



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

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

October 13, 1999

Raptor Resources, Inc.
Attention: Bill R. Keathly
901 Rio Grande
Austin, Texas 78701

RE: Administrative application for an unorthodox infill Jalmat gas well location for the existing State "A" A/C-1 Well No. 74 (**API No. 30-025-09348**), located 1980 feet from the North line and 660 feet from the West line (Unit E) of Section 13, Township 23 South, Range 36 East, NMPM, Jalmat Gas Pool, Lea County, New Mexico.

Dear Mr. Keathly:

I am returning the subject application as incomplete. The information provided as to the size and configuration of the existing gas spacing and proration unit (480 acres comprising the N/2 and SW/4 of Section 13) does not correspond to our records, which indicates the existence of a 640-acre unit that comprises the N/2 and SW/4 of Section 13 and the NE/4 of Section 14, both in Township 23 South, Range 36 East, NMPM, Lea County, New Mexico. Attached are copies of Division Orders No. R-9073 and R-9073-A and Division Administrative Orders NSL-2874, NSL-2874-A, NSL-2874-B (SD), and NSL-2874-C (SD).

Sincerely,

A handwritten signature in black ink, appearing to read "Michael E. Stogner", written over a horizontal line.

Michael E. Stogner
Chief Hearing Officer/Engineer

MES/kv

cc: New Mexico Oil Conservation Division - Hobbs
New Mexico State Land Office - Santa Fe
Kathy Valdes - OCD, Santa Fe

RAPTOR RESOURCES, INC.

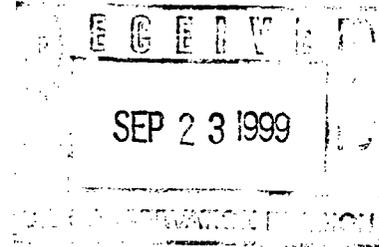
901 Rio Grande

Austin, Texas 78701

(512) 478-4427

September 14, 1999

Mr. Michael Stogner
New Mexico Oil Conservation Division
2040 Pacheo
Santa Fe, New Mexico 87504



RE: Application for Unorthodox Gas Well Locations and Simultaneous Dedication
Jalmat, Tansil Yts 7 Rvrs (Pro Gas)
1980' FNL and 660' FWL
Section 13, T 23S, R 36E (E)
Lea County, New Mexico

Dear Mr. Stogner,

Raptor Resources, Inc. respectfully requests your approval of this administrative application for the subject Unorthodox Gas Well Location and Simultaneous Dedication.

Raptor Resources, Inc. is planning to re-complete it's State "A" A/C 1 Well No. 74 in the Jalmat Tansil Yates 7-Rivers (Pro Gas Pool). It is our desire to also simultaneously dedicate the existing 480- acre Proration Unit assigned to our well nos.20, 22, 57, 66, 71, 75, 106 and 122 to all nine wells. Previously approved orders are R 9073, NSL 2874, NSL 2874A, NSL 2728, SE 6182, SE 6193, SE 6264, SE 6229, SE 6305 and SE 6233.

The offset operator plat shows that Conoco Inc, Arch Petroleum, Gruy Petroleum Management Co., Doyle Hartman, John H Hendrix Corp, Mobil Exploration & Production, Prospective Investment and Trading Co as the offset operators that could be affected by this unorthodox location. Please find enclosed evidence that they have been notified of this application.

In order to prevent waste, Raptor Resources, Inc. respectfully requests your approval of this application for an unorthodox location and simultaneous dedication. A copy of this letter and attachments has been furnished by Certified Mail to the offset operators as their notice of this application.

If you have any questions or require any further information concerning this application, please contact me at (915) 697-1609 or e-mail me at BRKeathly@juno.com.

Sincerely,

Bill R. Keathly
Regulatory Agent for Raptor Resources

Cc: Oil Conservation Division - Hobbs

State "A" A/C 1 # 74
Section 13, T-23S, R-36E, (E)
API # 30-025-09348
Lea County, New Mexico

RE: Application for Unorthodox Location

Notification of Offset Operators:

Conoco Inc
10 Desta Dr., Ste 100W
Midland, TX 79705

Arch Petroleum Inc
P.O. Box 10340
Midland, TX 79702

Gruy Petroleum Management Co.
P.O. Box 140907
Irving, TX 75014

Doyle Hartman
P.O. Box 10426
Midland, TX 79702

John H Hendrix Corp
P.O. Box 3040
Midland, TX 79702

Mobil Exploration and Production
P.O. Box 633
Midland, TX 79702

Prospective Investment and Trading Co.
P.O. Box 702320
Tulsa, OK 74170

Please find attached evidence that the above listed companies have been sent copies of the Non-standard location request.

Z 444 966 569

US Postal Service
Receipt for Certified Mail
No Insurance Coverage Provided.
Do not use for International Mail (See reverse)

PS Form 3800 April 1995 State A A/C 1 # 74

Sent to	Comco Inc.
Street & Number	10 Dosta Dr Ste K0W
Post Office, State, & ZIP Code	Midland, TX 79705
Postage	\$
Certified Fee	\$
Special Delivery Fee	\$
Restricted Delivery Fee	\$
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 320
Postmark or Date	

Z 444 966 585

US Postal Service
Receipt for Certified Mail
No Insurance Coverage Provided.
Do not use for International Mail (See reverse)

PS Form 3800 April 1995 State A A/C 1 # 74

Sent to	Prospective Inv
Street & Number	Box 20320
Post Office, State, & ZIP Code	Midland, TX 79170
Postage	\$
Certified Fee	\$
Special Delivery Fee	\$
Restricted Delivery Fee	\$
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 320
Postmark or Date	

Z 444 966 584

US Postal Service
Receipt for Certified Mail
No Insurance Coverage Provided.
Do not use for International Mail (See reverse)

PS Form 3800 April 1995 State A A/C 1 # 74

Sent to	Mobil Expl. + Prod
Street & Number	Box 633
Post Office, State, & ZIP Code	Midland, TX 79702
Postage	\$
Certified Fee	\$
Special Delivery Fee	\$
Restricted Delivery Fee	\$
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 320
Postmark or Date	

Z 444 966 583

US Postal Service
Receipt for Certified Mail
No Insurance Coverage Provided.
Do not use for International Mail (See reverse)

PS Form 3800 April 1995 State A A/C 1 # 74

Sent to	John H. Hendrix Corp
Street & Number	Box 3040
Post Office, State, & ZIP Code	Midland, TX 79702
Postage	\$
Certified Fee	\$
Special Delivery Fee	\$
Restricted Delivery Fee	\$
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 320
Postmark or Date	

Z 444 966 582

US Postal Service
Receipt for Certified Mail
No Insurance Coverage Provided.
Do not use for International Mail (See reverse)

PS Form 3800 April 1995 State A A/C 1 # 74

Sent to	Doyle Hartman
Street & Number	Box 10420
Post Office, State, & ZIP Code	Midland, TX 79702
Postage	\$
Certified Fee	\$
Special Delivery Fee	\$
Restricted Delivery Fee	\$
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 320
Postmark or Date	

Z 444 966 581

US Postal Service
Receipt for Certified Mail

No Insurance Coverage Provided.
Do not use for International Mail (See reverse)

Sent to	Gray Rd. Mgmt. Co.
Street & Number	Box 140707
Post Office, State, & ZIP Code	Irving, TX 75014
Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 320
Postmark or Date	

PS Form 3800, April 1995

Z 444 966 570

US Postal Service
Receipt for Certified Mail

No Insurance Coverage Provided.
Do not use for International Mail (See reverse)

Sent to	Arch Petro. Inc.
Street & Number	P.O. Box 10340
Post Office, State, & ZIP Code	Midland, TX 79702
Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 320
Postmark or Date	

PS Form 3800, April 1995

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-101
Revised February 10, 1994
Instructions on back
Submit to Appropriate District Office
State Lease - 6 Copies
Fee Lease - 5 Copies

AMENDED REPORT

APPLICATION FOR PERMIT TO DRILL, RE-ENTER, DEEPEN, PLUGBACK, OR ADD A ZONE

Operator Name and Address. Raptor Resources, Inc. 901 Rio Grande Austin, Tx. 78701		OGRID No_ 162791
		API Number 30 - 025-09348
Property Code 24669	Property Name State 'A' A/C 1	Well No. 74

' Surface Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
E	13	23S	36E		1980	North	660	West	Lea

s Proposed Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
Proposed Pool 1 Jalmat, Tnsl, Yts, 7-Rivers (Pro Gas) (79240)					Proposed Pool 2				

Work Type Code R 16 Multiple	Well Type Code G 17 Proposed Depth	Cable/Rotary R 18 Formation Yates	Lease type Code S 19 Contractor	14 Ground Level Elevation 20 Spud Date
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21 Proposed Casing and Cement Program

Hole Size	Casing Size	Casing weight/foot	Setting Depth	Sacks of Cement	Estimated TOC

Describe the proposed program. If this application is to DEEPEN or PLUG BACK give the data on the present productive zone and proposed new productive zone. Describe the blowout prevention program, if any. Use additional sheets if necessary.
Current Status: Temporary Abandon in the LanglieMattix 7 Rvrs-Q-GB

PROPOSED OPERATIONS

1. Set CIBP above the Langlie Mattix perforations
2. Perf the Yates @ 2935-3190
3. Acidize
4. Frac
5. POP

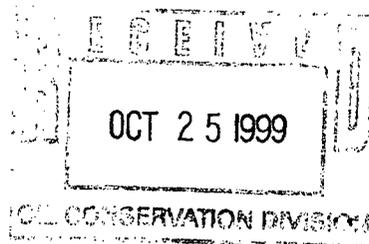
23 I hereby certify that the information given above is true and complete to the best of my knowledge and belief.		OIL CONSERVATION DIVISION	
Signature: <i>Bill R. Keathly</i>			
Printed name: Bill R. Keathly		Approved by:	
Title: R egulatory Agent for Raptor		Title:	
Date: 9-14-99	Phone: (915) 697-1609	Approval Date:	Expiration Date:
		Conditions of Approval: Attached	

RAPTOR RESOURCES, INC.

901 Rio Grande

Austin, Texas 78701

(512) 478-4427



October 20, 1999

Mr. Michael Stogner
New Mexico Oil Conservation Division
2040 Pacheo
Santa Fe, New Mexico 87504

RE: Application for Unorthodox Gas Well Locations and Simultaneous Dedication
Jalmat, Tansil Yts 7 Rvrs (Pro Gas)
1980' FNL and 660' FWL
Section 13, T 23S, R 36E (E)
Lea County, New Mexico

Dear Mr. Stogner,

Raptor Resources, Inc. respectfully requests your approval of this administrative application for the subject Unorthodox Gas Well Location and Simultaneous Dedication.

Raptor Resources, Inc. is planning to re-complete it's State "A" A/C 1 Well No. 74 in the Jalmat Tansil Yates 7-Rivers (Pro Gas Pool). It is our desire to also simultaneously dedicate the existing 640- acre Proration Unit that comprises the N/2 and the SW/4 of Section 13 and the NE/4 of Section 14, both in Township 23 South, Range 36 East, assigned to our well nos. 13, 76, 77, 78, 20, 22, 57, 66, 71, 75, 106 and 122 to all thirteen wells. Previously approved orders are R 9073, NSL 2874, NSL 2874A, NSL 2728, SE 6182, SE 6193, SE 6264, SE 6229, SE 6305 and SE 6233.

The offset operator plat shows that Conoco Inc, Arch Petroleum, Gruy Petroleum Management Co., Doyle Hartman, John H Hendrix Corp, Mobil Exploration & Production, Prospective Investment and Trading Co as the offset operators that could be affected by this unorthodox location. Please find enclosed evidence that they have been notified of this application.

In order to prevent waste, Raptor Resources, Inc. respectfully requests your approval of this application for an unorthodox location and simultaneous dedication. A copy of this letter and attachments has been furnished by Certified Mail to the offset operators as their notice of this application.

If you have any questions or require any further information concerning this application, please contact me at (915) 697-1609 or e-mail me at BRKeathly@juno.com.

Sincerely,

Bill R. Keathly
Regulatory Agent for Raptor Resources

Cc: Oil Conservation Division - Hobbs

State "A" A/C 1 # 74
Section 13, T-23S, R-36E, (E)
API # 30-025-09348
Lea County, New Mexico

RE: Application for Unorthodox Location

Notification of Offset Operators:

Conoco Inc
10 Desta Dr., Ste 100W
Midland, TX 79705

Arch Petroleum Inc
P.O. Box 10340
Midland, TX 79702

Gruy Petroleum Management Co.
P.O. Box 140907
Irving, TX 75014

Doyle Hartman
P.O. Box 10426
Midland, TX 79702

John H Hendrix Corp
P.O. Box 3040
Midland, TX 79702

Mobil Exploration and Production
P.O. Box 633
Midland, TX 79702

Prospective Investment and Trading Co.
P.O. Box 702320
Tulsa, OK 74170

Please find attached evidence that the above listed companies have been sent copies of the Non-standard location request.

Z 444 966 637

US Postal Service
Receipt for Certified Mail

No Insurance Coverage Provided.

Do not use for International Mail (See reverse)

Sent to *Prospective Inv + Trading*
 Street & Number *Box 722320*
 Post Office, State, & ZIP Code *Tulsa, OK 74170*

Postage \$

Certified Fee

Special Delivery Fee

Restricted Delivery Fee

Return Receipt Showing to Whom & Date Delivered

Return Receipt Showing to Whom, Date, & Addressee's Address

TOTAL Postage & Fees \$ *3.20*

Postmark or Date *21 OCT 1999*

PS Form 3800, April 1995

State A AK 1 # 74

Z 444 966 636

US Postal Service
Receipt for Certified Mail

No Insurance Coverage Provided.

Do not use for International Mail (See reverse)

Sent to *Mobil Exp + Prod.*
 Street & Number *Box 433*
 Post Office, State, & ZIP Code *Mt Pleasant, TX 77702*

Postage \$

Certified Fee

Special Delivery Fee

Restricted Delivery Fee

Return Receipt Showing to Whom & Date Delivered

Return Receipt Showing to Whom, Date, & Addressee's Address

TOTAL Postage & Fees \$ *2.00*

Postmark or Date *21 OCT 1999*

PS Form 3800, April 1995

State A AK 1 # 74

Z 444 966 635

US Postal Service
Receipt for Certified Mail

No Insurance Coverage Provided.

