorado		4
LOCATION OF WELL (Report loc. Sec also space 17 below.)	ation clearly and in accordance with any	State requirements.	10. FIELD AND POOL, OR WILDCAT
At surface	. 0		Basin Dakota
1850' FSL,	1850' FWL		11. SEC., T., R., M., OR BLE. AND SURVEY OR AREA
			Sec 19, T-26-N, R-5-W
PERMIT NO.	15. ELEVATIONS (Show whether DF,	RT, GR, etc.)	12. COUNTY OR PARISH 13. STATE
	6633' GR		Rio Arriba New Mexico
Che	ck Appropriate Box To Indicate N	ature of Natice, Report, or	Other Data
	INTENTION TO:		EQUENT REPORT OF:
·1	·	-	
TEST WATER SHUT-OFF	PULL OR ALTER CASING	WATER SHUT-OFF	REPAIRING WELL
FRACTURE TREAT	MULTIPLE COMPLETE	FHACTURE TREATMENT	X ALTELING CASING
SHOOT OR ACIDIZE	ABANDON*	SECOTING OR ACIDIZING	X ABANDONMENT*
REPAIR WELL	CHANGE PLANS	(Other) (Note: Report result	its of multiple completion on Well appletion Report and Log form.)
on bottom. Per Frac with 90,00 with 40,000 por	on rig 11-20-65. Cleaned 7490-7396. Re-perf 74:00 pounds sand and 112,00 and sand and 58,000 gall	83-7397. Acidized of gallons water. Poons water. Cleaned	erf 7255-7274. Frac out to 7526' PBTD.
•	ing set at 7490'. Job co	mbrere 11-53-62. A	ill corduct deliver-
ability test.		č	
			· 취임 영향의 사람이 가는 경험을 받는 것이다.
Property of the second			
,			
		COUNTY OF	2
		/ot: FIVED \	- 독취용공략 (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)
	/	Vrnriarn /	
	1	DEC 21 1065	
		DEC 21 1965	
•	1	OIL CON. COM.	
	`	DIST. 3	
. I hereby certify that the fore	reging is true and correct		
• • •		enior Production Cle	200
Farold C.	Nic ols TITLE 5	entor Production CIO	erk December 17, 1965
(This space for Federal or S	tate office use)		3
APPROVED BY	ment to		77.4 007
CONDITIONS OF APPROVA	L IF ANY:		DATE

NO. OF COMIES RECEIVED	· ·		
CISTRIBUTION	NEW MEXICO OIL CO	ONSERVATION COMMISSION	Form C=194
SANTA FE		FOR ALLOWABLE	Supersedes Old C-1112 and C-110
FILE	<del></del>	AND	Effective 1-1-65
LAND OFFICE		ATION PURCHASED ALL THE ASSE	ોર્લ
Oil	TILL -16 AP	TOLICKING, INC. AND INDING	RUDES - IDIOCC
: RANSPORTER - GAS :		ACCINICIPITING N. S. C. C.	1 - COMB -
CPERATOR	DERMIT # 670 W	HICH HAS BEEN TRANSPERRED I	O 1 - File
HORATION OFFICE	INLAND CORPOR	CLYDE C. Lamar, PRESI	/. ULUITULE
Tenneco Oil Com	oany	INLAND CORPORATION	·
N. gen	_		
	Durango, Colorado 81301		
Reasons) for thing Creek proper bo	Change in Transporter of:	Other (Please explain)	
New Well. A	Cali Dry Go	s Effective Firs	st Delivery
1 Change in Ownership	Casinghead Gas Conden	sate	
If change of ownership give name			
and address of previous owner			
DESCRIPTION OF ETH AND	IEAST		
L. DESCRIPTION OF WELL AND	Lease No.   Well No. Fur. Nuc	me, Including Fernation	Papa of Lease
Jicarilla	"A" 4 Ba	sin Dakota	State, Federal or Fre Tedery 3
Lee sixes.			
Can Letter K : 18	50 Feet From The South: in	e and <u>1850</u> Feet From	The West
Line Common 30 To	ownship 26-N Rande	5-W , nmpm,	Rio Arriba Cassy
		7-11-11-11-11-11-11-11-11-11-11-11-11-11	Add to the same to the Management of the same of the s
	RTER OF OIL AND NATURAL GA		
Name of Authorized Transporter of O	ii or Condensate	Address (Give address to which appro	
Name of Authorized Transporter of C	asinghead Gas or Dry Gas XX	P. O. Box 1528, Farma	ington, New Mexico
El Paso Natural G		P. O. Box 990, Farmin	
if well prouves all or liquids,	Unit Sec. Twp. P.ge.		den
give location of tanks.	; K ; 19 ; 26; 5	No	On Approval
	with that from any other lease or pool,	give commingling order number:	
/. COMPLETION DATA	Oi Well Gas Well	New Weil Workover Deepen	Plug Back Same Res'v. Diff. Res'v.
Designate Type of Complet		X	
Date Spudaed	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
9/22/65	11/23/65	7585	7526
Elevations (DF, KKB, RT, GR, etc.)		Top Oli/Gas Pay	Tubing Depth
6633 GR	Basin Dakota	7255	7490 Depth Casing Shoe
7255_71.90			7585
	TUEING, CASING, AN	D CEMENTING RECORD	100
- TLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
371	<u> </u>	434	250 sx
S=3/4	1/2	7584	lst stage 300 sx   2nd stage 310 sx
	2-3/8 tbg.	7490	3rd stage 570 ax
. TEST DATA AND REQUEST			l and must be equal to or exceed top allow
Olf. WELL. Date First New Cil Run To Tanks	able for this de	epth or be for full 24 hours)  Producing Method (Flow, pump, gas l	16 1
Date First New Cit Han 10 Tunes	Sale of Jest	Producting Method (Prode, pamp, gas :	oft, etc.)
Length of Test	Tubing Pressure	Cosing Presewe	Choke Size
		1	/KLULI: Lim
Actual Prod. During Test	Oil-Bale.	Water-Bble.	Gas-MCE 1956
1		<u> </u>	Work 52 1200
GAS WELL			OIL COM COM
Actual Prog. Test-MCF/D	Length of Test	Bb.s. Condensate/MMCF	Grevity of Concenscipients
9937	3 Hours		
Testing Method (pitot, back pr.)	Tubing Pressure	Cosing Pressure	Cheke Size
Back Pr.	<u>  611</u>	1243	3/½
. CERTIFICATE OF COMPLIA	ACE	1	ATION COMMISSION
I hereby certify that the rules and	d regulations of the Oil Conservation	APPROVED MAR 4 8 500	
Commission have been complied	with and that the information given he best of my knowledge and belief.	By Original Signed	Emery C. Arnold
and the same to complete to t	or my anomicode and petiet.		
/		TITLE Supervisor Dist. #	6
dla 100 8	7.00	(	compliance with RULE 1104.
maroid C. Hichols (Si	factor la	If this is a request for allowell, this form must be accommo	wable for a newly drilled or decremed anied by a tabulation of the decremen
		tests taken on the well in acco	ordance with RULE 111.
	inie)	All sections of the form my able on new and recompleted w	ust be filled out completely for allow- ells.
March 21, 1966		Fill out only Samens I. I	II. III. and VI for changes of awner,
(	Date)	The state of the s	ten or other such change of conditions
		completed wells.	st be filed for each pool in multiply

NO. OF COPIES RECEIVED			4
DISTRIBUTIO	NC	1	L
SANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL	1	<u> </u>
THAILST CHTEN	GAS	į .	
OPERATOR.			1
SUCCESTION OF		1	1

#### NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE AND

Supersedes Old C-104 and C-110 Effective 1-1-65 AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS Cperator Tenneco Oil Company Address P. O. Box 1714, Durango, Colorado Reason(s) for filing (Check proper box) Other (Please explain) Change in Transporter of: Effective December 1, 1966 Recompletion Oil Dry Gas Condensate X Change in Ownership Casinghead Gas If change of ownership give name and address of previous owner \_\_\_\_ II. DESCRIPTION OF WELL AND LEASE Well No. Pool Name, Including Formation ease No. Ŀ State, Federal or Fee Basin Dakota Jicarilla Federal 1850 Feet From The South Line and 1850 Unit Letter 5 W Township , NMPM, Rio Arriba I. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Address (Give address to which approved copy of this form is to be sent) Rock Island Oil and Refining P. O. Box 328, Farmington, New Mexico Name of Authorized Transporter of Casinghead Gas ot Dry Gas Address (Give address to which approved copy of this form is to be sent) Is gas actually connected? P.ge. If well produces oil or liquids, give location of tanks. ĸ 19 26N 5W If this production is commingled with that from any other lease or pool, give commingling order numbers 7. COMPLETION DATA Oil Well New Well Plug Back | Same Res'v. Diff. Res'v. Designate Type of Completion - (X) Date Spudded Total Depth P.B.T.D. Elevations (DF, RKB, RT, GR, etc., Name of Producing Formation Top Oil/Gas Pay Tubing Depth Perforations Depth Cusing Shoe . TUBING, CASING, AND CEMENTING RECORD HOLE SIZE CASING & TUBING SIZE SACKS CEMENT TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top allow able for this depth or be for full 24 hours) OIL WELL Date First New Oil Hun To Tanks Date of Test Producing Method (Flow, pump, gas lift, etc., Length of Test Tubing Pressure Casing Pressure Actual Fred. During Test Oil - Bhis. Water - Bbls. GAS WELL Actual Prod. Test-MCF/D Length of Test Bbls. Condensate/MMCF Gravity of Condensate Testing Method (pitot, back pr.) Tubing Pressure Casing Pressure Choke Size . CERTIFICATE OF COMPLIANCE OIL CONSERVATION COMMISSION NOV 29 1966 APPROVED\_ I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief. Original Signed by Emery C. Arnold SUPERVISOR DIST. #3 TITLE . Through C This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deep Harold C. Nichols (Signature) well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111. Senior Production Clerk All sections of this form must be filled out completely for allowable on new and recompleted wells. 11/28/66 Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter or other such change of condition. (Date)

Separate Forms C-104 must be filed for each pool in multiply completed wells.

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ľ	this transport	,,,			
I	SANTATE		7		
İ	TILE		7	1	
ĺ	U.S.G.S.		7		
I	LAND OFFICE				
Į	TRARSPORTER	OIL.	11		
I		GAS	١		
	OPERATOR		L.		
١	PRORATION OF	ICE:			
1	Operator				
Ì		Tenne	co	011	Co
1	Address				
	Suite				
	Reoson(s) for filing	(Check	prope	box)	
	New Vell	Ц			
	Recognitetion	1 !			

5ANTA I E	/ REQUEST FO	SERVATION COMMISSION OR ALLOWABLE AND SPORT OIL AND NATURAL GA	Phim C-104 Supersedes Old C-104 and C-116 Effective 1-1-65
THANSPORTER OIL I	NOTHORIZATION TO TRANS.	OR OIL ARD HATORAL GA.	•
Operator  Operator		<del></del>	
Tenneco Oil		. 19.	
Suite 1200 Lincoln Reosen(s) for filing (Check proper bos) New Voll Recompletion	Change in Transporter of: Oil Dry Gas	Other (Please explain) Change of authori condensate only.	zed transporter of
Change in Ownership	Casingheal Gas Condense	Effective 3/13/	70
If change of ownership give name and address of previous owner		······································	•
DESCRIPTION OF WELL AND I	FASE.  Well No. Pool Name, Including For A B.25in 4	mation Kind of Lease State, Federal of	Lease No.
Unit Letter K : 18.	Feet From The Line	and 1850 Feet From Th	ie <u>w</u>
Line of Section / 7 Tov	mship 26 N Range	5W. NMPM, Rio	Arriba county
DESIGNATION OF TRANSPORT	FER OF OIL AND NATURAL GAS	Address (Give address to which approve	d copy of this form is to be sent)
Plateau, Inc.		P. O. Box 108 Farmi Address (Give address to which approve	not on Now Maxico de copy of this form is to be sent)
If well produces all or liquids, give location of tanks.	Unit Sec. Twp. P.qe.	Is gas cotually connected? When	
If this production is commingled wi. COMPLETION DATA	th that from any other lease or pool, g	give commingling order number:	
Designate Type of Completion	on - (X) Oil Well Gos Well	New Well Workover Deepen	Plug Back Same Resty, Diff. Flesty.
Date Spudded	Date Compl. Ready to Frod.	Total Depth •	P.B.T.D.
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top O!I/Gas Pay	Tubing Copts
Perforetions			Depth Casing Shee
100 5 015	TUBING, CASING, AND		CACUS COUTING
HOLE SIZE	CASING & TUBING SIZE	. DEPTH 321	SACKS CLIMENT
TEST DATA AND REQUEST 1	OR ALLOWABLE (Test must be of	fer recovery of total volume of load oil a	ind must be equal to or exceed top allow-
OII. WELL Date First New Oil Run To Tanks	Date of Test	psh or be for full 24 hours) Producing Method (Flow, pump, gas lif	i, eic.)
Length of Test	Tubing Pressure	Cesing Pressure	Choic Size
Actual Pred, During Test	Oil-Bels.	Weter-5:220.	Gra-MOF
	<u> </u>	Ĺ	<u>l.                                    </u>
GAS WELL	Length of Test	Bbls. Condensate/AGACF	Gravity of Condensate
Testing Method (pitot, back pr.)			•
Training particles (proof per bar)	Tubing Pressure (Chut-in)	Costing Pressure (Shub-in)	Choke Stae
I. CERTIFICATE OF COMPLIA	NCE		TION COMMISSION  MAR 2 0 1970
Commission have been complied	I regulations of the Oil Conservation with and that the Information given he best of my knowledge and belief.	APPROVED. Original Signed by I	
The state and complete to t			UPERVISOR DIA 3
Sr. Production	G. A. Ford, .	This form is to be filted in a  If this is a exquest for ellow well, this form must be excepted tests taken on the well in green	compliance with SUCE 1178,  while for a newly drilled or described nied by a tabulation of the describe dence with nuce 111,  at he filled out completely for all or

SO. OF COPIES RECE	1440	u	-
DISTRIBUTIO	)N		
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FILE			V
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
THE STATE OF THE S	GAS		
OPERATOR		$\Box I$	
PRORATION OF	ICE		
Operator			

SANTA FE	J NEW MEXICO OIL C		
	1	ONSERVATION COMMISSION FOR ALLOWABLE	Form C-104 Supersedes Old C-104 and C-11
FILE	1	AND	Effective 1-1-65
U.S.G.S.	AUTHORIZATION TO TRA	NSPORT OIL AND NATURAL GA	.s
LAND OFFICE		The second secon	
TRANSPORTER OIL	_		
GAS /	4		
OPERATOR 1	4		
PRORATION OFFICE			
Tenneco Oil Compan	ıv		•
Address	3		
Suite 1200 Lincol	Tower Bldg. Denver Co	lorado 80203	
Reason(s) for filing (Check proper bo	1)	Other (Please explain)	
New We!1	Change in Transporter of:	- TSI	'1
Recompletion	Oil Dry Go	<del>-</del>	ry 1, 1974
Change in Ownership	Castridied Gos [ ] Conder	13000	
If change of ownership give name			
and address of previous owner			
DESCRIPTION OF WELL AND	LEASE		Jicarilla Cont. 11
Lease Name	Well No. Pool Name, Including F	·· _	Lease No.
Jicarilla "A"	4 Basin Dakot	8. State, Federal	or Fee Indian
Location		_	
Unit Letter K : 1	350 Feet From The South Lir	e and <u>1850</u> Feet From T	west
		Si man si	
Line of Section 19 T	ownship 26N Range	5W , NMPM, Ric	Arriba County
DESIGNATION OF TRANSPOL	RTER OF OIL AND NATURAL GA	ıs	
Name of Authorized Transporter of C		Address (Give address to which approve	ed copy of this form is to be sent)
<u>.</u>		ļ	•
Name of Authorized Transporter of C	asinghead Gas or Dry Gas X	Address (Give address to which approve	d copy of this form is to be sent)
Northwest Pipeline	Corporation	501 Airport Drive, Farmi	ngton. New Mexico 8740
If well produces oil or liquids,	Unit Sec. Twp. P.ge.	Is gas actually connected? When	
give location of tanks.	к 19 26 5		
	rith that from any other lease or pool,	give commingling order number:	
COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Ree's
Designate Type of Complet			
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
	İ		
Elevations (DF, RKB, RT, CR, etc.,	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
Perforations			Depth Casing Shoe
Perforations	THENC CASING AN	D CEMENTING RECORD	Depth Casing Shoe
		D CEMENTING RECORD	
Perforations  HOLE SIZE	TUBING, CASING, AN	D CEMENTING RECORD DEPTH SET	Depth Casing Shoe SACKS CEMENT
	CASING & TUBING SIZE  FOR ALLOWABLE (Test must be	DEPTH SET	SACKS CEMENT
HOLE SIZE  TEST DATA AND REQUEST OIL WELL	CASING & TUBING SIZE  FOR ALLOWABLE (Test must be able for this d	DEPTH SET  DEPTH SET  sifter recovery of total volume of load oil a epth or be for full 24 hours)	SACKS CEMENT  SACKS CEMENT  Administration of the second s
HOLE SIZE  TEST DATA AND REQUEST	CASING & TUBING SIZE  FOR ALLOWABLE (Test must be	DEPTH SET	SACKS CEMENT  SACKS CEMENT  Administration of the second s
HOLE SIZE  TEST DATA AND REQUEST OIL WELL  Date First New Oil Run To Tanks	FOR ALLOWABLE (Test must be able for this d	DEPTH SET  Ifter recovery of total volume of load oil a epith or be for full 24 hows)  Producing Method (Flow, pump, gas lift	SACKS CEMENT  and must be equal to allow a log alog allow a log al
HOLE SIZE  TEST DATA AND REQUEST OIL WELL	CASING & TUBING SIZE  FOR ALLOWABLE (Test must be able for this d	DEPTH SET  DEPTH SET  sifter recovery of total volume of load oil a epth or be for full 24 hours)	SACKS CEMENT  SACKS CEMENT  Administration of the second s
HOLE SIZE  TEST DATA AND REQUEST OIL WELL  Date First New Oil Run To Tanks	FOR ALLOWABLE (Test must be able for this d	DEPTH SET  Ifter recovery of total volume of load oil a epith or be for full 24 hows)  Producing Method (Flow, pump, gas lift	SACKS CEMENT  Ad must be equal top allow  Choke Size  [EC 1 7 1973]  Gas MCF
TEST DATA AND REQUEST OIL WELL Date First New Oil Run To Tanks Length of Test	FOR ALLOWABLE (Test must be able for this d  Date of Test  Tubing Pressure	DEPTH SET  Sifter recovery of total volume of load oil a epth or be for full 24 hows)  Producing Method (Flow, pump, gas lift Casing Pressure	SACKS CEMENT  ad must be equal top allow atc.)  Choke Size  [160 1 7 1973]
TEST DATA AND REQUEST OIL WELL Date First New Oil Run To Tanks Length of Test	FOR ALLOWABLE (Test must be able for this d  Date of Test  Tubing Pressure	DEPTH SET  Sifter recovery of total volume of load oil a epth or be for full 24 hows)  Producing Method (Flow, pump, gas lift Casing Pressure	SACKS CEMENT  Ad must be equal to allow the size to allow the size to a size the size that the size
HOLE SIZE  TEST DATA AND REQUEST OIL, WELL Date First New Oil Run To Tanks  Length of Test  Actual Prod. During Test  GAS WELL	CASING & TUBING SIZE  FOR ALLOWABLE (Test must be able for this d  Date of Test  Tubing Pressure  Oti-Bbis.	DEPTH SET  Siter recovery of sotal volume of load oil a epth or be for full 24 hours)  Producing Method (Flow, pump, gas lift Casing Pressure  Water-Bbls.	SACKS CEMENT  And must be equal to allow the size   DEC 17 1873    Gas MCF OIL COM. COM.
HOLE SIZE  TEST DATA AND REQUEST OIL, WELL  Date First New Oil Run To Tanks.  Length of Test  Actual Prod. During Test	FOR ALLOWABLE (Test must be able for this d  Date of Test  Tubing Pressure	DEPTH SET  Sifter recovery of total volume of load oil a epth or be for full 24 hows)  Producing Method (Flow, pump, gas lift Casing Pressure	SACKS CEMENT  And must be equal to allow the size   DEC 17 1873    Gas MCF OIL COM. COM.
TEST DATA AND REQUEST OIL, WELL Date First New Oil Run To Tanks Length of Test Actual Prod. During Test  GAS WELL Actual Prod. Test-MCF/D	CASING & TUBING SIZE  FOR ALLOWABLE (Test must be able for this d  Date of Test  Tubing Pressure  Oti-Bbis.	DEPTH SET  Interpretation of total volume of load oil a cepth or be for full 24 hows)  Producing Method (Flow, pump, gas lift)  Casing Pressure  Water-Bbls.  Bbls. Condensate/MMCF	SACKS CEMENT  and must be equal top allow top
HOLE SIZE  TEST DATA AND REQUEST OIL, WELL Date First New Oil Run To Tanks  Length of Test  Actual Prod. During Test  GAS WELL	CASING & TUBING SIZE  FOR ALLOWABLE (Test must be able for this d  Date of Test  Tubing Pressure  Oti-Bbis.	DEPTH SET  Siter recovery of sotal volume of load oil a epth or be for full 24 hours)  Producing Method (Flow, pump, gas lift Casing Pressure  Water-Bbls.	SACKS CEMENT  Ad must be equal top allow the same be appeared to allow the same because of the same becaus
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TEST DATA AND REQUEST OIL, WELL Date First New Oil Run To Tanks Length of Test Actual Prod. During Test  GAS WELL Actual Prod. Test-MCF/D	CASING & TUBING SIZE  FOR ALLOWABLE (Test must be able for this d  Date of Test  Tubing Pressure  Cti-Bbis.  Length of Test  Tubing Pressure (Shut-in)	DEPTH SET  Interpretation of total volume of load oil a cepth or be for full 24 hours)  Producing Method (Flow, pump, gas lift)  Casing Pressure  Water-Bbls.  Bbls. Condensate/MMCF  Casing Pressure (Shut-in)	SACKS CEMENT  and must be equal top allow a size.  Choke Size  DEC 17 1973  Granuty of Condensate  Choke Size
HOLE SIZE  TEST DATA AND REQUEST OIL WELL  Date First New Oil Run To Tanks  Longth of Test  Actual Prod. During Test  GAS WELL  Actual Prod. Test-MCF/D  Testing Method (pitot, back pr.)  CERTIFICATE OF COMPLIA	CASING & TUBING SIZE  FOR ALLOWABLE (Test must be able for this d  Date of Test  Tubing Pressure  Cti-Bbis.  Length of Test  Tubing Pressure (Shut-in)	DEPTH SET  Interpretation of load of l	SACKS CEMENT  and must be equal top allow size  Choke Size  Choke Size  Choke Size