Do not use for International Mail (See reverse)

Sent to *John H. Hendrix Corp.*
 Street & Number *Box 3040*
 Post Office, State, & ZIP Code *Mt Pleasant, TX 77702*

Postage \$

Certified Fee

Special Delivery Fee

Restricted Delivery Fee

Return Receipt Showing to Whom & Date Delivered

Return Receipt Showing to Whom, Date, & Addressee's Address

TOTAL Postage & Fees \$ *1.75*

Postmark or Date *21 OCT 1999*

PS Form 3800, April 1995

State A AK 1 # 74

PS Form 3800, April 1995 State A AK 1 # 74

Sent to *Doyle Hartmann*
 Street & Number *Box 6424*
 Post Office, State, & ZIP Code *Mt Pleasant, TX 77702*

Postage \$

Certified Fee

Special Delivery Fee

Restricted Delivery Fee

Return Receipt Showing to Whom & Date Delivered

Return Receipt Showing to Whom, Date, & Addressee's Address

TOTAL Postage & Fees \$ *3.20*

Postmark or Date *21 OCT 1999*

US Postal Service
Receipt for Certified Mail

No Insurance Coverage Provided.
Do not use for International Mail (See reverse)

Z 444 966 634

PS Form 3800, April 1995

State A AK 1 # 74

Z 444 966 533

US Postal Service
Receipt for Certified Mail

No Insurance Coverage Provided.
Do not use for International Mail (See reverse)

PS Form 3800, April 1995 *State A A/C 1 # 74*

Sent to	<i>Gray Retra Support. Co.</i>
Street & Number	<i>Bx 140707</i>
Post Office, State, & ZIP Code	<i>Irving, TX 75014</i>
Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ <i>320</i>
Postmark or Date	<i>APR 21 1999</i>

13PS

Z 444 966 531

US Postal Service
Receipt for Certified Mail

No Insurance Coverage Provided.
Do not use for International Mail (See reverse)

PS Form 3800, April 1995 *State A A/C 1 # 74*

Sent to	<i>Concess Inc.</i>
Street & Number	<i>10 Delta Dr. Ste 600</i>
Post Office, State, & ZIP Code	<i>Milwaukee, WI 53206</i>
Postage	\$ <i>55</i>
Certified Fee	<i>140</i>
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ <i>320</i>
Postmark or Date	<i>APR 21 1999</i>

13PS

Z 444 966 532

US Postal Service
Receipt for Certified Mail

No Insurance Coverage Provided.
Do not use for International Mail (See reverse)

PS Form 3800, April 1995 *State A A/C 1 # 74*

Sent to	<i>Arch Petre. Ins.</i>
Street & Number	<i>Bx 1340</i>
Post Office, State, & ZIP Code	<i>Midland, TX 79702</i>
Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ <i>320</i>
Postmark or Date	<i>APR 21 1999</i>

13PS

Z 444 966 569

US Postal Service
Receipt for Certified Mail

No Insurance Coverage Provided.
Do not use for International Mail (See reverse)

Sent to	Comco Inc.
Street & Number	10 Dosta Dr Ste K0W
Post Office, State, & ZIP Code	Midland, TX 79705
Postage	\$
Certified Fee	\$
Special Delivery Fee	\$
Restricted Delivery Fee	\$
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 320
Postmark or Date	

PS Form 3800, April 1995 State A A/C1 #74

Z 444 966 585

US Postal Service
Receipt for Certified Mail

No Insurance Coverage Provided.
Do not use for International Mail (See reverse)

Sent to	Prospective Inv
Street & Number	Box 202320
Post Office, State, & ZIP Code	Midland, TX 79702
Postage	\$
Certified Fee	\$
Special Delivery Fee	\$
Restricted Delivery Fee	\$
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 320
Postmark or Date	

PS Form 3800, April 1995 State X A/C1 #74

Z 444 966 585

US Postal Service
Receipt for Certified Mail

No Insurance Coverage Provided.
Do not use for International Mail (See reverse)

Sent to	Mobil Expl. + Prod
Street & Number	Box 633
Post Office, State, & ZIP Code	Midland, TX 79702
Postage	\$
Certified Fee	\$
Special Delivery Fee	\$
Restricted Delivery Fee	\$
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 320
Postmark or Date	

PS Form 3800, April 1995 State A A/C1 #74

Z 444 966 582

US Postal Service
Receipt for Certified Mail

No Insurance Coverage Provided.
Do not use for International Mail (See reverse)

Sent to

Sent to	Doyle Hartman
Street & Number	Box 10426
Post Office, State, & ZIP Code	Midland, TX 79702
Postage	\$
Certified Fee	\$
Special Delivery Fee	\$
Restricted Delivery Fee	\$
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 320
Postmark or Date	

PS Form 3800, April 1995 State A A/C1 #74

Z 444 966 583

US Postal Service
Receipt for Certified Mail

No Insurance Coverage Provided.
Do not use for International Mail (See reverse)

Sent to	John H. Hendrix Corp
Street & Number	Box 3040
Post Office, State, & ZIP Code	Midland, TX 79702
Postage	\$
Certified Fee	\$
Special Delivery Fee	\$
Restricted Delivery Fee	\$
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 320
Postmark or Date	

PS Form 3800, April 1995 State A A/C1 #74

Z 444 966 570

US Postal Service
Receipt for Certified Mail

No Insurance Coverage Provided.
Do not use for International Mail (See reverse)

PS Form 3800, April 1995 State A A/C 1 # 74

Sent to	Arch Petro. Inc.
Street & Number	P.O. Box 10340
Post Office, State, & ZIP Code	Midland, TX 79702
Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.20
Postmark or Date	

Z 444 966 581

US Postal Service
Receipt for Certified Mail

No Insurance Coverage Provided.
Do not use for International Mail (See reverse)

PS Form 3800, April 1995 State A A/C 1 # 74

Sent to	Gray Petro. Mgmt. Co.
Street & Number	Box 140907
Post Office, State, & ZIP Code	Irving, TX 75014
Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.20
Postmark or Date	

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-101
Revised February 10, 1994
Instructions on back
Submit to Appropriate District Office
State Lease - 6 Copies
Fee Lease - 5 Copies

AMENDED REPORT

APPLICATION FOR PERMIT TO DRILL, RE-ENTER, DEEPEN, PLUGBACK, OR ADD A ZONE

Operator Name and Address. Raptor Resources, Inc. 901 Rio Grande Austin, Tx. 78701		OGRID No_ 162791
		API Number 30 - 0 25-09348
Property Code 24669	Property Name State 'A' A/C 1	Well No. 74

Surface Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
E	13	23S	36E		1980	North	660	West	Lea

Proposed Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
Proposed Pool 1 Jalmat, Tnsl, Yts, 7-Rivers (Pro Gas) (79240)					Proposed Pool 2				

Work Type Code	Well Type Code	Cable/Rotary	Lease type Code	14 Ground Level Elevation
P	G	R	S	
16 Multiple	17 Proposed Depth	18 Formation Tnsl/Yates/7 Rvrs	19 Contractor	20 Spud Date

Proposed Casing and Cement Program

Hole Size	Casing Size	Casing weight/foot	Setting Depth	Sacks of Cement	Estimated TOC

Describe the proposed program. If this application is to DEEPEN or PLUG BACK give the data on the present productive zone and proposed new productive zone. Describe the blowout prevention program, if any. Use additional sheets if necessary.
Current Status: Temporary Abandoned in the Langlie Mattix 7 Rvrs-Qn-GB

PROPOSED OPERATIONS

- 1 Set CIBP above the Langlie Mattix perms
2. Perf the Yates @ 2593-3190
3. Acidize
4. Frac
5. POP

23 I hereby certify that the information given above is true and complete to the best of my knowledge and belief. Signature: <i>Bill R. Keathly</i>		OIL CONSERVATION DIVISION	
Printed name: Bill R. Keathly			
Title: R regulatory Agent for Raptor		Title:	
Date: 10-20-99	Phone: (915) 697-1609	Approval Date:	Expiration Date:
		Conditions of Approval: Attached	

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

Revised February 21, 1994
instructions on back
Submit to Appropriate District Office
State Lease - 4 Copies
Fee Lease - 3 Copies

AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

API Number 30-025-09348		2 Pool Code 79240		3 Pool Name Jalmat, Tnsl, Yts, 7-Rivers (Pro Gas)	
4 Property Code 24669		5 Property Name State 'A' A/C 1			6 Well Number 74
7 OGRID No. 162791		8 Operator Name Raptor Resources, Inc,			9 Elevation

10 Surface Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
E	13	23S	36E		1980	North	660	West	Lea

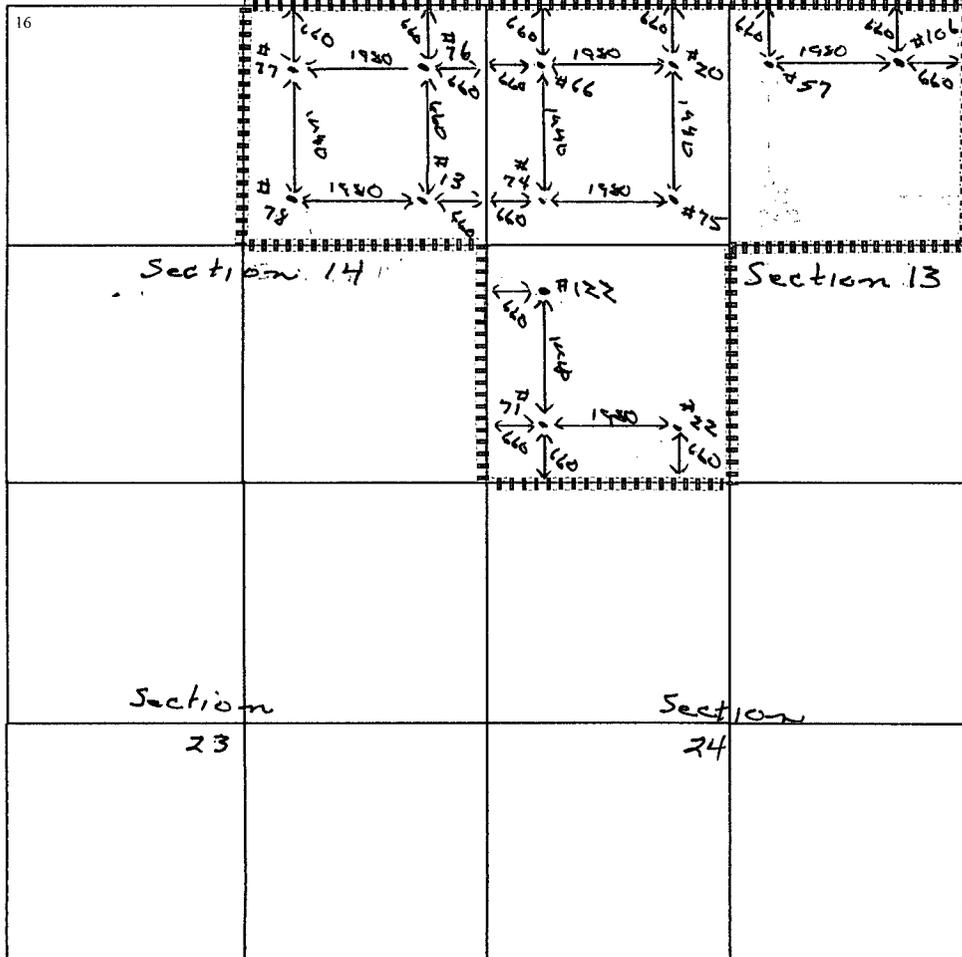
11 Bottom Hole Location If Different From Surface

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

12 Dedicated Acres	13 Joint or Infill	14 Consolidation Code	15 Order No.

Applied For

NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION



17 OPERATOR CERTIFICATION

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief

Bill R. Keathly
Signature

Bill R. Keathly
Printed Name

Regulatory Agent - Raptor
Title

10-20-99
Date

18 SURVEYOR CERTIFICATION

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.

Date of Survey
Signature and Seal of Professional Surveyor:

Certificate Number

Submit 3 Copies
to Approver's
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

OIL CONSERVATION DIVISION

2040 Pacheco St.
Santa Fe, NM 87505

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

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

WELL API NO.	30 025 09348
5. Indicate Type of Lease	STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.	011792
7. Lease Name or Unit Agreement Name	STATE A A/C 1
8. Well No.	74
9. Pool name or Wildcat	LANGLIE MATTIX 7 RVRS QN GB
10. Elevation (Show whether DF, RKB, RT, GR, etc.)	

SUNDRY NOTICES AND REPORTS ON WELLS
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well: OIL WELL GAS WELL OTHER

2. Name of Operator: RAPTOR RESOURCES, INC. 162791

3. Address of Operator: P.O. BOX 160430, AUSTIN, TX 78716

4. Well Location: Unit Letter E : 1980 Feet From The N Line and 660 Feet From The W Line
Section 13 Township 23S Range 36E NMPM LEA County

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input checked="" type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>		CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: <input type="checkbox"/>	

12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

PLAN TO ADD ADDITIONAL PERFS THROUGH REMEDIAL WORK IN CURRENT POOL.
ADDITIONAL PERFS BEING (3184 - 3590).
REMEDIAL WORK SCHEDULED TO TAKE PLACE DURING JUNE-AUGUST 1999.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.
SIGNATURE Russell Douglass TITLE PRESIDENT DATE 5-25-99
TYPE OR PRINT NAME RUSSELL DOUGLASS TELEPHONE NO. (512) 478-442

(This space for State Use)
APPROVED BY Chris Williams TITLE DISTRICT SUPERVISOR DATE JUN 25 1999
CONDITIONS OF APPROVAL IF ANY:

NSL-2874D(SD)



STATE OF NEW MEXICO
ENERGY, MINERALS AND NATURAL RESOURCES DEPARTMENT

OIL CONSERVATION DIVISION
HOBBS DISTRICT OFFICE

10/4/99

POST OFFICE BOX 1980
HOBBS, NEW MEXICO 88241-1980
(505) 393-6161

GOVERNOR

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

RE: Proposed:

MC	_____
DHC	_____
NSL	<u> X </u> _____
NSP	<u> X </u> _____ SD
SWD	_____
WFX	_____
PMX	_____

Gentlemen:

I have examined the application for the:

Reptor Resources Inc State A A/c-1 # 74-E-13-23s-36e
 Operator Lease & Well No. Unit S-T-R API 30-025-09348

and my recommendations are as follows:

OK

Yours very truly,

Chris Williams
Supervisor, District 1

/ed

District I
 PO Box 1980, Hobbs, NM 88241-1980
 District II
 811 South First, Artesia, NM 88210
 District III
 1000 Rio Brazos Rd., Aztec, NM 87410
 District IV
 2040 South Pacheco, Santa Fe, NM 87505

State of New Mexico
 Energy, Minerals & Natural Resources Department

Form C-104
 Revised October 18, 1994
 Instructions on back
 Submit to Appropriate District Office
 5 Copies

OIL CONSERVATION DIVISION
 2040 South Pacheco
 Santa Fe, NM 87505

AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

¹ Operator name and Address RAPTOR RESOURCES, INC. P.O. BOX 160430 AUSTIN, TX 78716		² OGRID Number 162791
		CH ³ Reason for Filing Code 9/1/99
⁴ API Number 30-02509348	⁵ Pool Name Langlie Mathix 7 Rows Queen Graybug	⁶ Pool Code 37240
⁷ Property Code 24669	⁸ Property Name State A Ac. 1	⁹ Well Number 74

II. ¹⁰ Surface Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South Line	Feet from the	East/West line	County
E	13	23S	36E		1980	N	660	W	LEA

¹¹ Bottom Hole Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	LEA	County
E	13	23S	36E		1980	N	660	W		LEA

¹² Lse Code ST	¹³ Producing Method Code TA	¹⁴ Gas Connection Date	¹⁵ C-129 Permit Number	¹⁶ C-129 Effective Date 3/1/99	¹⁷ C-129 Expiration Date
------------------------------	---	-----------------------------------	-----------------------------------	--	-------------------------------------

III. Oil and Gas Transporters

¹⁸ Transporter OGRID	¹⁹ Transporter Name and Address	²⁰ POD	²¹ O/G	²² POD ULSTR Location and Description
34053	PLAINS MARKETING, L. P.	2810144	0	
20004	SID RICHARDSON GASOLINE CO			

IV. Produced Water

²³ POD	²⁴ POD ULSTR Location and Description
-------------------	--

V. Well Completion Data

²⁵ Spud Date	²⁶ Ready Date	²⁷ TD	²⁸ PBT	²⁹ Perforations	³⁰ DHC, DC, MC
³¹ Hole Size	³² Casing & Tubing Size	³³ Depth Set	³⁴ Sacks Cement		

VI. Well Test Data

³⁵ Date New Oil	³⁶ Gas Delivery Date	³⁷ Test Date	³⁸ Test Length	³⁹ Tbg. Pressure	⁴⁰ Csg. Pressure
⁴¹ Choke Size	⁴² Oil	⁴³ Water	⁴⁴ Gas	⁴⁵ AOF	⁴⁶ 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: *Russell Douglass*
 Printed name: RUSSELL DOUGLASS
 Title: PRESIDENT
 Date: 4/22/99 Phone: (512) 478-4427

OIL CONSERVATION DIVISION
 Approved by: *Chris Williams*
 Title: JUN 16 1999 DISTRICT 1 SUPERVISOR
 Approval Date:

⁴⁷ If this is a change of operator fill in the OGRID number and name of the previous operator
T. Mark Tisdale 025706 T. Mark Tisdale Vice President 4-7-99
 Previous Operator Signature Printed Name Title Date

New Mexico Oil Conservation Division
 C-104 Instructions

IF THIS IS AN AMENDED REPORT, CHECK THE BOX LABELED "AMENDED REPORT" AT THE TOP OF THIS DOCUMENT

Report all gas volumes at 15.025 PSIA at 60°. Report all oil volumes to the nearest whole barrel.

A request for allowable for a newly drilled or deepened well must be

accompanied by a tabulation of the deviation tests conducted in accordance with Rule 111.

All sections of this form must be filled out for allowable requests on new and recompleted wells.

Fill out only sections I, II, III, IV, and the operator certifications for

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

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

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

OIL CONSERVATION DIVISION

2040 Pacheco St.
Santa Fe, NM 87505

WELL API NO. 30 025 09348
Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
State Oil & Gas Lease No.

SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)	
Type of Well: OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	Lease Name or Unit Agreement Name STATE A/C 1
Name of Operator CLAYTON WILLIAMS ENERGY, INC.	Well No. 74
Address of Operator SIX DESTA DRIVE, SUITE 3000, MIDLAND, TEXAS 79705	Pool name or Wildcat LANGLIE MATTIX 7 RVRS QUEEN GB
Well Location Unit Letter <u>E</u> : <u>1980</u> Feet From The <u>NORTH</u> Line and <u>660</u> Feet From The <u>WEST</u> Line Section <u>13</u> Township <u>23S</u> Range <u>36E</u> NMPM <u>LEA</u> County	
Elevation (Show whether DF, RKB, RT, GR, etc.) 3401' GR	

11

Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	
OTHER: _____ <input type="checkbox"/>	

SUBSEQUENT REPORT OF:

REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ANBANDONMENT <input type="checkbox"/>
CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER: TEMPORARILY ABANDON <input type="checkbox"/>	

Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

- 1) LOADED 7" CASING WITH FIELD SALT WATER.
- 2) PRESSURE TESTED CASING FROM SURFACE TO 3590' TO 530 PSI FOR 30 MINUTES.
- 3) TEMPORARILY ABANDONED WELLBORE FOR FUTURE USE.

This Approval of Temporary Abandonment Expires 1/5/2004

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

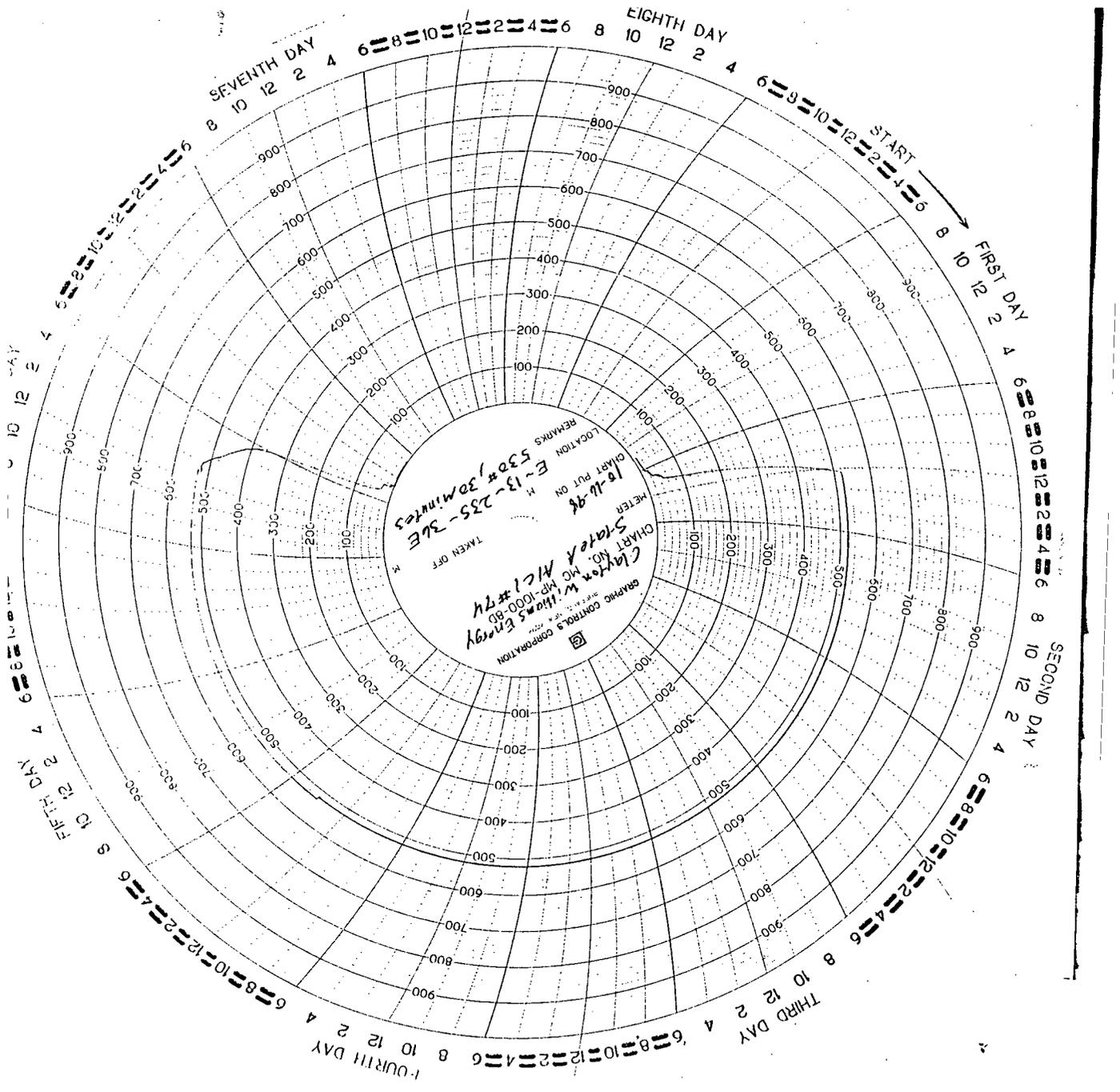
SIGNATURE Marilyn Martin TITLE REGULATORY ANALYST DATE 10-23-98

TYPE OR PRINT NAME MARILYN MARTIN TELEPHONE NO. 915-682-6324

(This space for State Use)

APPROVED BY Chris Williams TITLE DISTRICT 1 SUPERVISOR DATE JAN 05 1999

CONDITIONS OF APPROVAL, IF ANY:



GRAPHIC CONTROL'S CORPORATION
Clayton Williams Energy
CHART NO. MP-1000-BD
State # MI1#74
METER
Chart Put On
E-13-235-36E
530#, 30 minutes
LOCATION
REMARKS
TAKEN OFF

SEVENTH DAY
8 10 12 2 4

EIGHTH DAY
6 8 10 12 2 4 6 8 10 12 2 4

START

FIRST DAY
8 10 12 2 4

SECOND DAY
6 8 10 12 2 4 6 8 10 12 2 4

THIRD DAY
4 6 8 10 12 2 4 6 8 10 12 2 4

FOURTH DAY
4 6 8 10 12 2 4 6 8 10 12 2 4

FIFTH DAY
4 6 8 10 12 2 4 6 8 10 12 2 4

SIXTH DAY
4 6 8 10 12 2 4 6 8 10 12 2 4

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

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

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

OIL CONSERVATION DIVISION

2040 Pacheco St.
Santa Fe, NM 87505

SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)		WELL API NO. 30 025 09348
1 Type of Well: OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2 Name of Operator CLAYTON WILLIAMS ENERGY, INC.		6 State Oil & Gas Lease No.
3 Address of Operator SIX DESTA DRIVE, SUITE 3000, MIDLAND, TEXAS 79705		7 Lease Name or Unit Agreement Name STATE A /C 1
4 Well Location Unit Letter <u> E </u> : <u> 1980 </u> Feet From The <u> NORTH </u> Line and <u> 660 </u> Feet From The <u> WEST </u> Line Section <u> 13 </u> Township <u> 23S </u> Range <u> 36E </u> NMPM <u> LEA </u> County		8 Well No. 74
5 Elevation (Show whether DF, RKB, RT, GR, etc.) 3401' GR		9 Pool name or Wildcat LANGLIE MATTIX 7 RVRS QUEEN GB

11 Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input checked="" type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> OTHER: _____ <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> PLUG AND ANBANDONMENT <input type="checkbox"/> CASING TEST AND CEMENT JOB <input type="checkbox"/> OTHER: _____ <input type="checkbox"/>

12 Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

ESTIMATED START DATE: 10/08/98

- 1) LOAD 7" CASING WITH FIELD SALT WATER. (CIBP SET AT 3590' W/35' CEMENT.)
- 2) PRESSURE TEST CASING FROM SURFACE TO 3590' TO 530 PSI FOR 30 MINUTES. (RECORD TEST ON CHART FOR OCD SUBSEQUENT REPORT.)
- 3) TEMPORARILY ABANDON WELLBORE FOR FUTURE USE.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Marilyn Martin TITLE REGULATORY ANALYST DATE 10-05-98

TYPE OR PRINT NAME MARILYN MARTIN TELEPHONE NO. 915-682-6324

(This space for State Use)

APPROVED BY Craig Williams DISTRICT 1 SUPERVISOR TITLE _____ DATE 10/22/98

CONDITIONS OF APPROVAL, IF ANY:

Submit 3 Copies to Appropriate District Office

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

OIL CONSERVATION DIVISION

DISTRICT I P.O. Box 1980, Hobbs, NM 88240

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

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

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

WELL API NO. 30 025 09348

5. Indicate Type of Lease STATE [X] FEE []

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name State A AC 1

8. Well No. 74

9. Pool name or Wildcat Langlie Mattix 7 Rvrs Queen BG

SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE 'APPLICATION FOR PERMIT' (FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well: OIL WELL [X] GAS WELL [] OTHER []

2. Name of Operator Clayton Williams Energy, Inc.

3. Address of Operator Six Desta Drive, Suite 3000 Midland, Texas 79705

4. Well Location Unit Letter E : 1980 Feet From The North Line and 660 Feet From The West Line Section 13 Township 23S Range 36E NMPM Lea County

10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3401' GR

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data. NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK [], PLUG AND ABANDON [], TEMPORARILY ABANDON [], CHANGE PLANS [], PULL OR ALTER CASING [], OTHER: []. SUBSEQUENT REPORT OF: REMEDIAL WORK [], ALTERING CASING [], COMMENCE DRILLING OPNS. [], PLUG AND ABANDONMENT [], CASING TEST AND CEMENT JOB [], OTHER: Temporarily Abandoned [X]

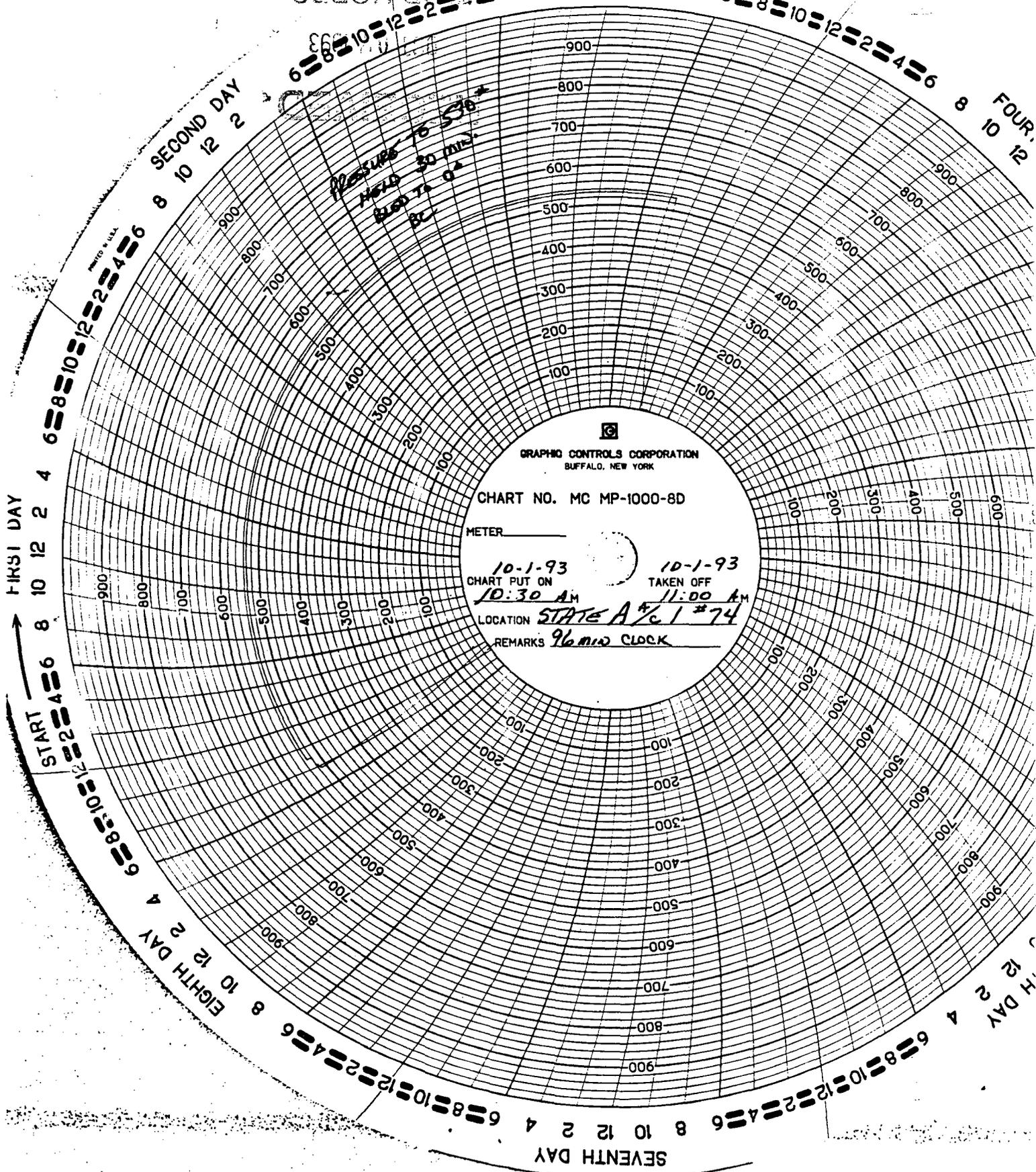
12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103. 10/01/93 1) Loaded 7" casing with field salt water. (CIBP set at 3590' w/35' cement.) 2) Pressure tested casing from surface to 3590' to 530 psi for 30 minutes. Chart Attached. 3) Temporarily abandoned wellbore for future use.

I hereby certify that the information above is true and complete to the best of my knowledge and belief. SIGNATURE [Signature] TITLE Petroleum Engineer DATE 10/06/93 TYPE OR PRINT NAME Greg Benton TELEPHONE NO. 682-6324

(This space for State Use) APPROVED BY [Signature] TITLE DISTRICT 1 SUPERVISOR DATE OCT 12 1993 CONDITIONS OF APPROVAL, IF ANY: This Approval of Temporary Abandonment Expires 10-1-98 ✓

OFFICE
HOBBS

10-1-93



SEVENTH DAY

EIGHTH DAY

FOURTH DAY

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

OIL CONSERVATION DIVISION

RECEIVED
P.O. Box 2088

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

Santa Fe, New Mexico 87504-2088

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

93 OCT 6 AM 9 13

WELL API NO. 30 025 09348
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.

SUNDRY NOTICES AND REPORTS ON WELLS
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well: OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER _____	7. Lease Name or Unit Agreement Name State A AC 1
2. Name of Operator Clayton Williams Energy, Inc.	8. Well No. 74
3. Address of Operator Six Desta Drive, Suite 3000 Midland, Texas 79705	9. Pool name or Wildcat Langlie Mattix 7 Rvrs Queen GB

4. Well Location
Unit Letter E : 1980 Feet From The North Line and 660 Feet From The West Line
Section 13 Township 23S Range 36E NMPM Lea County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
3401' GR

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input checked="" type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>		CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER: _____ <input type="checkbox"/>		OTHER: _____ <input type="checkbox"/>	

12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

Estimated Start Date: 09/30/93

- Load 7" casing with field salt water. (CIBP set at 3590' w/35' cement.)
- Pressure test casing from surface to 3590' to 500 psi for 30 minutes. (Record test on chart for OCD subsequent report.)
- Temporarily abandon wellbore for future use.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Greg Benton TITLE Petroleum Engineer DATE 09/27/93
TYPE OR PRINT NAME Greg Benton TELEPHONE NO. (915) 682-6324

(This space for State Use)

APPROVED BY [Signature] TITLE DISTRICT 1 SUPERVISOR DATE SEP 29 1993
CONDITIONS OF APPROVAL, IF ANY:

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

State of New Mexico
 Energy, Minerals and Natural Resources Department

Form C-104
 Revised 1-1-89
 See Instructions
 at Bottom of Page

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

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

RECEIVED
 1993 AUG 12 AM 8 47

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

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

I.

Operator Clayton Williams Energy, L.L.C. <i>Inc</i>	Well API No. 30-025-09348
Address Six Desta Drive, Suite 3000 Midland, Texas 79705	
Reason(s) for Filing (Check proper box) <input type="checkbox"/> New Well <input type="checkbox"/> Recompletion <input type="checkbox"/> Change in Operator <input checked="" type="checkbox"/> Other (Please explain) Change in Transporter of: <input type="checkbox"/> Oil <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Dry Gas <input type="checkbox"/> Condensate Change in Operator name only. Effective 04/07/93	
If change of operator give name and address of previous operator Clayton W. Williams, Jr., Inc.	

II. DESCRIPTION OF WELL AND LEASE TA

Lease Name State A AC 1	Well No. 74	Pool Name, including Formation Langlie Mattix 7 Rvrs Queen GB	Kind of Lease State, Federal, or Other	Lease No.
Location Unit Letter <u>E</u> : <u>1980</u> Feet From The <u>North</u> Line and <u>660</u> Feet From The <u>West</u> Line Section <u>13</u> Township <u>23S</u> Range <u>36E</u> , <u>NMPM</u> , Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Texas New Mexico Pipeline Company	Address (Give address to which approved copy of this form is to be sent) Box 42130 Houston, Texas 77242
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Xcel Gas Company	Address (Give address to which approved copy of this form is to be sent) 6 Desta Dr., Suite 5800 Midland, Texas 79705
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When?