HOLE SIZE  TEST DATA AND REQUEST OIL WELL Date First New Oil Run To Tanks  Length of Test Actual Prod. During Test  GAS WELL Actual Prod. Test-MCF/D  Testing Method (pitot, back pr.)  CERTIFICATE OF COMPLIA  I hereby certify that the rules an	CASING & TUBING SIZE  FOR ALLOWABLE (Test must be able for this d  Date of Test  Tubing Pressure  Oti-Bbis.  Length of Test  Tubing Pressure (Shut-in)	DEPTH SET  Infer recovery of sotal volume of load oil a cepth or be for full 24 hours)  Producing Method (Flow, pump, gas life Casing Pressure  Water-Bbls.  Bbls. Condensate/MMCF  Casing Pressure (Shut-in)  OIL CONSERVA	Choke Size  Choke Size  Choke Size  Choke Size  Choke Size  Choke Size  TION COMMISSION  1974
TEST DATA AND REQUEST OII, WELL Date First New Oil Run To Tanks Length of Test Actual Prod. During Test  GAS WELL Actual Prod. Test-MCF/D Testing Method (pitot, back pr.) CERTIFICATE OF COMPLIA I hereby certify that the rules an	CASING & TUBING SIZE  FOR ALLOWABLE (Test must be able for this d  Date of Test  Tubing Pressure  Cti-Bbis.  Length of Test  Tubing Pressure (Shut-in)	DEPTH SET  DEPTH SET  Dister recovery of total volume of load oil a cepth or be for full 24 hours)  Producing Method (Flow, pump, gas life Casing Pressure  Water-Bbls.  Bbls. Condensate/MMCF  Casing Pressure (Shut-is)  OIL CONSERVA  APPROVED  FEB 7	SACKS CEMENT  and must be equal to allow top allow atc.)  Chobs Size  DEC 17 1973  Gas ACF  Choke Size  TION COMMISSION  1974  Ly A. R. Kombrick
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TEST DATA AND REQUEST OII, WELL Date First New Oil Run To Tanks Length of Test Actual Prod. During Test  GAS WELL Actual Prod. Test-MCF/D Testing Method (pitot, back pr.) CERTIFICATE OF COMPLIA I hereby certify that the rules an	CASING & TUBING SIZE  FOR ALLOWABLE (Test must be able for this d  Date of Test  Tubing Pressure  Cti-Bbis.  Length of Test  Tubing Pressure(shit-in)  NCE  d regulations of the Oil Conservation with and that the information given	DEPTH SET  Interpretation of the property of total volume of load oil a cepth or be for full 24 hours)  Producing Method (Flow, pump, gas life Casing Pressure  Water-Bble.  Bble. Condensate/MMCF  Cosing Pressure (Shut-in)  OIL CONSERVA  APPROVED  FER 7  BY  ORIGINAL SHOWS  TITLE	SACKS CEMENT  and must be equal or top allowed top all
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TEST DATA AND REQUEST OII, WELL Date First New Oil Run To Tanks Length of Test Actual Prod. During Test  GAS WELL Actual Prod. Test-MCF/D Testing Method (pitot, back pr.) CERTIFICATE OF COMPLIA I hereby certify that the rules an	CASING & TUBING SIZE  FOR ALLOWABLE (Test must be able for this d  Date of Test  Tubing Pressure  Cti-Bbis.  Length of Test  Tubing Pressure(shit-in)  NCE  d regulations of the Oil Conservation with and that the information given	DEPTH SET  Differ recovery of total volume of load oil a cepth or be for full 24 hours)  Producing Method (Flow, pump, gas life Casing Pressure  Water-Bbls.  Bbls. Condensate/MMCF  Casing Pressure (Shut-in)  OIL CONSERVA  FEB 7  APPROVED  BY OTIGINAL SIGNED  TITLE  This form is to be filed in co.  If this is a request for allows	SACKS CEMENT  and must be equal top allow top allow size  Choke Size  Choke Size  Choke Size  TION COMMISSION  1974  Ly A. E. Kombrick  compliance with RULE 1104.  able for a newly drilled or despense
TEST DATA AND REQUEST OIL. WELL Date First New Oil Run To Tanks Length of Test Actual Prod. During Test  GAS WELL Actual Prod. Test-MCF/D  Testing Method (pitot, back pr.)  CERTIFICATE OF COMPLIA I hereby certify that the rules an Commission have been complied above is true and complete to the second complete to the complete complete to the complet	CASING & TUBING SIZE  FOR ALLOWABLE (Test must be able for this d  Date of Test  Tubing Pressure  Cti-Bbis.  Length of Test  Tubing Pressure(shit-in)  NCE  d regulations of the Oil Conservation with and that the information given	DEPTH SET  DEPTH SET  DEPTH SET  Depth or be for full 24 hows)  Producing Method (Flow, pump, gas lift  Casing Pressure  Water-Bble.  Bble. Condensate/MMCF  Casing Pressure (Shut-in)  OIL CONSERVA  APPROVED  FEB 7  BY  TITLE  This form is to be filed in confirm the second pressure taken on the well in according to the second part taken on the second part taken taken on the second part taken ta	SACKS CEMENT  and must be equal top allow top
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TEST DATA AND REQUEST OIL WELL Date First New Oil Run To Tanks Longth of Test Actual Prod. During Test  GAS WELL Actual Prod. Test-MCF/D Testing Method (pitot, back pr.)  CERTIFICATE OF COMPLIA I hereby certify that the rules an Commission have been complied above is true and complete to the complete	CASING & TUBING SIZE  FOR ALLOWABLE (Test must be able for this described for this described for this described for this described for this described for this described for this described for this described for this described for the Oil Conservation with and that the information given the best of my knowledge and belief.	DEPTH SET  DEPTH SET  Defer recovery of total volume of load oil a cepth or be for full 24 hows)  Producing Method (Flow, pump, gas life Casing Pressure  Water-Bbls.  DIL CONSERVA  APPROVED  BY  DIL CONSERVA  TITLE  This form is to be filed in confidence of the form must be accompanied the well, this form must be accompanied to the son new and recompleted well able on new and recompleted well	SACKS CEMENT  and must be equal top allow at the filled out completely for allow and must be equal top allow at the filled out completely for allow at the filled out completely filled out the filled out completely for allow at the filled out t
TEST DATA AND REQUEST OIL WELL Date First New Oil Run To Tanks Length of Test Actual Prod. During Test  GAS WELL Actual Prod. Test-MCF/D  Testing Method (pitot, back pr.)  CERTIFICATE OF COMPLIA  I hereby certify that the rules an Commission have been complise above is true and complete to the complet	CASING & TUBING SIZE  FOR ALLOWABLE (Test must be able for this described for this described for this described for this described for this described for this described for this described for this described for this described for the Oil Conservation with and that the information given the best of my knowledge and belief.	DEPTH SET  DEPTH SET  DEPTH SET  Depth or be for full 24 hows)  Producing Method (Flow, pump, gas life  Casing Pressure  Water-Bble.  Bble. Condensate/MMCF  Cosing Pressure (Shut-in)  OIL CONSERVA  APPROVED  FER 7  TITLE  This form is to be filed in c.  If this is a request for allow well, this form must be accompantests taken on the well in accord  All sections of this form must be in new and recompleted well  Fill out only Sections I, II,	SACKS CEMENT  and must be equal top allow top allow size  Choke Size  LEC 17 1973  Granuty of Condensate  Choke Size  TION COMMISSION  1974  Ly A. E. Kombrick  compliance with RULE 1104.  able for a newly drilled or despense to the deviation ance with RULE 111.  to be filled out completely for allow

## UNITED STATES DEPARTMENT OF THE INTERIOR

(See other in-structions on

	GEO	DLOGICAL	SURVEY		revers	e side)	Jicaril'	ls Cont 110	L No.
WELL COM	APLETION OF	RECOME	PLETION R	EPORT A	AND LOC	<b>3</b> *	-	ALLOTTEE OR TRIBE	
1a. TYPE OF WELL		GAS WELL		Other	·		7. UNIT AGREE		**************************************
b. TYPE OF COMP		_ ###UD###	<i>D</i> (1)	Jener				,	
	WORK DEEP-	PLUG BACK	DIFF. DESVR.	Other		1	S. FARM OR L	EASE NAME	
2. NAME OF OPERATO	R							lla "A"	
	Oll Company					_	9. WELL NO.		
3. ADDRESS OF OPERA	_	<i>(</i> 101			IVED	1 -	10 FIRED AND	POOL, OR WILDCAT	
4. LOCATION OF WELL	OK 1714 - DE	early and in acc	ordance with on	State requir	cments)*	1	Basin		
At surface 18	50' PBL, 185	O' FWL	1			1	11. SEC., T., B.	, M., OR BLOCK AND B	CRVEY
At top prod inte	rval reported below	Same	1	UEC 2	7 1965	1	OR AREA		
					ou svev		a. 10		
At total depth		Seme	14. PERMIT NO.	S GEOLOG	CICAL SURVE		12. COUNTY O	T-26-N, R-5-	
			14. PERMIT NO.	EVKINITÁO	osia Tours	_	PARISH		
15. DATE SPUDDED	16. DATE T.D. REACH	I		<u></u>	. ELEVATIONS (D		Rio Arri	19. ELEV. CASINGHI	AD CO
9-22-65	10-15-65		23-65		6633		, 42, 210.,	6633	
20. TOTAL DEPTH, MD 4		CK T.D., MD & TV		TIPLE COMPL.		SWALS	ROTABY TOOL		LS
7585	7	526	-	**	10H	170	7585	0	
24. PRODUCING INTER	VAL(S), OF THIS COM	PLETION-TOP, P	OTTOM, NAME (M	ID AND TVD)	VEOL	TAT	7 (	25. WAS DIRECTI SURVEY MAD	
	7255 - 749	O Bokete			DECO	() +00	. 1	Yes	
26. TYPE ELECTRIC A		V DELUVE			UEL, Z	3 196		27. WAS WELL CORE	<del></del>
		Saud a T			OIL CO	N. CO		Mo.	
28.	ion Electric	CASIN	G RECORD (Rep	ort all string	s set in well IS	T. 33	<del></del>		<del></del> -
CASING SIZE	WEIGHT, LB./FT.	DEPTH SET	(MD) HO	LE SIZE	CE	ENTING	DCORD	AMOUNT PUI	LLED
8-5/8	24#	4.94	12	-1/4	250 sack			Rome	
4-1/2	11.6# & 10.	5# 7584	6	-3/4	300 saci	is, le	t stage	None	: 
		_			310 sach		d stage	Rone	<del></del>
29.	T.YN	ER RECORD			<b>570 eaci</b>		UBING RECO	RODE	<del>:</del>
SIZE SIZE	<del></del>		ACKS CEMENT*	SCREEN (A			EPTH SET (MI		(MD)
				<u>-</u>	2-3/		7490	Home	<del>,,</del>
						<u> </u>	1.4.		
31. PERFORATION REC	OBD (Interval, size o	ind number)	-	82.	ACID, SHOT	, FRACT	URE, CEMENT	SQUEEZE, ETC.	
7490 - 7390	5 - 300 gal	Llons acid			TERVAL (MD)	·	·	OF MATERIAL USED	
7483 - 739	7 - 150 gml	llons acid		7483	- 7397		00 lbs m	and & 112,00	
7255 - 727	<b>+</b> -			7255	<u> </u>	40,0	OO lbs si	må & 55,000	gal vt
						<u> </u>	<del></del>		
33.*			PRO	DUCTION	· · · · · · · · · · · · · · · · · · ·	<del>-\</del>			<del></del>
DATE FIRST PRODUCT	ION PRODUCT	ON METHOD (FI	owing, gas lift, p	um ping—size	and type of pu	mp)	WELL	STATUS (Producing	n
Short In	<u> </u>	Floring						Shut Da	
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL-BBL.	GAS—M	CF.	WATER-BBL	GAS-OIL BATIO	
12-5-65 FLOW. TUBING PRESS.	CASING PRESSURE	3/4	OIL—BBL.	GAS-	-MCF.	WATER-	-BBL.	OIL GRAVITY-API (CO	
611	Packer	24-HOUR RATE		1	_	ı	BBL.	OID GRAVITI-API (CO	· .
	AB (Sold, used for fu	el, vented, etc.)	1 555		9934		TEST WITNES	SED BY	<del></del>
	Shurt In						Teftal	ler. Inc.	
35. LIST OF ATTACH				·					
06 Y L	None		·	·					_
30. I hereby certify	that the foregoing of Original Signed		ormation is comp	plete and cor	rect as determin	ed from	all available re	cords	
SIGNED	HAROLD C. NICH	IOLS	TITLE _	Senior P	roduction	Clark	ነ ከልጥኮ	December 22	1065
B	erold C. Hie	hols							

# INSTRUCTIONS

General: This form is designed for submitting a complete and correct well completion report and log on all types of lands and leases to either a Federal agency or a State agency, or both, pursuant to applicable Federal and/or State laws and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, juriticularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State or misturctions on items 22 and 24, and 32, below regarding separate reports for separate completions. See instructions it items 22 and 24, and items 22 and 24 and items and items are shown below to the time this summary record is submitted, copies of all currently available logs (drillers, geologists, sample and core analysis, all types electric, etc.), formation and pressure tests, and directional surveys, should be attached hereto, to the extent required by applicable Federal and/or State laws and regulations. All attachments

should be listed on this form, see item 35.

Hern 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

Frederal office for specific instructions.

Frem 22.

Frederal office for specific instruction is and in any attachments.

Frem 22.

Frederal office for specific instruction interval of the completion of the completion of the cementing tool.

Frem 23.

Frem 24.

Frem 25.

Frem 25.

Frem 25.

Frem 26.

Frem 27.

Frem 27.

Frem 27.

Frem 28.

Frem 28.

Frem 28.

Frem 29.

Frem 2

DEPTH INTERVAL	TESTED, CUSINON	USED, TIME TOOL O	DEPTH INTERVAL INSTITUTE CURITION USED, TIME TOOL OFWIN BLOWING AND SHUT-IN PRESSURES, AND RECOVERIES	90.	ORCHOLIC MARKETS
FORMATION	TOF	HOTTOM	DESCRIPTION, CONTENTS, ETC.		TOP
Metured Cliffs	<b>302</b> 0	3080	Sund - One	Strae	MEAS, DEPTH TRUE VERT. DEPTH
Mesavarde	4720	5385	Sand - Gas		
Dekots	7245	7580	Sand - Clea	-	
				·	