If this production is commingled with that from any other lease or pool, give commingling order number: _____

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded	Date Compl. Ready to Prod.	Total Depth		P.B.T.D.				
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay		Tubing Depth				
Perforations		Depth Casing Shoe						
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET			SACKS CEMENT			

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours.)

Date First New Oil Run To Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas- MCF

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. OPERATOR CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Robin S. McCarley
 Signature
 Robin S. McCarley Production Analyst
 Printed Name Title
 04/01/93 (915) 682-6324
 Date Telephone No.

OIL CONSERVATION DIVISION

Date Approved JUL 27 1993

By *[Signature]*
 Geologist
 Title _____

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

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

Submit 3 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-104
Revised 1-1-89
See Instructions
Bottom of Page

OIL CONSERVATION DIVISION CONSERVATION DIVISION

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

RECEIVED

'91 JUL 22 AM 11 05

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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

I.

Operator Clayton W. Williams, Jr., Inc.	Well API No. 30-025-09348
Address Six Desta Drive, Suite 3000, Midland, Texas 79705	
Reason(s) for Filing (Check proper box) <input checked="" type="checkbox"/> Other (Please explain)	
New Well <input type="checkbox"/>	Change in Transporter of: Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> effective July 1, 1991
Recompletion <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Change in Operator <input checked="" type="checkbox"/>	
If change of operator give name and address of previous operator Hal J. Rasmussen Operating Inc., Six Desta Drive, Suite 2700, Midland, Texas 79705	

II. DESCRIPTION OF WELL AND LEASE TA

Lease Name State A A/C 1	Well No. 74	Pool Name, Including Formation Langlie Mattix Seven Rvs. Queen GB	Kind of Lease State, Federal or Free	Lease No.
Location Unit Letter <u>E</u> : <u>1980</u> Feet From The <u>North</u> Line and <u>660</u> Feet From The <u>West</u> Line Section <u>13</u> Township <u>23S</u> Range <u>36E</u> , <u>NMPM</u> , Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Texas New Mexico Pipeline Co.	Address (Give address to which approved copy of this form is to be sent) Box 42130, Houston, Texas 77242					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Xcel Gas Company	Address (Give address to which approved copy of this form is to be sent) Six Desta Drive, Suite 5700, Midland, Texas 79705					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When?

If this production is commingled with that from any other lease or pool, give commingling order number.

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
Perforations					Depth Casing Shoe			

TUBING, CASING AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours.)

Date First New Oil Run To Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. OPERATOR CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Dorothea Owens
Signature
Dorothea Owens Regulatory Analyst Title
June 7, 1991 (915) 682-6324 Telephone No.
Date Telephone No.

OIL CONSERVATION DIVISION

Date Approved JUL 18 1991
By [Signature]
Title DISTRICT I SUPERVISOR

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 I
 P.O. Box 1980, Hobbs, NM 88240

State of New Mexico
 Energy, Minerals and Natural Resources Department

Form C-104
 Revised 1-1-89
 See Instructions
 at Bottom of Page

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

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

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

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

I.

Operator Hal J. Rasmussen Operating, Inc.	Well API No. RECEIVED
Address Six Desta Drive, Suite 5850, Midland, Texas 79705	
Reason(s) for Filing (Check proper box) <input checked="" type="checkbox"/> Other (Please explain)	
New Well <input type="checkbox"/>	Change in Transporter of: <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Recompletion <input type="checkbox"/>	Change in name <input type="checkbox"/>
Change in Operator <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
If change of operator give name and address of previous operator Hal J. Rasmussen, 306 W. Wall, Suite 600, Midland, Texas 79701	

II. DESCRIPTION OF WELL AND LEASE **TA**

Lease Name State A Ac 1	Well No. 74	Pool Name, including Formation Langlie Mattix 7 Rvrs Queen GB	Kind of Lease State, Federal or Fee	Lease No.
Location Unit Letter <u>E</u> : <u>1980</u> Feet From The <u>North</u> Line and <u>660</u> Feet From The <u>West</u> Line Section <u>13</u> Township <u>23 S</u> Range <u>36 E</u> , NMPM, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Texas New Mexico Pipeline Co.	Address (Give address to which approved copy of this form is to be sent) Box 42130, Houston, Texas 77242			
Name of Authorized Transporter of Casinghead Gas: <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> El Paso Nat'l Gas & Phillips 66 Nat'l Gas	Address (Give address to which approved copy of this form is to be sent) Box 1492, El Paso, Texas 79978			
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.
	Is gas actually connected?	When ?		

If this production is commingled with that from any other lease or pool, give commingling order number: _____

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded	Date Compl. Ready to Prod.		Total Depth			P.B.T.D.		
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay			Tubing Depth		
Perforations							Depth Casing Shoe	
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET			SACKS CEMENT		

V. TEST DATA AND REQUEST FOR ALLOWABLE

OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours.)

Date First New Oil Run To Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. OPERATOR CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Wm Scott Ramsey
 Signature
 Wm. Scott Ramsey General Manager
 Printed Name
 July 13, 1989
 Date
 915-687-1664
 Telephone No.

OIL CONSERVATION DIVISION
AUG 21 1989
 Date Approved _____
 By [Signature]
 Title **DISTRICT 1 SUPERVISOR**

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.

RECEIVED
 JAN 10 1988
 OIL CONSERVATION DIVISION
 SANTA FE

Form C-104
 Revised 10-01-78
 Format 05-01-83
 Page 1

STATE OF NEW MEXICO
 ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION
 P. O. BOX 2088
 SANTA FE, NEW MEXICO 87501

NO. OF COPIES DESIRED	
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	GAS
OPERATOR	
PRODUCTION OFFICE	

REQUEST FOR ALLOWABLE
 AND
 AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.

Operator Hal J. Rasmussen

Address 306 W. Wall, Suite 600, Midland, Texas 79701

Reason(s) for filing (Check proper box)

<input type="checkbox"/> New Well	Change in Transporter of:	Other (Please explain) <u>Effective Dec. 1, 1988</u>
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Oil	
<input checked="" type="checkbox"/> Change in Ownership	<input type="checkbox"/> Casinthead Gas <input type="checkbox"/> Dry Gas <input type="checkbox"/> Condensate	

If change of ownership give name and address of previous owner Sun Exploration & Production Company P.O. Box 1861, Midland, Texas 79701

II. DESCRIPTION OF WELL AND LEASE Tald

Lease Name <u>State A A/C 1</u>	Well No. <u>74</u>	Pool Name, including Formation <u>Langlie Mattix Seven</u>	Kind of Lease <u>State, Federal or Fee</u>	Lease <u>State</u>
Location <u>Rivers Queen GB</u>				
Unit Letter <u>E</u>	: <u>1980</u>	Feet From The <u>North</u>	Line and <u>660</u>	Feet From The <u>West</u>
Line of Section <u>13</u>	Township <u>23S</u>	Range <u>36E</u>	, NMPM, Lea <u> </u> Cour <u> </u>	

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> <u>Texas New Mexico Pipeline Co.</u>	Address (Give address to which approved copy of this form is to be sent) <u>Box 42130, Houston, Tx 77242</u>
Name of Authorized Transporter of Casinthead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> <u>El Paso Natural Gas Co. & Phillips Co. Nat'l</u>	Address (Give address to which approved copy of this form is to be sent) <u>Box 1492, El Paso, Tx 79978</u>
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? when

If this production is commingled with that from any other lease or pool, give commingling order number: _____

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.

Wm Scott Ramsey
 (Signature)
Wm. Scott Ramsey, General Manager
 (Title)
12-6-88
 (Date)

OIL CONSERVATION DIVISION

APPROVED DEC 29 1988

BY [Signature]

TITLE DISTRICT 1 SUPERVISOR

This form is to be filed in compliance with RULE 110A.

If this is a request for allowable for a newly drilled or deep well, this form must be accompanied by a tabulation of the device tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for all wells on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of well name or number, or transporter, or other such change of conditions.

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

IV. COMPLETION DATA

Designate Type of Completion - (X)		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Some Rea'v.	DILL R
Date Spudded	Date Compl. Ready to Prod.	Total Depth			P.B.T.D.				
Elevations (DF, RKB, RT, CR, etc.)	Name of Producing Formation	Top Oil/Gas Pay			Tubing Depth				
Perforations							Depth Casing Shoe		
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE			DEPTH SET			SACKS CEMENT		

V. TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top of able for this depth or be for full 24 hours)

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)		
Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF	

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

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	GAS	
OPERATOR		
PRORATION OFFICE		

**NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS**

Form C-104
Supersedes Old C-104 and C-1
Effective 1-1-65

I. OPERATOR

Operator: Sun Exploration & Production Co.

Address: P. O. Box 1861, Midland, Texas 79702

Reason(s) for filing (Check proper box):

New Well <input type="checkbox"/>	Change in Transporter of:	Other (Please explain)
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/>	Name Change Only From: Sun Oil Company
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Dry Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	

If change of ownership give name and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>State "A" A/C 1</u>	Well No. <u>74</u>	Pool Name, including Formation <u>Langlie Mattix 7 Rvrs.Q.Gryb.</u>	Kind of Lease <u>State, Federal or Fee State</u>	Lease No.
Location				
Unit Letter <u>E</u>	<u>1980</u> Feet From The <u>North</u> Line and <u>660</u> Feet From The <u>West</u>			
Line of Section <u>13</u>	Township <u>23</u>	Range <u>36</u>	<u>NMPM,</u> Lea County	

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
<u>Texas New Mexico Pipeline</u>	<u>Box 1510, Midland, Texas</u>
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
<u>El Paso Natural Gas</u> <u>Phillips Petroleum</u>	<u>Jai, NM</u> <u>Box 6666, Odessa, Texas</u>
If well produces oil or liquids, give location of tanks.	Is gas actually connected? When
Unit <u>E</u> Sec. <u>13</u> Twp. <u>23</u> Rge. <u>36</u>	

If this production is commingled with that from any other lease or pool, give commingling order number: _____

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded	Date Compl. Ready to Prod.	Total Depth			P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay			Tubing Depth			
Perforations				Depth Casing Shoe				

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

VI. CERTIFICATE OF COMPLIANCE

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.

Dee Ann Kemp
(Signature)

Acct. Asst. II

(Title)

12-21-81

(Date)

OIL CONSERVATION COMMISSION

APPROVED JAN 21 1982, 19____
BY [Signature]
TITLE SUPERVISOR DISTRICT I

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

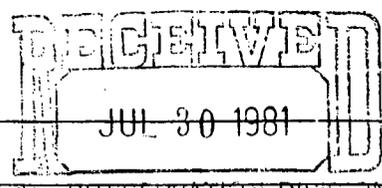
All sections of this form must be filled out completely for allowable on new and recompleted wells.

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. Separate Forms C-104 must be filed for each pool in multiple.

DISTRIBUTION	
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TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

**NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS**

Form C-104
Supersedes Old C-104 and C-105
Effective 1-1-65



I.

Operator
SUN OIL COMPANY

Address
P.O. Box 1861, Midland, TX 79702

Reason(s) for filing (Check proper box)
 New Well Change in Transporter of:
 Recompletion Oil Dry Gas
 Change in Ownership Casinghead Gas Condensate

Other (Please explain)

If change of ownership give name and address of previous owner **SUN TEXAS COMPANY, P.O. Box 4067, Midland, TX 79704**

II. DESCRIPTION OF WELL AND LEASE

Lease Name State "A" A/C-1	Well No. 74	Pool Name, including Formation Langlie-Mattix 7 Rvrs.Q.Gryb.	Kind of Lease State, Federal or Fee State	Lease No.
Location Unit Letter E ; 1980 Feet From The North Line and 660 Feet From The West Line of Section 13 Township 23 Range 36 , NMPM, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/> Texas New Mexico Pipeline	Address (Give address to which approved copy of this form is to be sent) Box 1510, Midland, TX
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> El Paso Natural Gas Phillips Petroleum	Address (Give address to which approved copy of this form is to be sent) Jat, NM Box 6666, Odessa, TX
If well produces oil or liquids, give location of tanks. Unit E Sec. 13 Twp. 23 Rge. 36	Is gas actually connected? <input type="checkbox"/> When

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Restv.	Diff. Restv.
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
Perforations	Depth Casing Shoe							
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

(Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

VI. CERTIFICATE OF COMPLIANCE

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.

(Signature)
Production/Proration Supervisor
(Title)
July 1, 1981
(Date)

OIL CONSERVATION COMMISSION

JUL 28 1981

APPROVED _____ 19

BY

TITLE **SUPERVISOR DISTRICT I**

This form is to be filed in compliance with RULE 1104.
 If this is a request for allowable for a newly drilled or deeper well, this form must be accompanied by a tabulation of the deviate tests taken on the well in accordance with RULE 111.
 All sections of this form must be filled out completely for all wells on new and recompleted wells.
 Fill out only Sections I, II, III, and VI for changes of own well name or number, or transporter, or other such change of conditions. Separate Forms C-104 must be filed for each well in multiple completions.

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SANTA FE		
LE		
U.S.G.S.		
LAND OFFICE		
OPERATOR		

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
 Supersees Old
 C-102 and C-103
 Effective 1-1-65

5a. Indicate Type of Lease
 State Fee
 5. State Oil & Gas Lease No.

SUNDRY NOTICES AND REPORTS ON WELLS
 (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR.
 USE "APPLICATION FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- <input type="checkbox"/>	7. Unit Agreement Name
2. Name of Operator Sun Texas Company	8. Farm or Lease Name State "A" A/c-1
3. Address of Operator P. O. Box 4067, Midland, Texas 79704	9. Well No. 74
4. Location of Well UNIT LETTER <u>E</u> , <u>1980</u> FEET FROM THE <u>north</u> LINE AND <u>660</u> FEET FROM THE <u>west</u> LINE, SECTION <u>13</u> TOWNSHIP <u>23-S</u> RANGE <u>36-E</u> NMPM.	10. Field and Pool, or Wildcat Langlie Mattix
15. Elevation (Show whether DF, RT, GR, etc.) 3401' GR	12. County Lea

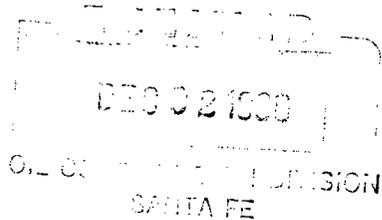
16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>
OTHER <input type="checkbox"/>	OTHER <input type="checkbox"/>
PLUG AND ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
CHANGE PLANS <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

Well temporarily abandoned November, 1965.

Set pumping unit & test, 14 B0, 165 MCF, 14 BW
 Allowable reinstated 2-8-66.



18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED R. J. O'Neal - 27 TITLE Reg. Operations Supt. DATE 11-18-80

APPROVED BY Gerry Suptor TITLE SUPERVISOR DISTRICT DATE NOV 24 1980

CONDITIONS OF APPROVAL, IF ANY:

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-105
Effective 1-1-65

DISTRIBUTION		
SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

I. Operator
SUN TEXAS COMPANY

Address
P. O. Box 4067 Midland, Texas 79704

Reason(s) for filing (Check proper box) Other (Please explain)

New Well Change in Transporter of:
 Recompletion Oil Dry Gas
 Change in Ownership Casinghead Gas Condensate

If change of ownership give name and address of previous owner **TEXAS PACIFIC OIL COMPANY, INC. P. O. Box 4067 Midland, TX, 79704**

II. DESCRIPTION OF WELL AND LEASE

Lease Name STATE A A/C-1	Well No. 74	Pool Name, including Formation LANGUE-MATIX 7' ^{cont}	Kind of Lease State, Federal or Fee STATE	Lease No.
Location Unit Letter E ; 1980 Feet From The NORTH Line and 660 Feet From The WEST				
Line of Section 13	Township 23	Range 36	NMPM, LEA	County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> TEXAS-NEW MEXICO PIPELINE	Address (Give address to which approved copy of this form is to be sent) Box 1510 MIDLAND, TEXAS
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> EL PASO NATURAL GAS PHILLIPS PETROLEUM	Address (Give address to which approved copy of this form is to be sent) JAL, NEW MEXICO BOX 6666, ODESSA, TEXAS
If well produces oil or liquids, give location of tanks. E 13 23 36	Is gas actually connected? When

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'
Date Spudded	Date Compl. Ready to Prod.		Total Depth			P.B.T.D.		
Elevations (DF, RKB, RT, CR, etc.)	Name of Producing Formation		Top Oil/Gas Pay			Tubing Depth		
Perforations						Depth Casing Shoe		

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

(Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. CERTIFICATE OF COMPLIANCE

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.