40. DF COPIOS REEL	114.0	ı	
DISTRIBUTIO			
SANTA PE			
FILE			
U.S.G.S.			
LAND OFFICE			
TRANSPORTER			
IMANSFORIER		Г	
OPERATOR		П	Г

ns C-104 must be filed for each pool in multiply

SANTA PE	$\Box$	REQUEST	FOR ALLOWABLE	1331011	Supersedes Old C-104 and C-11
FILE	44		AND		Effective (-1-65
U.S.G.S.	-+	AUTHORIZATION TO TRA	NSPORT OIL AND I	NATURAL GA	AS
100	+				
TRANSPORTER GAS					
OPERATOR					
PRORATION OFFICE	لسل		<del></del>		
Tenneco 0il	Compa	en.v			
Address	Compa	iit.			
		glewood, CO 80155			<u> </u>
Reason(s) for filing (Check pro	per boz)	Change in Transporter of:	Other (Please	explain)	
Recompletion		Oil Dry Ge	. nl		. •
Change to Ownership		Casinghead Gas Conden	12 atto		
If change of ownership give a					
and address of previous own	rr				
. DESCRIPTION OF WELL	AND I	FACE		*Jic	carilla Cont 110
Legas Name	11112	Well No. Pool Name, Including Fo	ormation	Kind of Lease	Lease No.
Jicarilla A		4 Basin Dak	ota	State, Federal	or F⊶ Indian *
Location	105	O Courth	1050		
Unit Letter K	185	O Feet From The South Lin	• and <u>1850</u>	Feet From Ti	he West
Line of Section 19	Tow	mehip 26N Range	5W, NMPM	Rio	Arriba County
Name of Authorized Transports		rer of oil and natural ga	S Address (Gine address	to subjet appear	ed copy of this form is to be sent)
Gary Energy Corpo					glewood, CO 80112-5591
Name of Authorized Transports	r of Cas		Address (Give address	to which approv	ed copy of this form is to be sent!
Northwest Pipelin	е		•		gton, N. M. 87401
If well produces oil or liquids,		Unit Sec. Twp. Pge.	Is gas actually connect	ed? When	n
give location of tanks.		<u> </u>	<u> </u>		<del></del>
If this production is comming. COMPLETION DATA	ried wit	th that from any other lease or pool,	give commingling orde	ı nampet:	
		Oil Well Gas Well	New Well Workover	Deepen	Plug Back   Same Res'v. Diff. Res'v.
Designate Type of Con	npletio		1	<u>i</u>	
Date Spudded		Date Compl. Ready to Prod.	Total Depth		P.B.T.D.
Elevations (DF, RKB, RT, GR	ete i	Name of Producing Formation	Top Oil/Gas Pay		Tubing Depth
	,,				
Perforations					Depth Casing Shoe
		Pilling Cating Ani	D CENENTING BECOM		<u> </u>
HOLE SIZE		TUBING, CASING, AND	DEPTH S		SACKS CEMENT
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		<del> </del>	<del> </del>		<del> </del>
. TEST DATA AND REQU	CET E	OP ALLOWARIE Governo	the second of secol as		and must be equal to or exceed top allow-
OIL WELL	ESI F	able for this di	rpth or be for full 24 how	### 07 1000 011 0 4)	the wast of address or extend top enter-
Date First New Oil Run To To	nke	Date of Test	Producing Method (Fig.	w, pump, gas life	's, etc.)
Length of Test		Tubing Pressure	Cosing Pressping	A Th	Christia
Candin of 1441		· many prosect		i G G L V	
Actual Prod. During Test		Cil-Shie.	Water-Bhie.		Gas-MCF
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				1400	DIV.
GAS WELL Actual Prod. Teet-MCF/D		Length of Test	Bbis. Condensate/Add	E CALCE C	Gravity of Condensate
				" DISI. 3	
Testing Method (pitot, bock p	.,	Tubing Pressure (Shut-is)	Cosing Pressure (Shu	i-1m)	Choke Size
		<u> </u>	<del> </del>		<u></u>
L CERTIFICATE OF COM	PLIAN	CE	OIL	CONSERVA	TION COMMISSION
9 5		completions of the Oil Consequeties	APPROVED	النائس	/ 0 1 19 <b>84</b>
Commission have been con	plied v	regulations of the Oil Conservation with and that the information given	1	5.	1707
above is true and complete	to the	best of my knowledge and bolish	BY		
1 1		0	TITLE		SUPERVISOR DISTRIC() 書 3
M L. ~	/_		This form is t	o be filed in c	compliance with MULE 1184.
Martin D	<u> 29</u>	daman	If this is a rec	quest for allow	rable for a newly drilled or despend
Administrativ		elwej porvisor	tests taken on the	well in accor	nied by a tebulation of the deviation dance with RULE 111.
- numiniatidally	e Jup	JET A LOOL.			
	TI	tla)	All sections o	this form mu	et be filled out completely for allow-
10/10/			able on new and re	scompleted we Sections I, II,	of the filled out completely for allow- pile.  III, and VI for changes of owner, ex, or other such change of condition.

STATE OF NEW MEXI				;	5a 0	
NERGY AND MINERALS DEI	PARTMENT		ATION DIVISIO		Format Page 1	10-01-78
PILE	⊣		W MEXICO 87501	. <b>U</b> []	5 nn	
v.s.e.s.				<b>*</b> ,	THE STATE OF THE S	ha-a
LAND OFFICE				$U_{\mathcal{L}_I}$		
TRANSPORTER GAS	_		OR ALLOWABLE	$\sim$ $Q_{ll}$ , $ o$	N. DIV.	//
OPERATOR PROBATION OFFICE			AND		Ass.	•
1	i AUIHO	RIZATION TO TRANS	SPORT OIL AND	NATIONAL GAS DIC	r. Du	
					3	
Tenneco 011 Comp	any					
Address						
P.O. Box 3249, E		80155	100000		<del></del>	
Reason(s) for filing (Check proper be	ox)			Ploaze explain)	<b></b>	. <b></b>
Mew Well	Change in Transporter of:			nge of condensa		
Recompletion	닏ᅄ	Dry Gas	Gary	/ Energy to Con	oco effective	12/1/8/
Change in Ownership	Casinghead Gas	Condensate				
II change of ownership give name and address of previous owner.  II. DESCRIPTION OF WELL Lesse Name  Jicarilla A	L AND LEASE Well No.	Pool Name, Including For		Kind of Lease State, Federal or Fe		Cont. 11(
Location		Basin Dak	o ca		Indian	
Unit Letter K	: 1850	Feet From The SO	uth une	and 1850	Feet From The Wes	t
Line of Section 19	Township	26N	Range 5	, NMPM	. Rio Arriba	County
III. DESIGNATION OF TRA	NSPORTER OF OIL	AND NATURAL GAS				
Name of Authorized Transporter of O	II Tor Condensate X		Address (Give addre	ss to which approved copy of th	is form is to be sent)	
Conoco			P.O. Box	460, Hobbs, NM	88240	
Name of Authorized Transporter of C	asingheed Gas 🗀 or Dry Gas	X	Address (Give addre	ss to which approved copy of th	is form is to be sent)	
Northwest Pipel	ine	•	P.O. Box	90, Farmington	NM 87401	
	. Unit Sec	Twp. Rge.	is gas actually conf	ected? When	1111 07401	
If well produces oil or liquids, give location of tanks.	V	19 26N 5W	Yes	· ·		
If this production is commingled with	that from any other lease or po	ol, give commingling order numi	ber		<del></del>	
NOTE: Complete Parts IV	and V on reverse sid	le if necessary.				
VI. CERTIFICATE OF COI	MPLIANCE			OIL CONSERVA	TION DIVISION NOIT	0 2 198
I hereby certify that the rules and re-						, 19
with and that the information given	is true and complete to the b	set of my knowledge and belie	11	Er	مديدك الرحاس	
~ ^ ^			BY	374		<del>\</del>
(,) [/#]	`		TITLE		SUPERVISING d	Ataiot # 3
- hell the	<i>TO</i>		This form is to I	be filed in compliance with RUL	E 1104.	

Sr. Administrative Analyst

(Date)

11/20/87

Fill out only Section I, II, III, and VI for changes of owner, well name and or number, or transporter,

Submit 5 Copies
Appropriate District Office
DISTRICT J
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

DISTRICT II P.O. Drawer DD, Artesia, NM 88210

OIL CONSERVATION DIVISION P.O. Box 2088

DISTRICT III 1000 Rio Brans Rd., Aziec, NM 87410

Santa Fe, New Mexico 87504-2088 REQUEST FOR ALLOWARI F AND AUTHORIZATION

	7	OTRA	NSF	PORT OIL	AND NA	TURAL GA	NS			
perator	'	0 1111		0111 012			Well A	Pi No.	· · · · · · · · · · · · · · · · · · ·	
Amoco Production Compan	ay						30039	08062		
Address	000	n		C-14-	90201					
1670 Broadway, P. O. Be		, venv	er,	Colorado		r (l'iease expla	nia1			
New Well		Change in	Trans	noter of:		. 10 10400 60/10	,			
Recompletion [7]	Oil	~,	Dry (							. ]
Thange in Operator				lensate [_]						1
change of operator give name Tenno	eco Oi	I F &	p. 6	6162 S. W	lillow	Enelewoo	d Color	- 40 80	155	
			-1			A-CUU	41 00101	<u> </u>	**************************************	
I. DESCRIPTION OF WELL A Lease Name	ND LEA		(De al	Manna Tankatia	- F		<del></del>			
JICARILLA A		wen No.		Name, Includin IN (DAKO)			FEDE	DAT	90001	ise No.
Location		<del></del> -	Pnu	IN (DANO.	<u></u>		FEUE	WIL.	1 30001	10
Unit Letter K	:18	50	_ Feet	From The FS	L Lin	end 1850	Fe	t From The	FWL	Line
Section 19 Township	26N		Rang	<sub>e</sub> SW		мрм,	RIO A	RRIBA		County
II. DESIGNATION OF TRANS	SPORTE	R OF C	IL A	ND NATU	RAL GAS					
Name of Authorized Transporter of Oil		or Conde		<b>∇</b>	Address (Gin				orm is to be see	v)
CONOCO						X 1429,				
Name of Authorized Transporter of Casing		, <u> </u>	or D	ny Gas 🟋					vm is to be ser	
NORTHWEST PIPELINE CORP  If well produces oil or liquids.	Unit	Soc.	Twp	Ree		y connected?	SALI LA		UT 841	108-0899
ive location of tanks.			1	<u> </u>		,	i	•		
f this production is commingled with that f V. COMPLETION DATA	rom any oth	ner lease o	r pool,	give commingl	ing order num	ber:				
		l Oil We	ii l	Gas Well	New Well	Workover	Doepen	Plug Back	Same Res'v	Siff Res'v
Designate Type of Completion	· (X)	i	i		İ	İ	<u>i i i</u>		i	il
Date Spackled	Date Com	pl. Ready	to Prod	L	Total Depth			P.B.T.D.		
Elevations (DF, RKB, RT, GR, etc.)	Name of J	roducing (	onnati	ion	Top Oil/Gas	Pay		Tubing Dep		
l'erforations								Depth Casin	g Shoe	
• • • • • • • • • • • • • • • •	:	TIDING	CA	SING AND	CEMENT	NG RECOR	D	<del></del>		
HOLE SIZE		SING & 1			Cumuli	DEPTH SET		I	SACKS CEME	NT
								:		
V. TEST DATA AND REQUES	 	X ET AU	j à Gi	<del></del>	J			J		
OIL WELL (Test must be after n					be equal to a	r exceed too all	awable for thi	s death or he	for full 24 hou	or 1
Date First New Chil Run To Tank	Date of To		7			ethod (Flow, p			Jul 24 Man	<del></del>
Length of Test	Tubing Pr	eksure			Casing Press	ifts		Choke Size		
Actual Prod. During Test	Oil - Ubis				Water - Bbit		<del> </del>	Gas- MCF		
	0.1 20.1	•								
GAS WELL	J				1			J	<del></del>	J
Actual Prod. Test - MCI7D	Length of	Test			Bbla. Conde	neste/NINKCF		Gravity of C	ondensate	
	•									
lesting Medical (pitot, back pr.)	Tubing P	tussine (Si	rut (III)		Casing Pres	wre (Shut in)	<del></del>	Choke Sico	. المعذ همد محيد ده	
VI. OPERATOR CERTIFIC	ATE O	F COM	IPLI	ANCE	1					ا ــــــــــــــــــــــــــــــــــ
I hereby certify that the rules and regul	ations of the	e Oil Coas	crvatio	M)	11	OIL COI	<b>NSERV</b>	ATION	DIVISIO	N
Division have been complied with and is true and complete to the best of my				SOVE	11					
A A A		en venet.			Date	a Approve	ed	MAY-08	1999	
4. L. Hann	Stor	- ~			_				nest L	
Signature	V	_:			By_	<del></del>	7	-)_ <i>&amp;</i> /		
J. L. Hampton Si	Staf	£_Adm	io. Tid	Suprv			\$611ARV	ISIOND	SIRICT	# 3
Janaury 16, 1989			-830	-5025	Title	·				
Date		T	ctephor	ne 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.

Submit 5 Copies
Appropriate District Office
DISTRICT 1
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico Energy, Minerals and Natural Resources Department