C. Engleman
(Signature)

Regional Operations Superintendent/West

(Title)

SEP 12 1980

(Date)

OIL CONSERVATION COMMISSION

OCT 27 1980

APPROVED _____, 19__

BY *[Signature]*
TITLE **SUPERVISOR DISTRICT I**

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deeper well, this form must be accompanied by a tabulation of the deviate tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for all wells on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of own well name or number, or transporter, or other such change of condition.

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

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

Nov 15 8 34 AM '65
State Fee

NOV 15 1965

5. State Oil & Gas Lease No.

SUNDRY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- <input type="checkbox"/>	CHANGE OF OPERATION FROM TEXAS PACIFIC OIL COMPANY A DIVISION OF JOSEPH E. SULLIVAN & SONS, INC. TO TEXAS PACIFIC OIL COMPANY, INC. EFFECTIVE MAY 1, 1960	7. Unit Agreement Name
2. Name of Operator TEXAS PACIFIC OIL COMPANY		8. Farm or Lease Name State "A" A/c-1
3. Address of Operator P.O. Box 1069-Hobbs, New Mexico		9. Well No. 74
4. Location of Well UNIT LETTER E , 1980 FEET FROM THE North LINE AND 660 FEET FROM THE West LINE, SECTION 13 TOWNSHIP 23 RANGE 36 NMPM.		10. Field and Pool, or Wildcat Langlie-Mattix
	15. Elevation (Show whether DF, RT, GR, etc.) 3401' GL	12. County Lea

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER <u>Temporarily Abandoned</u> <input checked="" type="checkbox"/>

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

Temporarily Abandoned. Held for remedial work and secondary recovery possibilities.

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED *Wm. R. Dester* TITLE Area Engineer DATE 11-11-65

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

HOBBBS OFFICE RECEIVED 7/1/55

(File the original and 4 copies with the appropriate district office)

CERTIFICATE OF COMPLIANCE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

1960 JAN 19 AM 10:28

Company or Operator Texas Pacific Coal and Oil Company Lease State "A" A/c-1

Well No. 74 Unit Letter E S 13 T 23-SR 36-E Pool Langlie-Mattix

County Lea Kind of Lease (State, Fed. or Patented) _____ State _____

If well produces oil or condensate, give location of tanks: Unit NE 1/4 S 13 T 23-SR 36-E

Authorized Transporter of Oil or Condensate _____

Address _____

(Give address to which approved copy of this form is to be sent)

Authorized Transporter of Gas Phillips Petroleum Company

Address P. O. Box 6666, Odessa, Texas Date Connected 1/9/60

(Give address to which approved copy of this form is to be sent)

If Gas is not being sold, give reasons and also explain its present disposition:

CHANGE OF OPERATION FROM
TEXAS PACIFIC OIL COMPANY
A DIVISION OF JOSEPH E. DEGRAND & SONS, INC.
EFFECTIVE MAY 1, 1963

Reasons for Filing: (Please check proper box) New Well ()

Change in Transporter of (Check One): Oil () Dry Gas () C'head () Condensate ()

Change in Ownership () Other (X)

Remarks: _____ (Give explanation below)

Gas now connected

Name Changed from
TEXAS PACIFIC COAL AND OIL COMPANY
to TEXAS PACIFIC OIL COMPANY
Effective November 1, 1963

The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.

Executed this the 15th day of January 19 60

By [Signature]

Approved [Signature] 19 _____

Title Petroleum Engineer

OIL CONSERVATION COMMISSION

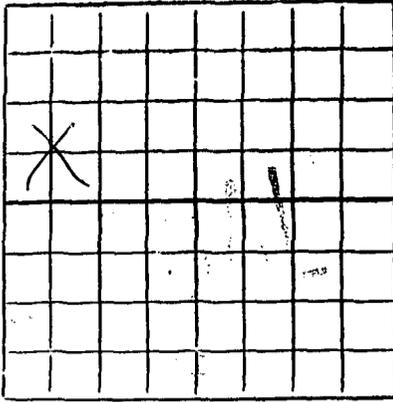
Company Texas Pacific Coal & Oil Company

By [Signature]

Address P. O. Box 1688

Title _____

Hobbs, New Mexico



AREA 640 ACRES
LOCATE WELL CORRECTLY

NEW MEXICO OIL CONSERVATION COMMISSION

MAIN OFFICE OCC Santa Fe, New Mexico DISTRICT OFFICE OCC

1959 JAN 4 AM 8:50 WELL RECORD 30 JAN 10 43

Mail to District Office, Oil Conservation Commission, to which Form C-101 was sent not later than twenty days after completion of well. Follow instructions in Rules and Regulations of the Commission. Submit in QUINTUPLICATE. If State Land submit 6 Copies

Texas Pacific Coal and Oil Company State "A" A/c-1
(Company or Operator) (Lease)

Well No. 74, in SW 1/4 of NW 1/4, of Sec. 13, T. 23-S, R. 36-E, NMPM.
Langlie-Mattix Pool, Lea County.

Well is 1980 feet from North line and 660 feet from West line
of Section 13. If State Land the Oil and Gas Lease No. is NM-2A

Drilling Commenced November 18, 1959. Drilling was Completed November 29, 1959

Name of Drilling Contractor F. W. A. Drilling Co. J. P. Gibbins, Inc.

Address Wichita Falls, Texas Midland, Texas

Elevation above sea level at Top of Tubing Head 3401. The information given is to be kept confidential until 1959

OIL SANDS OR ZONES

No. 1, from 3586' to 3626' CTM No. 4, from to
No. 2, from to No. 5, from to
No. 3, from to No. 6, from to

IMPORTANT WATER SANDS

Include data on rate of water inflow and elevation to which water rose in hole.

No. 1, from to feet.
No. 2, from to feet.
No. 3, from to feet.
No. 4, from to feet.

CASING RECORD

SIZE	WEIGHT PER FOOT	NEW OR USED	AMOUNT	KIND OF SHOE	CUT AND PULLED FROM	PERFORATIONS	PURPOSE
9-5/8"	32.30	New	310	Float			Surface
7"	20	New	3586	Float			Production

MUDDING AND CEMENTING RECORD

SIZE OF HOLE	SIZE OF CASING	WHERE SET	NO. BAGS OF CEMENT	METHOD USED	MUD GRAVITY	AMOUNT OF MUD USED
12	9-5/8"	320	300+4% Gel	Pump & Plug		
8-3/4	7"	3596	250+4% Gel	Pump & Plug		

RECORD OF PRODUCTION AND STIMULATION

(Record the Process used, No. of Qts. or Gals. used, interval treated or shot.)

Open hole sand jetted for 4 Hrs. at 3602'. SOT w/10,000 gals. refined oil & 10,000 lbs. sand.

Result of Production Stimulation Flowed 75 bbls. oil, no water through a 20/64" choke in 4 hrs.

Tested 12/5/59.

Depth Cleaned Out 3626' CTM

RECORD OF DRILL-STEM AND SPECIAL TESTS

If drill-stem or other special tests or deviation surveys were made, submit report on separate sheet and attach hereto

TOOLS USED

Rotary tools were used from 0 feet to 3596 RTM feet, and from _____ feet to _____ feet.
 Cable tools were used from 3586 feet to 3626 CTM feet, and from _____ feet to _____ feet.

PRODUCTION

Put to Producing December 5, 1959

OIL WELL: The production during the first 24 hours was 75 barrels of liquid of which 100% was oil; 0% was emulsion; 0% water; and 0% was sediment. A.P.I.

Gravity 35°

GAS WELL: The production during the first 24 hours was _____ M.C.F. plus _____ barrels of liquid Hydrocarbon. Shut in Pressure _____ lbs.

Length of Time Shut in _____

PLEASE INDICATE BELOW FORMATION TOPS (IN CONFORMANCE WITH GEOGRAPHICAL SECTION OF STATE):

Southeastern New Mexico		Northwestern New Mexico	
T. Anhy..... 1250	T. Devonian.....	T. Ojo Alamo.....	
T. Salt..... 1475	T. Silurian.....	T. Kirtland-Fruitland.....	
B. Salt..... 2798	T. Montoya.....	T. Farmington.....	
T. Yates..... 2934	T. Simpson.....	T. Pictured Cliffs.....	
T. 7 Rivers..... 3183	T. McKee.....	T. Menefee.....	
T. Queen..... 3602	T. Ellenburger.....	T. Point Lookout.....	
T. Grayburg.....	T. Gr. Wash.....	T. Mancos.....	
T. San Andres.....	T. Granite.....	T. Dakota.....	
T. Glorieta.....	T.	T. Morrison.....	
T. Drinkard.....	T.	T. Penn.....	
T. Tubbs.....	T.	T.	
T. Abo.....	T.	T.	
T. Penn.....	T.	T.	
T. Miss.....	T.	T.	

FORMATION RECORD

From	To	Thickness in Feet	Formation	From	To	Thickness in Feet	Formation
0	150	150	Caliche & Sand				
150	324	174	Red Bed				
324	1190	866	Red Bed, Salt & Anhyd.				
1190	2796	1606	Anhyd. & Salt				
2796	2902	106	Anhyd. & Gyp.				
2902	3287	383	Anhyd. & Lime				
3287	3596	309	Lime				
3596	3626	30	Lime & Sand				

ATTACH SEPARATE SHEET IF ADDITIONAL SPACE IS NEEDED

I hereby swear or affirm that the information given herewith is a complete and correct record of the well and all work done on it so far as can be determined from available records.

December 29, 1959
 Company or Operator Texas Pacific Coal & Oil Co. Address P. O. Box 1688, Hobbs, New Mexico
 Name _____ Position Title Petroleum Engineer

(File the original and 4 copies with the appropriate district office)

CERTIFICATE OF COMPLIANCE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

HOBBS OFFICE
12 14 AM 10 48

Company or Operator Texas Pacific Coal & Oil Company Lease State "A" A/c-1

Well No. 74 Unit Letter # S 13 T23-S R 36-E Pool Langlie-Mattix

County Lea Kind of Lease (State, Fed. or Patented) State

If well produces oil or condensate, give location of tanks: Unit NE 1/4 S 13 T23-S R 36-E

Authorized Transporter of Oil or Condensate Texas-New Mexico Pipeline Company

Address P. O. Box 1510, Midland, Texas

(Give address to which approved copy of this form is to be sent)

Authorized Transporter of Gas None

Address _____ Date Connected _____

(Give address to which approved copy of this form is to be sent)

If Gas is not being sold, give reasons and also explain its present disposition:

No connection - Gas vented

RECEIVED
DEC 14 1959

Reasons for Filing: (Please check proper box) New Well (X)

Change in Transporter of (Check One): Oil () Dry Gas () C'head () Condensate ()

Change in Ownership () Other ()

Remarks: _____ (Give explanation below)

The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.

Executed this the 11th day of December 19 59

By [Signature]

Title Petroleum Engineer

Company Texas Pacific Coal & Oil Company

Address P. O. Box 1698

Hobbs, New Mexico

Approved DEC 14 1959 19

OIL CONSERVATION COMMISSION

By [Signature]

Title Engineer District 1

NEW MEXICO OIL CONSERVATION COMMISSION
Santa Fe, New Mexico

(Form C-104)
Revised 7/1/57

REQUEST FOR (OIL) - (GAS) ALLOWABLE

New Well
Recompletion

This form shall be submitted by the operator before an initial allowable will be assigned to any completed Oil or Gas well. Form C-104 is to be submitted in QUADRUPPLICATE to the same District Office to which Form C-101 was sent. The allowable will be assigned effective 7:00 A.M. on date of completion or recompletion, provided this form is filed during calendar month of completion or recompletion. The completion date shall be that date in the case of an oil well when new oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

Hobbs, New Mexico December 11, 1959
(Place) (Date)

WE ARE HEREBY REQUESTING AN ALLOWABLE FOR A WELL KNOWN AS:

Texas Pacific Coal & Oil Company-State "A" A/c-1 Well No. 74, in SW 1/4 NW 1/4,
(Company or Operator) (Lease)
E Sec. 13, T. 23-S, R. 36-E, NMPM., Langlie-Mattix Pool
Unit Letter

Lea County. Date Spudded 11/18/59 Date Drilling Completed 11/30/59
Elevation 3401.3 G.L. Total Depth 3629 G.L. PBDT - - -
Top Oil/Gas Pay 3586 G.L. Name of Prod. Form. Seven Rivers

Please indicate location:

D	G	B	A
E	F	G	H
X			
L	K	J	I
M	N	O	P

PRODUCING INTERVAL -
Perforations Sand-Jet perforated open hole at 3602
Open Hole 3586 - 3629 Depth Casing Shoe 3586 Depth Tubing 3584

OIL WELL TEST -
Natural Prod. Test: _____ bbls. oil, _____ bbls water in _____ hrs, _____ min. Choke Size _____
Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): 75 bbls. oil, 0 bbls water in 4 hrs, 0 min. Choke Size 20/64

GAS WELL TEST - T.P. 200 G.P. 525 GOR 499
Natural Prod. Test: _____ MCF/Day; Hours flowed _____ Choke Size _____

Tubing, Casing and Cementing Record

Size	Feet	Sax
9-5/8"	310'	300 + 4% Gel
7"	3586'	250 + 4% Gel
2"	3584'	

Method of Testing (pitot, back pressure, etc.): _____
Test After Acid or Fracture Treatment: _____ MCF/Day; Hours flowed _____
Choke Size _____ Method of Testing: _____

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): S.O.T. w/10,000 gal. refined oil & 10,000lbs. 20/40 sand
Casing Tubing Date first new
Press. 2500 Press. _____ oil run to tanks 12/4/59
Oil Transporter Texas-New Mexico Pipeline Company
Gas Transporter None

Remarks: _____

I hereby certify that the information given above is true and complete to the best of my knowledge.

Approved _____, 19 _____ Texas Pacific Coal and Oil Company
(Company or Operator)

OIL CONSERVATION COMMISSION

By: _____ Title Petroleum Engineer
Engineer District _____ Send Communications regarding well to:
Name Texas Pacific Coal and Oil Company
Address P. O. Box 1688, Hobbs, New Mexico

NEW MEXICO OIL CONSERVATION COMMISSION

FORM C-103
(Rev 3-55)

MISCELLANEOUS REPORTS ON WELLS

HOBBS OFFICE OCC

(Submit to appropriate District Office as per Commission Rule 1106)

Name of Company Texas Pacific Coal and Oil Company		Address P. O. Box 1688, Hobbs, New Mexico				
Lease State "A" A/c-1	Well No. 74	Unit Letter # E	Section 13	Township 23-S	Range 36-E	
Date Work Performed 11/24 - 25/ 1959	Pool Langlie-Mattix	County Lea				

THIS IS A REPORT OF: (Check appropriate block)

- Beginning Drilling Operations
 Casing Test and Cement Job
 Other (Explain):
 Plugging
 Remedial Work

Detailed account of work done, nature and quantity of materials used, and results obtained.

Ran 86 joints (3586') 7", 20#, J-55 casing. Set at 3596'.
 Cemented with 250 sxs. reg. +4% Gel. Pumped plug to 3508' @ 11:00 A.M. 11/24/59.
 Ran temperature survey after 12 hrs. - Top cement at 2230'.
 Pressured up to 1000 psi on 7" casing for 30 minutes before and after drilling out.
 Test O. K.

Witnessed by Jerry Lambeth	Position Petroleum Engineer	Company Texas Pacific Coal & Oil Company
-------------------------------	--------------------------------	---

FILL IN BELOW FOR REMEDIAL WORK REPORTS ONLY

ORIGINAL WELL DATA

D F Elev.	T D	P B T D	Producing Interval	Completion Date
Tubing Diameter	Tubing Depth	Oil String Diameter	Oil String Depth	
Perforated Interval(s)				
Open Hole Interval		Producing Formation(s)		

RESULTS OF WORKOVER

Test	Date of Test	Oil Production BPD	Gas Production MCFPD	Water Production BPD	GOR Cubic feet/Bbl	Gas Well Potential MCFPD
Before Workover						
After Workover						

OIL CONSERVATION COMMISSION		I hereby certify that the information given above is true and complete to the best of my knowledge.	
Approved by 	Name Jerry Lambeth	Position Petroleum Engineer	Company Texas Pacific Coal and Oil Company
Title Engineer District I	Date DEC 1 1959		

NEW MEXICO OIL CONSERVATION COMMISSION

FORM C-103
(Rev 3-55)

MISCELLANEOUS REPORTS ON WELLS

(Submit to appropriate District Office as per Commission Rule 1106)

Name of Company Texas Pacific Coal and Oil Company		Address P. O. Box 1688, Hobbs, New Mexico					
Lease State "A A/c-1	Well No. 74	Unit Letter E	Section 13	Township 23-S	Range 36-E		
Date Work Performed 11/18/59 11/20/59	Pool Langlie-Mattix			County Lea			

THIS IS A REPORT OF: (Check appropriate block)

- Beginning Drilling Operations
 Casing Test and Cement Job
 Other (Explain):
 Plugging
 Remedial Work

Detailed account of work done, nature and quantity of materials used, and results obtained.

Spudded at 5:30 P.M. 11/18/59 to 324'

Ran 10 jts. (310') 9-5/8", 32#, J-55 casing. Set at 320'.

Cemented with 300 sxs. reg. neat + 4% gel and 2% calcium chloride.

Cement circulated. Pumped plug to 280' at 12:40 A.M. 11/19/59.

After 24 hours pressured-up on casing at 800 psi for 30 minutes before and after drilling out cement. Test O. K.

Witnessed by Jerry Eskew	Position Petroleum Engineer	Company Texas Pacific Coal and Oil Company
-----------------------------	--------------------------------	---

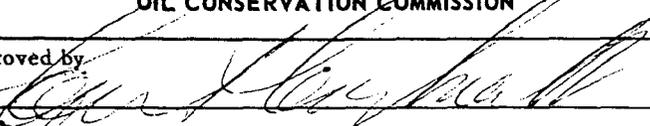
FILL IN BELOW FOR REMEDIAL WORK REPORTS ONLY

ORIGINAL WELL DATA

D F Elev.	T D	P B T D	Producing Interval	Completion Date
Tubing Diameter	Tubing Depth	Oil String Diameter	Oil String Depth	
Perforated Interval(s)				
Open Hole Interval		Producing Formation(s)		

RESULTS OF WORKOVER

Test	Date of Test	Oil Production BPD	Gas Production MCFPD	Water Production BPD	GOR Cubic feet/Bbl	Gas Well Potential MCFPD
Before Workover						
After Workover						

OIL CONSERVATION COMMISSION		I hereby certify that the information given above is true and complete to the best of my knowledge.	
Approved by 	Name Jerry Eskew		
Title District Engineer	Position Petroleum Engineer		
Date NOV 24 1959	Company Texas Pacific Coal and Oil Company		

NOTICE OF INTENTION TO DRILL

DISTRICT OFFICE 000

Notice must be given to the District Office of the Oil Conservation Commission and approval obtained before drilling or recompletion begins. If changes in the proposed plan are considered advisable, a copy of this notice showing such changes will be returned to the sender. Submit this notice in QUINTUPLICATE. One copy will be returned following approval. See additional instructions in Rules and Regulations of the Commission. If State Land submit 6 Copies Attach Form G-128 in triplicate to first 3 copies of form G-101

Fort Worth, Texas

October 27, 1959

(Place)

(Date)

OIL CONSERVATION COMMISSION
SANTA FE, NEW MEXICO

Gentlemen:

You are hereby notified that it is our intention to commence the Drilling of a well to be known as

Texas Pacific Coal and Oil Company

(Company, or Operator)

State of New Mexico "A" A/c-1

Well No. 74

E

The well is

(Lease)

(Unit)

located 1,980 feet from the North line and 660 feet from the West

West

line of Section 13, T. 23-S, R. 36-E, NMPM.

(GIVE LOCATION FROM SECTION LINE)

Langlie-Mattix Pool,

Lea

County

A-983

If State Land the Oil and Gas Lease is No.

If patented land the owner is

Address

We propose to drill well with drilling equipment as follows: Rotary Rig to top of pay. Drill in with Cable Tools.

The status of plugging bond is Required Bond on File.

Drilling Contractor F. W. A. Drilling Co., Inc.

We intend to complete this well in the 7-Rivers formation at an approximate depth of 4,000 feet.

CASING PROGRAM

We propose to use the following strings of Casing and to cement them as indicated:

Size of Hole	Size of Casing	Weight per Foot	New or Second Hand	Depth	Sacks Cement
12"	9 5/8"	36#	New	300'	300
8 3/4"	7"	20#	New	3,700'	250

If changes in the above plans become advisable we will notify you immediately.

ADDITIONAL INFORMATION (If recompletion give full details of proposed plan of work.)

OCT 28 1959

Approved....., 19.....
Except as follows:

Sincerely yours,

TEXAS PACIFIC COAL AND OIL COMPANY

(Company or Operator)

By

Position..... Manager of Production

Send Communications regarding well to

Name..... D. A. Bonney

Address..... P.O. Box 2110, Fort Worth 1, Texas

OIL CONSERVATION COMMISSION

By.....
Engineer District

ORIGINAL

NEW MEXICO OIL CONSERVATION COMMISSION

FORM C-128
Revised 5/1/57

WELL LOCATION AND ACREAGE DEDICATION PLAT

SEE INSTRUCTIONS FOR COMPLETING THIS FORM ON THE REVERSE SIDE **HOODS OFFICE OCC**

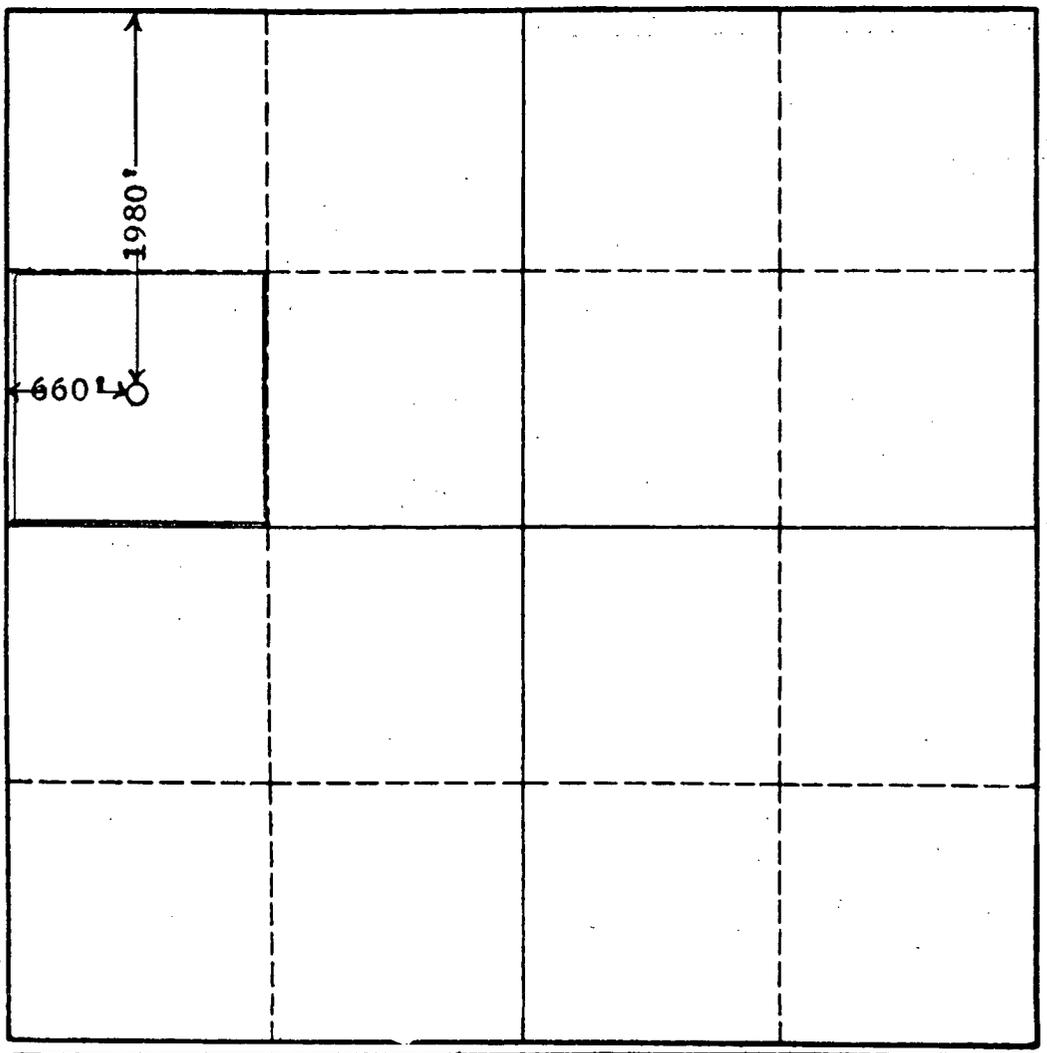
SECTION A

Operator Texas Pacific Coal & Oil Co.		Lease State "A" Account #1		1959 OCT 28 AM	Well No. 9: 073
Unit Letter E	Section 13	Township 23 South	Range 36 East	County Lea	
Actual Footage Location of Well: 660' feet from the West line and 1980' feet from the North line					
Ground Level Elev.	Producing Formation 7-Rivers	Pool Langlie-Mattix	Dedicated Acreage: 40 Acres		

1. Is the Operator the only owner in the dedicated acreage outlined on the plat below? YES NO ____ . ("Owner" means the person who has the right to drill into and to produce from any pool and to appropriate the production either for himself or for himself and another. (65-3-29 (e) NMSA 1935 Comp.)
2. If the answer to question one is "no," have the interests of all the owners been consolidated by communitization agreement or otherwise? YES ____ NO ____ . If answer is "yes," Type of Consolidation _____
3. If the answer to question two is "no," list all the owners and their respective interests below:

Owner	Land Description

SECTION B



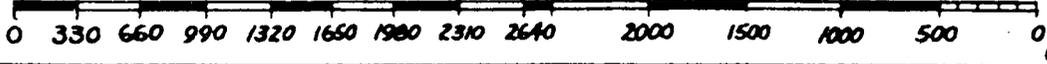
CERTIFICATION

I hereby certify that the information in SECTION A above is true and complete to the best of my knowledge and belief.

[Signature]
Name
Manager of Production
Position
Texas Pacific Coal & Oil Co.
Company
October 27, 1959
Date

I hereby certify that the well location shown on the plat in SECTION B 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 knowledge and belief.

Date Surveyed
10-24-59
Registered Professional Engineer
and/or Land Surveyor, **JOHN W. WEST**
[Signature]
Certificate No.
N.M. - P.E. & L.S. NO. 676





STATE OF NEW MEXICO
ENERGY, MINERALS AND NATURAL RESOURCES DEPARTMENT

OIL CONSERVATION DIVISION
HOBBS DISTRICT OFFICE

BRUCE KING
GOVERNOR

POST OFFICE BOX 1980
HOBBS, NEW MEXICO 88241-1980
(505) 393-6161

NOVEMBER 18, 1994

CLAYTON WILLIAMS ENERGY, INC.
SIX DESTA DRIVE, SUITE 3000
MIDLAND, TEXAS 79705

RE: CANCELLATION OF INTENT TO DRILL

STATE A AC 1
WELL #60 13-23S-36E 1980 North 1980 East
LANGLIE MATTIX 7 RVRS QUEEN CB

Gentlemen:

Six months or more have elapsed since Division Form C-101, Notice of Intention to Drill, for the subject well was approved. To date no progress reports, Forms C-103, have been received. Therefore, approval of your permit to drill this well has no expired and no drilling operations are to be initiated without further notice to and approval by the Oil Conservation Division. Pending such approval, this will be considered as an abandoned location.

Very truly yours,

OIL CONSERVATION DIVISION



Jerry Sexton
District I, Supervisor

JS:dp

cc: OCD Santa Fe
BLM
State Land Office
OCD Hobbs Well File



DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

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

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

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

WELL API NO. 30-025-09345
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name State A AC 1
8. Well No. 60
9. Pool name or Wildcat Langlie Mattix 7 Ryrs Queen GB
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3391 GR

SUNDRY NOTICES AND REPORTS ON WELLS
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well:
OIL WELL GAS WELL OTHER

2. Name of Operator
Clayton Williams Energy, Inc.

3. Address of Operator
Six Desta Drive, Suite 3000 Midland, Texas 79705

4. Well Location
Unit Letter G : 1980 Feet From The North Line and 1980 Feet From The East Line
Section 13 Township 23S Range 36E NMPM Lea County

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
OTHER: <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
	CASING TEST AND CEMENT JOB <input type="checkbox"/>
	OTHER: <input type="checkbox"/>

12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103. Work will begin upon OCD approval

- 09/22/93. CIBP set @ 3450' w/35' cement on CIBP.
- Load hole w/10 PPG gelled brine from CIBP to surface.
- Perforate the 5-1/2" casing @ ± 325'.
- Circulate cement down 5-1/2" casing and up the 5-1/2 / 8-5/8" annulus to surface. (85 sx Class "C" cement)
- Cut the 5-1/2" and 8-5/8" off 3' below GL. Install P & A marker. Cut and remove deadmen. Remove all junk from location.

Plug and Abandon Wellbore

THE OCCASION MUST BE NOTIFIED 24 HOURS BEFORE THE BEGINNING OF PLUGGING OPERATIONS FOR THE C-103

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE David G. Grafe TITLE Senior Operations Engineer DATE 12/05/94

TYPE OR PRINT NAME David G. Grafe TELEPHONE NO. 682-6324

(This space for State Use)

APPROVED BY Jerry Norton DISTRICT I SUPERVISOR DATE DEC 13 1994

CONDITIONS OF APPROVAL, IF ANY:

Submit 3 Copies
to Appropriate
District Office

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240
DISTRICT II
P.O. Drawer DD, Artesia, NM 88210
DISTRICT III
000 Rio Brazos Rd., Aztec, NM 87410

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

WELL API NO. 30-025-09345
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name State A AC 1
8. Well No. 60
9. Pool name or Wildcat Langlie Mattix 7 Rvrs Queen GB

SUNDRY NOTICES AND REPORTS ON WELLS
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

Type of Well:
OIL WELL GAS WELL OTHER

Name of Operator
Clayton Williams Energy, Inc.

Address of Operator
Six Desta Drive, Suite 3000 Midland, Texas 79705

Well Location
Unit Letter G : 1980 Feet From The North Line and 1980 Feet From The East Line

Section 13 Township 23S Range 36E NMPM Lea Country

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
3391' GR

Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
PLUG AND ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
CHANGE PLANS <input type="checkbox"/>	PLUG AND ABANDONMENT <input checked="" type="checkbox"/>
DRILL OR ALTER CASING <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>
OTHER: _____ <input type="checkbox"/>	OTHER: _____ <input type="checkbox"/>

1. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

12/27/94
TIH and tagged cement on CIBP at 3410'. Loaded hole w/80 bbls 10# gelled brine. Perforated 5-1/2" casing at 325'. Circulated 100 sx Class C cement down 5-1/2" casing and up 5-1/2"/8-5/8" annulus to surface. Cut 5-1/2" and 8-5/8" casing off 3' below GL. Cut and removed deadmen. Installed P & A marker. Cleared location of all junk.

Plugged and Abandoned Wellbore 12/27/94

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE David G. Grafe TITLE Senior Operations Engineer DATE 01/20/95

TYPE OR PRINT NAME David G. Grafe TELEPHONE NO. 682-6324

This space for State Use

APPROVED BY Charles Perrin TITLE **OIL & GAS INSPECTOR** DATE FEB 03 1995

CONDITIONS OF APPROVAL, IF ANY:

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

State of New Mexico
 Energy, Minerals and Natural Resources Department

Form C-104
 Revised 1-1-89
 See Instructions
 at Bottom of Page

OIL CONSERVATION DIVISION

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

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 1993 AUG 12 AM 8 47

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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION
 TO TRANSPORT OIL AND NATURAL GAS

I.

Operator Clayton Williams Energy, L.L.C. <i>Inc</i>	Well API No. 30-025-09345
Address Six Desta Drive, Suite 3000 Midland, Texas 79705	
Reason(s) for Filing (Check proper box) <input type="checkbox"/> New Well <input type="checkbox"/> Recompletion <input type="checkbox"/> Change in Operator <input checked="" type="checkbox"/> Other (Please explain) Change in Transporter of: <input type="checkbox"/> Oil <input type="checkbox"/> Change in Operator name only. <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Dry Gas <input type="checkbox"/> Condensate Effective 04/07/93	
If change of operator give name and address of previous operator Clayton W. Williams, Jr., Inc.	