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

Furin C-104 Revised 1-1-89 See Instruction

DISTRICT II P.O. Drawer DD, Anesia, NM 8R210

DISTRICT III 1000 Rio Brazos Rd., Azzec, NM 87410

DUEST FOR ALLOWARI F AND AUTHORIZA

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ND LEASE								
Well No.				RATED GA			ما	ase No.
1850	_ Feel [	rom The	FSL Lin	e and1	850 Fe	et From The	FWL	Line
26N	Range	5W	, N	мрм,	RIO	ARRIBA		County
							•	
		<u>UTAN UN</u>		e aldress to	hich approved	copy of this fac	m is so be see	·
L Control			1					1
head Gas	or Dr	y Gas	Address (Giv	e oddress to w	hick approved	copy of this for	M is to be se	<del>87401</del>
PORATION			1					
Unit Sec.	Twp	Rge.	le gae actuall	y connected?	When	7		
rom any other lease or	r pool, g	ive comming	ling order num	ber:				
(X) Oil Wel	1	Gas Well	New Well	Workover	Doepen	Plug Back	Same Res'v	Diff Res'v
Date Compt. Ready t	lo Prod.		Total Depth	<del>*</del>		P.B.T.D.		
Name of Producing I	omatic	na .	Top Oil/Gas	Pay	· · · · · · · · · · · · · · · · · · ·	Tubing Depth	)	
L			J			Depth Caving	Shoe	
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CASING & T	UBING	SIZE	<del> </del>	DEPTHA	41100	1000 S	ACKS CEM	ENT
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T FOR ALLOW	ABL	E .						
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Date of Test					sump, gas igi.	·		
Tubing Pressure			Casing Press	mie		Choke Size		
Oil - Ubls.			Water - Bble	<b>.</b>		Gat- MCF		
				7:10 1 200				
Length of Test		•	Bols. Conde	BEAC/MMCF		Gravity of C	ondensate	7
Tubing Pressure (Si	ul-in)		Casing Pres	sure (Shut-ia)		Choke Size	~~~~	
ATE OF COM	DI 1A	NCF	1					
lations of the Oil Cons	crvation	1		OIL CO	NSERV	ATION I	DIVISIO	N
that the information g knowledge and belief.		7VE	Dat	e Approv	ed	AUG 2	3 1990	
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f Admin. Sup					SUP	ERVISOR	DISTRIC	
303		-4280	Title	•			UIG I MIC	
	Change is Change is Change is Change is Change is Change is Change is Change is Change is ND LEASE Well No. 4  1850 26N  CPORTER OF OF CONCERNATION Unit Soc. CORATION Unit Soc. COMPATION CASING & 1  TUBING C	Change in Transp Oil Dry G Casinghead Gas Conde  ND LEASE Well No. Pool I BAS  1850 Feet B 26N Range PORTER OF OIL AR or Coodensale read Gas or Dry CORATION Unit Soc. Twp.  Will Soc. Twp.  Oil Well (X) Oil Well (X)  Date Compt. Ready to Prod.  Name of Producing Formatic  TUBING, CAS CASING & TUBING  TUBING CAS CASING & TUBING  Tubing Pressure  Oil - Ubls.  Length of Test  Tubing Pressure  Oil - Ubls.  Length of Test  Tubing Pressure  Oil - Ubls.	Change in Transporter of: Oil Dry Gas Casinghead Gas Condensate  ND LEASE Well No. Pool Name, including BAS IN DAKO  1850 Feet From The 26N Range SW  PORTER OF OIL AND NATU  or Condensate  CORATION Unit Soc. Twp. Rge.  CORATION Unit Soc. Twp. Rge.  CORATION Unit Soc. Twp. Rge.  CORATION Unit Soc. Twp. Rge.  CORATION Unit Soc. Twp. Rge.  CORATION  TUBING, CASING AND CASING & TUBING SIZE  TUBING, CASING AND CASING & TUBING SIZE  TUBING Pressure  Oil - Ubls.  Length of Yest Tubing Pressure  Oil - Ubls.  Length of Yest Tubing Pressure  Oil - Ubls.  ATE OF COMPLIANCE aious of the Oil Conservation that the information given above knowledge and belief.	OLORADO 80201  Change in Transporter of: Oli Casinghead Gas   Condensate    ND LEASE  Well No.   Pool Name, Including Formation 4   BASIN DAKOTA (PROI  : 1850   Feel From The   Lin 26N   Range   SW   NI  PORTER OF OIL AND NATURAL GAS Or Condensate   3535_E   Pead Gas   or Dry Gas   Address (Giv 20RATION   P. O. BV  PORATION   P. O. BV  CORATION   P. O. BV  CORATION   P. O. BV  CORATION   P. O. BV  CORATION   Total Depth  Total Depth  Name of Producing Formation   Top Oil/Gas  TUBING, CASING AND CEMENTI  CASING & TUBING SIZE    TUBING CASING AND CEMENTI  CASING & TUBING SIZE    Tubing Pressure   Casing Press  Tubing Pressure   Casing Fress  Line   Casing Press  Tubing Pressure   Casing Fress  Length of Year   Bibls. Condense    Tubing Pressure (Sint-in)   Casing Fress  ATE OF COMPLIANCE   ations of the Oil Conservation   that the information given above   knowledge and bedief.   Date  Admin   Supervisor   Title   303-830-4280   Title    Title	OLORADO 80201  Change in Transporter of: Oli Dry Gas Casinghead Gas Condensate  ND LEASE  Well No. Pool Name, Including Formation BASIN DAKOTA (PRORATED GAS)  1850  Feet From The SL Line and SASIN CASS (Give address to we show and the condensate Condens	OLORADO 80201  Change in Transporter of:  Chinge in Transporter of:  Chinge in Transporter of:  Chinge in Transporter of:  Change	OLORADO 80201  Change in Transponter of:  OLI Well in Cas Well in Transponter in Table in Transponter in Tubing Depth  TUBING, CASING AND CEMENTING REPORT In Tubing Depth  TUBING, CASING AND CEMENTING REPORT In Tubing Depth  TUBING, CASING AND CEMENTING REPORT In Tubing Depth  TUBING, CASING AND CEMENTING REPORT In Tubing Depth  TUBING, CASING AND CEMENTING REPORT In Tubing Depth  TUBING, CASING AND CEMENTING REPORT In Tubing Depth  TUBING, CASING AND CEMENTING REPORT In Tubing Depth  TUBING, CASING AND CEMENTING REPORT IN Tubing Pressure  OLI CON. DIV.  OLI CON. DIV.  OLI CONSERVATION IN Tubing Pressure (Shut-in)  OLI CONSERVATION IN Tubing Pressure (Shut-in)  OLI CONSERVATION IN Tubing Pressure (Shut-in)  ATE OF COMPLIANCE  ALGARIA SUpervisor  Tubing Pressure (Shut-in)  OLI CONSERVATION IN Tubing Pressure (Shut-in)  OLI CONSERVATION IN Tubing Pressure (Shut-in)  OLI CONSERVATION IN Tubing Pressure (Shut-in)  OLI CONSERVATION IN Tubing Pressure (Shut-in)  OLI CONSERVATION IN Tubing Pressure (Shut-in)  OLI CONSERVATION IN Tubing Pressure (Shut-in)  OLI CONSERVATION IN Tubing Pressure (Shut-in)  OLI CONSERVATION IN Tubing Pressure (Shut-in)  OLI CONSERVATION IN Tubing Pressure (Shut-in)  OLI CONSERVATION IN Tubing Supervisor  Tubing Pressure (Shut-in)  OLI CONSERVATION IN Tubing Pre	Change in Transporter of:

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.

District.1
1625 N. French Dr., Hobbs, NM 88240
District.II
1301 W. Grand Avenue, Artesia, NM 88210
District.III
1000 Rio Brazos Road, Aztec, NM 87410
District.IV
1220 S. St. Francis Dr., Santa Fe, NM 87505

# State of New Mexico Energy Minerals and Natural Resources

Santa Fe, NM 87505

Oil Conservation Division 1220 South St. Francis Dr. March 19, 2001 Submit 1 copy of the final affected

Form C-104B

Submit 1 copy of the final affected wells list along with 1 copy of this form per number of wells on that list to appropriate District Office

## **Change of Operator Name**

OGRID: _ Effective Date: _	000778 12/31/2001			
Previous Oper	rator Name and Informa	tion: N	ew Operațo	or Name and Information:
Address: _ Address: _	Amoco Production Com P.O. Box 3092  Houston, Texas 772		Address: Address:	P.O. Box 3092  Houston, Texas 77253
Signature:	the rules of the Oil Conservanched list of wells is true and ached list of wells is true and ary Corley  nior Regulatory Specialist  /10/2001 Phone: 28	d complete to the best		with and that the information given on edge and belief.
			NMOC	D Approval
A. n.		Signature:	- <del></del>	27€
		Printed Name:	SUPE	RVISOR DISTRICT #3
		District:		JAN 2 2 2002
		Date:		,

District 1
1625 N. French Dr., Hobbs, NM 88240
District II
811 South First, Artesia, NM 88210
District III
1000 Rio Brazos Road, Aztec, NM 87410
District IV
2040 South Pacheco, Santa Fe, NM 87505

State of New Mexico Energy Minerals and Natural Resources

Form C-104A Submit to appropriate District Office

Oil Conservation Division 2040 South Pacheco Santa Fe, NM 87505

## **Change of Operator**

Previo	ous Operator Information:	New Operator Information:				
		Effective Date	January 1, 2004			
OGRID:	000778	New Ogrid	222374			
Name:	BP America Production Company	New Name	CDX Rio, LLC			
Address:	P.O. Bxo 3092	Address				
Address:		Address				
City, State, Zip:	Houston, TX 77253-3092	City, State, Zip	: Farmington, NM 87401			
Signature: Printed name: En	roduction Accounting Spec. Opera	s true and complete — ns to n	to the best of my knowledge and belief.			
Previous operator	complete below:	· , . ·	NMOCD Approval			
_			· _			
Previous Operator:	3P America Production Company	Signature:	775			
**.*	,,		SUPERVISOR DISTRICT #3			
Previous OGRID:	000778	Printed Name:				
Signature:	Cherry Hlava	District:	FEB 1 7 2004			
·	•					