II. DESCRIPTION OF WELL AND LEASE TA

Lease Name State A AC 1	Well No. 60	Pool Name, including Formation Langlie Mattix 7 Rvrs Queen GB	Kind of Lease State, Federal	Lease No.
Location Unit Letter <u>G</u> : 1980 Feet From The <u>North</u> Line and 1980 Feet From The <u>East</u> Line Section <u>13</u> Township <u>23S</u> Range <u>36E</u> , <u>NMPM</u> , Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil Texas New Mexico Pipeline Company	<input checked="" type="checkbox"/> Oil or <input type="checkbox"/> Condensate	Address (Give address to which approved copy of this form is to be sent) Box 42130 Houston, Texas
Name of Authorized Transporter of Casinghead Gas Xcel Gas Company	<input checked="" type="checkbox"/> Casinghead Gas or <input type="checkbox"/> Dry Gas	Address (Give address to which approved copy of this form is to be sent) 6 Desta Dr., Suite 5800 Midland, Texas 79705
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge.	Is gas actually connected? When?

If this production is commingled with that from any other lease or pool, give commingling order number: _____

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded	Date Compl. Ready to Prod.		Total Depth			P.B.T.D.		
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay			Tubing Depth		
Perforations						Depth Casing Shoe		
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET			SACKS CEMENT		

V. TEST DATA AND REQUEST FOR ALLOWABLE

OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours.)

Date First New Oil Run To Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas- MCF

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. OPERATOR CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Robin S. McCarley
 Signature
 Robin S. McCarley Production Analyst
 Printed Name Title
 04/01/93 (915) 682-6324
 Date Telephone No.

OIL CONSERVATION DIVISION

Date Approved JUL 27 1993
 By *[Signature]*
 Title Geologist

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

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

Submit to Appropriate District Office
 State Lease - 6 copies
 Fee Lease - 5 copies

State of New Mexico
 Energy, Minerals and Natural Resources Department

Form C-101
 Revised 1-1-89

CONSERVATION DIVISION

RECREATION CONSERVATION DIVISION

DISTRICT I
 P.O. Box 1980, Hobbs, NM 88240

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

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

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

API NO. (assigned by OCD on New Wells)
 30 025 09345

5. Indicate Type of Lease
 STATE FEE

6. State Oil & Gas Lease No.

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work:
 DRILL RE-ENTER DEEPEN PLUG BACK

b. Type of Well:
 OIL WELL GAS WELL OTHER SINGLE ZONE MULTIPLE ZONE

2. Name of Operator
 Clayton W. Williams, Jr., Inc.

3. Address of Operator
 Six Desta Drive, Suite 3000 Midland, Texas 79705

4. Well Location
 Unit Letter G : 1980 Feet From The North Line and 1980 Feet From The East Line
 Section 13 Township 23S Range 36E NMPM Lea County

7. Lease Name or Unit Agreement Name
 State A A/C 1

8. Well No.
 60

9. Pool name or Wildcat
 Jalmat Tansill Yates 7 Rvrs

10. Proposed Depth
 PB to 3400'

11. Formation
 Yates

12. Rotary or C.T.
 N/A

13. Elevations (Show whether DF, RT, GR, etc.)
 GR = 3391'

14. Kind & Status Plug. Bond

15. Drilling Contractor
 N/A

16. Approx. Date Work will start
 Upon Approval (Oct/Nov)

17. PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
12-1/4"	8-5/8"	24#	326'	300	Surface
7-7/8"	5-1/2"	14#	3705'	250	2180'

Current Status - TA'd in the Langlie Mattix Seven Rivers Queen, GB

Proposed Operation

- 1) Set CIBP @ ± 3400'. Dump bail cement on CIBP.
- 2) Test casing and repair as necessary
- 3) Perf Yates Formation
- 4) Acidize
- 5) Frac
- 6) Put on pump

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. GIVE BLOWOUT PREVENTER PROGRAM, IF ANY.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE David Grafe TITLE Production Engineer DATE 10/12/92
 TYPE OR PRINT NAME David G. Grafe TELEPHONE NO. 682-6324

(This space for State Use)

APPROVED BY [Signature] TITLE Geologist DATE OCT 10 1992

CONDITIONS OF APPROVAL, IF ANY:

Approved for recompletion work only - Jalmat^{gas} production
 subject to NSL approval

Submit to Appropriate District Office
 State Lease - 4 copies
 Fee Lease - 3 copies

State of New Mexico
 Energy, Minerals and Natural Resources Department

Form C-102
 Revised 1-1-89

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

DISTRICT I
 P.O. Box 1980, Hobbs, NM 88240

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

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

WELL LOCATION AND ACREAGE DEDICATION PLAT
 All Distances must be from the outer boundaries of the section

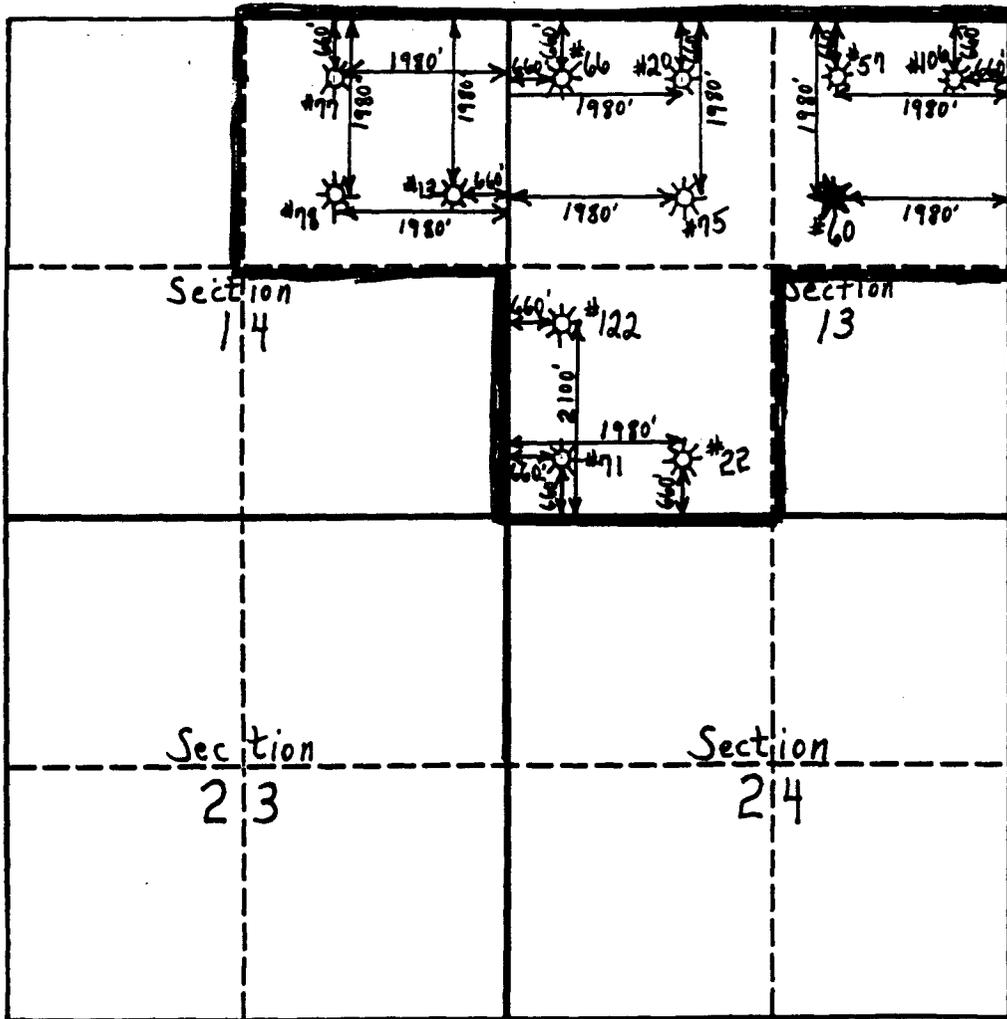
Operator Clayton W. Williams, Jr., Inc.			Lease State A A/C 1		Well No. 60
Unit Letter G	Section 13	Township 23S	Range 36E	County NMPM	Lea
Actual Footage Location of Well: 1980 feet from the North line and 1980 feet from the 1980 line East					
Ground level Elev. GR - 3391	Producing Formation Yates		Pool Jalmat Tansill Yates 7 Rivers	Dedicated Acreage: 640 Acres	

- Outline the acreage dedicated to the subject well by colored pencil or hatchure marks on the plat below.
- If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).
- If more than one lease of different ownership is dedicated to the well, have the interest of all owners been consolidated by communitization, unitization, force-pooling, etc.?

Yes No If answer is "yes" type of consolidation _____

If answer is "no" list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if necessary.) _____

No allowable will be assigned to the well until all interests have been consolidated (by communitization, unitization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interest, has been approved by the Division.



OPERATOR CERTIFICATION
 I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.

Signature: *David G. Grafe*

Printed Name: David G. Grafe

Position: Production Engineer

Company: Clayton W. Williams, Jr. Inc

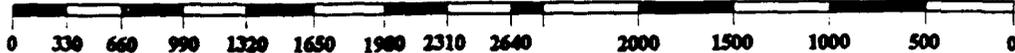
Date: 10/13/92

SURVEYOR CERTIFICATION
 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 knowledge and belief.

Date Surveyed: _____

Signature & Seal of Professional Surveyor: _____

Certificate No.: _____



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

State of New Mexico
 Energy, Minerals and Natural Resources Department

Form C-104
 Revised 1-1-89
 See Instructions
 at Bottom of Page

DISTRICT II
 P.O. Drawer 10D, Arterio, NM 88210

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

OIL CONSERVATION DIVISION
 RECEIVED

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

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

101 JUL 25 AM 9 53

I.

Operator Clayton W. Williams, Jr., Inc.	Well API No. 30-025- 09345
Address Six Desta Drive, Suite 3000, Midland, Texas 79705	
Reason(s) for Filing (Check proper box) <input checked="" type="checkbox"/> Other (Please explain)	
New Well <input type="checkbox"/>	Change in Transporter of: <input checked="" type="checkbox"/> effective July 1, 1991
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Operator <input checked="" type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
If change of operator give name and address of previous operator <u>Hal J. Rasmussen Operating Inc., Six Desta Drive, Suite 2700, Midland, Texas 79705</u>	

II. DESCRIPTION OF WELL AND LEASE

Lease Name State A A/C 1	Well No. 60	Pool Name, Including Formation Langlie Mattix Seven Rvs. Queen GB	Kind of Lease State, Federal or Fee	Lease No.
Location Unit Letter <u>G</u> : <u>1980</u> Feet From The <u>North</u> Line and <u>1980</u> Feet From The <u>East</u> Line Section <u>13</u> Township <u>23S</u> Range <u>36E</u> , NMPM, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
<u>Texas New Mexico Pipeline Co.</u>	<u>Box 42130, Houston, Texas 77242</u>
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
<u>Xcel Gas Company</u>	<u>Six Desta Drive, Suite 5700, Midland, Texas 79705</u>
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When ?

If this production is commingled with that from any other lease or pool, give commingling order number: _____

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded	Date Compl. Ready to Prod.		Total Depth			P.B.T.D.		
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay			Tubing Depth		
Perforations							Depth Casing Shoe	
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET			SACKS CEMENT		

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours.)

Date First New Oil Run To Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas- MCF

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. OPERATOR CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Dorothea Owens
 Signature
 Dorothea Owens Regulatory Analyst
 Printed Name Title
 June 7, 1991 (915) 682-6324
 Date Telephone No.

OIL CONSERVATION DIVISION

Date Approved JUL 19 1991

By [Signature]

Title : DISTRICT 1 SUPERVISOR

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 I
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-104
Revised 1-1-89
See Instructions
at Bottom of Page

OIL CONSERVATION DIVISION

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

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

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

I.

Operator Hal J. Rasmussen Operating, Inc.	Well API No.
Address Six Desta Drive, Suite 5850 - Midland, Texas 79705	
Reason(s) for Filing (Check proper box) <input checked="" type="checkbox"/> Other (Please explain)	
New Well <input type="checkbox"/>	Change in Transporter of: Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Change in name
Recompletion <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Change in Operator <input type="checkbox"/>	
If change of operator give name and address of previous operator Hal J. Rasmussen, 306 W. Wall, Suite 600 - Midland, Texas	

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AUG 31 1989

OIL CONSERVATION DIV.
SANTA FE

II. DESCRIPTION OF WELL AND LEASE

Lease Name State A A/C 1	Well No. 60	Pool Name, Including Formation Langlie Mattix SR Qu GB	Kind of Lease State, Leasehold Lease	Lease No.
Location Unit Letter <u>G</u> : 1980 Feet From The <u>North</u> Line and 1980 Feet From The <u>East</u> Line Section <u>13</u> Township <u>23 S</u> Range <u>36 E</u> , NMPM, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Texas New Mexico Pipeline Co.	Box 42130, Houston, Texas 77242
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Phillips 66 Natural Gas Co.	Bartlesville, Oklahoma
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When?

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded	Date Compl. Ready to Prod.		Total Depth			P.B.T.D.		
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay			Tubing Depth.		
Perforations						Depth Casing Shoe		
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE		CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT		

V. TEST DATA AND REQUEST FOR ALLOWABLE

OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours.)

Date First New Oil Run To Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas- MCF

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. OPERATOR CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Wm. Scott Ramsey
Signature
Wm. Scott Ramsey General Manager
Printed Name Title
July 13, 1989 915-687-1664
Date Telephone No.

OIL CONSERVATION DIVISION

AUG 30 1989

Date Approved _____
By *[Signature]*
Title DISTRICT I SUPERVISOR

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.

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

RECEIVED
JAN 10 1989
OIL CONSERVATION DIVISION
SANTA FE

Form C-104
Revised 10-01-78
Format 06-01-83
Page 1

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

NO. OF COPIES RECEIVED	
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SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PROMOTION OFFICE	

I.

Operator Hal J. Rasmussen

Address 306 W. Wall, Suite 600, Midland, Texas 79701

Reason(s) for filing (Check proper box)

<input type="checkbox"/> New Well	Change in Transporter of:	Other (Please explain) <u>Effective Dec. 1, 1988</u>
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Oil <input type="checkbox"/> Dry Gas	
<input checked="" type="checkbox"/> Change in Ownership	<input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate	

If change of ownership give name and address of previous owner Sun Exploration & Production Company P.O. Box 1861, Midland, Texas 79701

II. DESCRIPTION OF WELL AND LEASE 1a'd

Lease Name <u>State A A/C 1</u>	Well No. <u>60</u>	Pool Name, including Formation <u>Langlie Mattix Seven</u>	Kind of Lease <u>State, Federal or Fee</u>	State <u>State</u>
Location <u>Rivers Queen GB</u>				
Unit Letter <u>G</u>	: <u>1980</u>	Feet From The <u>North</u>	Line and <u>1980</u>	Feet From The <u>East</u>
Line of Section <u>13</u>	Township <u>23S</u>	Range <u>36E</u>	N.M.P.M.	Lea <u>Lea</u>

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> <u>Texas New Mexico Pipeline Co.</u>	Address (Give address to which approved copy of this form is to be sent) <u>Box 42130, Houston, Tx 77242</u>
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> <u>El Paso Natural Gas Co. Phillips 66 Nat'l</u>	Address (Give address to which approved copy of this form is to be sent) <u>Box 1492, El Paso, TX 79978</u>
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. (is gas actually connected) when

If this production is commingled with that from any other lease or pool, give commingling order number: _____

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.

Wm Scott Ramsey
(Signature)
Wm Scott Ramsey General Manager
(Title)
12-6-88
(Date)

OIL CONSERVATION DIVISION
DEC 29 1988

APPROVED _____

BY [Signature]

TITLE **DISTRICT 1 SUPERVISOR**

This form is to be filed in compliance with RULE 1104.
If this is a request for allowable for a newly drilled or deeper well, this form must be accompanied by a tabulation of the deviate tests taken on the well in accordance with RULE 111.
All sections of this form must be filled out completely for all wells on new and recompleted wells.
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.
Separate Forms C-104 must be filed for each pool in multi-completed wells.

388 28 030
500
ADNFO 8808

IV. COMPLETION DATA

Designate Type of Completion - (X)		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Resrv.	Drill
Date Spudded	Date Compl. Ready to Prod.		Total Depth			P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay			Tubing Depth			
Perforations							Depth Casing Shoe		
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE			DEPTH SET			SACKS CEMENT		

V. TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of lost oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)		
Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF	

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Sealing Method (pilot, sack pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

NOV 9 1988
 RECEIVED

RECEIVED
 DEC 23 1988
 OCD
 HOBBS OFFICE

DISTRIBUTION		
SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

**NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS**

Form C-104
Supersedes Old C-104 and ()
Effective 1-1-65

I. Operator
Sun Exploration & Production Co.

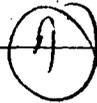
Address
P. O. Box 1861, Midland, Texas 79702

Reason(s) for filing (Check proper box)

New Well <input type="checkbox"/>	Change in Transporter of:	Oil <input type="checkbox"/>	Dry Gas <input type="checkbox"/>
Recompletion <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/>	Condensate <input type="checkbox"/>	
Change in Ownership <input type="checkbox"/>			

Other (Please explain)
Name Change Only
From: Sun Oil Company

If change of ownership give name and address of previous owner _____



II. DESCRIPTION OF WELL AND LEASE

Lease Name State "A" A/C 1	Well No. 60	Pool Name, including Formation Langlie Mattix 7 Rvrs.Q.Gryb	Kind of Lease State, Federal or Fee State	Lease No.
Location Unit Letter <u>G</u> ; <u>1980</u> Feet From The <u>North</u> Line and <u>1980</u> Feet From The <u>East</u> Line of Section <u>13</u> Township <u>23-S</u> Range <u>36-E</u> , NMPM, <u>Lea</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Texas New Mexico Pipeline Co.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 2528, Hobbs, NM 88240
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Phillips Petroleum Co.	Address (Give address to which approved copy of this form is to be sent) 4001 Penbiank St., Odessa, Texas 79762
If well produces oil or liquids, give location of tanks.	Unit <u>13</u> Sec. <u>23</u> Twp. <u>36</u> Rge. <u>36</u> Is gas actually connected? <u>Yes</u> When <u>1960</u>

If this production is commingled with that from any other lease or pool, give commingling order number: _____

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res
Date Spudded	Date Compl. Ready to Prod.	Total Depth			P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay			Tubing Depth			
Perforations				Depth Casing Shoe				

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

(Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bble. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

VI. CERTIFICATE OF COMPLIANCE

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.

Dee Ann Kemp
(Signature)
Acct. Asst. II
(Title)
12-16-81
(Date)

OIL CONSERVATION COMMISSION

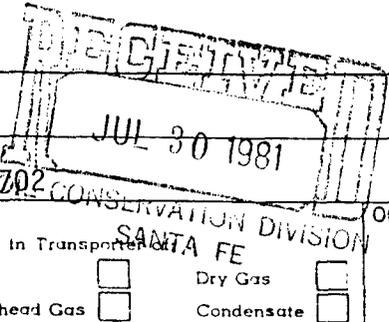
APPROVED _____, 19____
BY J. M. [Signature]
TITLE SUPERVISOR DISTRICT I

This form is to be filed in compliance with RULE 1104.
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.
All sections of this form must be filled out completely for allowable on new and recompleted wells.
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. Separate Form C-104 must be filed for each pool in multiple.

DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C
Effective 1-1-65



I. OPERATOR
Operator: SUN OIL COMPANY
Address: P.O. Box 1861, Midland, TX 79702
Reason(s) for filing (Check proper box):
 New Well Change in Transporter
 Recompletion Oil Dry Gas
 Change in Ownership Casinghead Gas Condensate

If change of ownership give name and address of previous owner: SUN TEXAS COMPANY, P.O. Box 4067, Midland, TX 79704

II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>State "A" A/C-1</u>	Well No. <u>60</u>	Pool Name, Including Formation <u>Langlie-Mattix 7 Rvrs.Q.Gryb.</u>	Kind of Lease <u>State, Federal or Fee State</u>	Lease No.
Location Unit Letter <u>G</u> ; <u>1980</u> Feet From The <u>North</u> Line and <u>1980</u> Feet From The <u>East</u> Line of Section <u>13</u> Township <u>23-S</u> Range <u>36-E</u> , NMPM, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/> <u>Texas New Mexico Pipeline Co.</u>	Address (Give address to which approved copy of this form is to be sent) <u>P.O. Box 2528, Hobbs, NM 88240</u>			
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> <u>Phillips Petroleum Co.</u>	Address (Give address to which approved copy of this form is to be sent) <u>4001 Penbiank St., Odessa, TX 79762</u>			
If well produces oil or liquids, give location of tanks.	Unit <u>13</u>	Sec. <u>23</u>	Twp. <u>36</u>	Rge. <u>36</u>
	Is gas actually connected? <u>Yes</u>		When <u>1-9-60</u>	

If this production is commingled with that from any other lease or pool, give commingling order number: _____

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'
Date Spudded	Date Compl. Ready to Prod.		Total Depth			P.B.T.D.		
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay			Tubing Depth		
Perforations						Depth Casing Shoe		
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET			SACKS CEMENT		

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

VI. CERTIFICATE OF COMPLIANCE

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.

(Signature)
Production/Proration Supervisor
(Title)
July 1, 1981
(Date)

OIL CONSERVATION COMMISSION

APPROVED 1981
BY
TITLE SUPERVISOR DISTRICT 1

This form is to be filed in compliance with RULE 1104.
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviated tests taken on the well in accordance with RULE 111.
All sections of this form must be filled out completely for allowable on new and recompleted wells.
Fill out only Sections I, II, III, and VI for changes of ownership, well name or number, or transporter, or other such change of conditions. Separate Forms C-104 must be filed for each pool in multiple completions.

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-105
Effective 1-1-65

DISTRIBUTION		
SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

Operator
SUN TEXAS COMPANY

Address
P. O. Box 4067 Midland, Texas 79704

Reason(s) for filing (Check proper box) Other (Please explain)

New Well Change in Transporter of:
 Recompletion Oil Dry Gas
 Change in Ownership Casinghead Gas Condensate

If change of ownership give name and address of previous owner TEXAS PACIFIC OIL COMPANY, INC. P. O. Box 4067 Midland, TX, 79704

II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>STATE A A/C-1</u>	Well No. <u>60</u>	Pool Name, Including Formation <u>LANGLIE-MATIX 7 RULS</u>	Kind of Lease <u>State, Federal or Fee STATE</u>	Lease No.
Location <u>Q. Gyps</u>				
Unit Letter <u>G</u>	<u>1980</u>	Feet From The <u>NORTH</u> Line and	<u>1980</u>	Feet From The <u>EAST</u>
Line of Section <u>13</u>	Township <u>23-S</u>	Range <u>36-E</u>	NMPM, <u>LEA.</u>	County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> <u>Texas-New Mexico Pipeline Co</u>	Address (Give address to which approved copy of this form is to be sent) <u>P.O. Box 2528, Dallas New Mexico 88221</u>			
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> <u>PHILLIPS PETROLEUM CO.</u>	Address (Give address to which approved copy of this form is to be sent) <u>4001 Petroleum Blvd, Box 6666, Odessa, TX. 79762</u>			
If well produces oil or liquids, give location of tanks.	Unit <u>13</u>	Sec. <u>23-S</u>	Twp. <u>36-E</u>	Page <u>36-E</u>
	Is gas actually connected? <u>YES</u>		When <u>1/9/60</u>	

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded	Date Compl. Ready to Prod.		Total Depth			P.B.T.D.		
Elevations (DF, RKB, RT, CR, etc.)	Name of Producing Formation		Top Oil/Gas Pay			Tubing Depth		
Perforations						Depth Casing Shoe		
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE			DEPTH SET		SACKS CEMENT		

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

VI. CERTIFICATE OF COMPLIANCE

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.

C. English
(Signature)

Regional Operations Superintendent/West
(Title)

SEP 12 1960
(Date)

OIL CONSERVATION COMMISSION

APPROVED OCT 27 1960, 19__

BY James S. ...
TITLE SUPERVISOR DISTRICT

This form is to be filed in compliance with RULE 1104.
 If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.
 All sections of this form must be filled out completely for allowable on new and recompleted wells.
 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.
 Separate Forms C-104 must be filed for each pool in multiple completion wells.

NEW MEXICO OIL CONSERVATION COMMISSION

NO. OF COPIES RECEIVED		
DISTRIBUTION		
SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
OPERATOR		

5a. Indicate Type of Lease
 State Fee
 5. State Oil & Gas Lease No.
NM-2A

SUNDRY NOTICES AND REPORTS ON WELLS
 (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO RE-DRILL OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL GAS WELL OTHER

2. Name of Operator
Texas Pacific Oil Company Inc.

3. Address of Operator
P.O. Box 4067, Midland, Texas 79701

4. Location of Well
 UNIT LETTER G 1980 FEET FROM THE North LINE AND 1980 FEET FROM
 THE East LINE, SECTION 13 TOWNSHIP 23-S RANGE 36-E N.M.P.M.

7. Unit Agreement Name

6. Form of Lease Name
State "A" Ac-1

9. Well No.
60

10. Field and Pool, or Wildcat
Langlie Mattix

15. Elevation (Show whether DF, RT, GR, etc.)
3401' DF

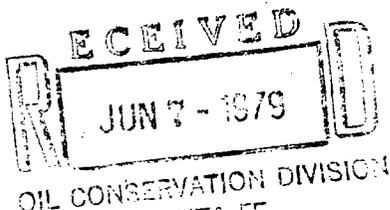
12. County
Lee

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input checked="" type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER <input type="checkbox"/>

7. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

S-16-79 Acidized w/1000 15% FE NE Acid & Treated Formation for scale and corrosion w/ 110 Gals SP 203 plus 110 Gals KP 102 corrosion Inhibitor. Returned to production.



I hereby certify that the information above is true and complete to the best of my knowledge and belief.

APPROVED BY W. J. McClintock TITLE Reg Oper Supt. DATE 5-18-79

APPROVED BY [Signature] TITLE SUPERVISOR DISTRICT I DATE JUN 6 1979

CONDITIONS OF APPROVAL, IF ANY:

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

14100
 1970 APR 6 AM 8 50

5a. Indicate Type of Lease
 State Fee
 5. State Oil & Gas Lease No.
 NM - 2A

SUNDRY NOTICES AND REPORTS ON WELLS
 (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL GAS WELL OTHER
 2. Name of Operator: Texas Pacific Oil Company, Inc.
 3. Address of Operator: P. O. Box 1069, Hobbs, New Mexico 88240
 4. Location of Well: UNIT LETTER G, 1980 FEET FROM THE North LINE AND 1980 FEET FROM THE East LINE, SECTION 13 TOWNSHIP 23-S RANGE 36-E NMPM.
 7. Unit Agreement Name
 8. Farm or Lease Name: State "A" A/c-1
 9. Well No.: 60
 10. Field and Pool, or Wildcat: Langlie Mattix
 15. Elevation (Show whether DF, RT, GR, etc.): 3401' DF
 12. County: Lea

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input checked="" type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER <input type="checkbox"/>

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

- Moved in, rigged up, pulled rods and tubing.
- Set CIBP at 3580' /
- Perforated 3470-78-82-3502-06-22-39-51-62-66' with 3/8" JSPF.
- Packer set at 3450', Acidized with 2500 gal. 15% N.E. acid with balls.
- Pulled tubing and packer. Ran tubing rods and pump.
- Placed well on test.

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED [Signature] TITLE Area Superintendent DATE April 2, 1970

APPROVED BY [Signature] TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

NO. OF COPIES RECEIVED	
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SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

RECEIVED

MAR 20 1970

NEW MEXICO OIL CONSERVATION COMMISSION

MAIN OFFICE 000
970 MAR 27 AM 8 34

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

<p>SHORRY NOTICES AND REPORTS ON WELLS <small>DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.</small></p>		<p>5a. Indicate Type of Lease State <input checked="" type="checkbox"/> Fee <input type="checkbox"/></p> <p>5. State Oil & Gas Lease No. NM-2 A</p>
1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name	
2. Name of Operator Texas Pacific Oil Company, Inc.	8. Farm or Lease Name State "A" A/c-1	
3. Address of Operator P. O. Box 1069, Hobbs, New Mexico 88240	9. Well No. 60	
4. Location of Well UNIT LETTER <u>G</u> <u>1980</u> FEET FROM THE <u>North</u> LINE AND <u>1980</u> FEET FROM THE <u>East</u> LINE, SECTION <u>13</u> TOWNSHIP <u>23-S</u> RANGE <u>36-E</u> NMPM.	10. Field and Pool, or Wildcat Langlie Mattix	
15. Elevation (Show whether DF, RT, GR, etc.) 3401' DF		12. County Lea

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input checked="" type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER <input type="checkbox"/>

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

1. Move in and rig up. Pull rods, pump and tubing.
2. Set CIBP at 3580'.
3. Perf. 3470-78-82-3502-06-22-39-51-62 and 66'.
4. Run retrievable packer at 3450'. Acidize with 2500 gal. 15% NE.
5. Release packer. Run tubing, pump and rods.
6. Place well on test.

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED [Signature] TITLE Area Superintendent DATE March 19, 1970

APPROVED BY [Signature] TITLE SUPERVISOR DISTRICT DATE _____

CONDITIONS OF APPROVAL, IF ANY:

HOBBS OFFICE
REVISED 7/1/55

(File the original and 4 copies with the appropriate district office)

CERTIFICATE OF COMPLIANCE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

1960 JAN 19 AM 10:29

Company or Operator Texas Pacific Coal & Oil Company Lease State "A" A/c-1

Well No. 60 Unit Letter G S 13 T23-S R36-E Pool Langlie-Mattix

County Lea Kind of Lease (State, Fed. or Patented) State

If well produces oil or condensate, give location of tanks: Unit NE 1/4 S 13 T23-S R 36-E

Authorized Transporter of Oil or Condensate _____

Address _____

(Give address to which approved copy of this form is to be sent)

Authorized Transporter of Gas Phillips Petroleum Company

Address P. O. Box 6666, Odessa, Texas Date Connected 1/9/60

(Give address to which approved copy of this form is to be sent)

If Gas is not being sold, give reasons and also explain its present disposition:

Reasons for Filing: (Please check proper box) New Well ()

Change in Transporter of (Check One): Oil Dry Gas C'head Condensate

Change in Ownership Other (X)

Remarks: _____ (Give explanation below)

Gas now connected.

CHANGE OF OPERATION FROM
TEXAS PACIFIC OIL COMPANY
A DIVISION OF JOSEPH E. SEBASTIAN & SONS, INC.
TO TEXAS PACIFIC OIL COMPANY, INC.
EFFECTIVE MAY 1, 1960

Name Changed from
TEXAS PACIFIC COAL AND OIL COMPANY
to TEXAS PACIFIC OIL COMPANY
Effective November 1, 1963

The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.

Executed this the 15th day of January 19 60

By [Signature]

Approved JAN 19 1960 19 _____

Title Petroleum Engineer

OIL CONSERVATION COMMISSION

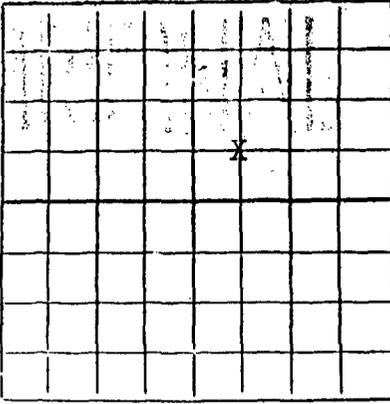
Company Texas Pacific Coal & Oil Company

By [Signature]

Address P. O. Box 1688

Title Engineer District 1

Hobbs, New Mexico



NEW MEXICO OIL CONSERVATION COMMISSION

Santa Fe, New Mexico **HOBBS OFFICE OCC**

1959 AUG 24 AM 8:58
WELL RECORD

Mail to District Office, Oil Conservation Commission, to which Form C-101 was sent not later than twenty days after completion of well. Follow instructions in Rules and Regulations of the Commission. Submit in QUINTUPLICATE. If State Land submit 6 Copies

AREA 640 ACRES
LOCATE WELL CORRECTLY

Texas Pacific Coal & Oil Company (Company or Operator) New Mexico State "A" A/c-1 (Lease)
Well No. 60, in SW 1/4 of NE 1/4, of Sec. 13, T. 23-S, R. 36-E, NMPM.
Langlie-Mattix Pool, Lea County.
Well is 1980 feet from North line and 1980 feet from East line of Section 13. If State Land the Oil and Gas Lease No. is A-983.
Drilling Commenced May 5, 1959. Drilling was Completed May 15, 1959.
Name of Drilling Contractor F.W.A. Drilling Company Inc.
Address Wichita Falls, Texas
Elevation above sea level at Top of Tubing Head 3391. The information given is to be kept confidential until _____, 19_____.

OIL SANDS OR ZONES

No. 1, from * 3593 to 3606 No. 4, from * 3626 to 3628
No. 2, from * 3609 to 3615 No. 5, from _____ to _____
No. 3, from * 3617 to 3620 No. 6, from _____ to _____

IMPORTANT WATER SANDS

Include data on rate of water inflow and elevation to which water rose in hole.
No. 1, from _____ to _____ feet.
No. 2, from _____ to _____ feet.
No. 3, from _____ to _____ feet.
No. 4, from _____ to _____ feet.

CASING RECORD

SIZE	WEIGHT PER FOOT	NEW OR USED	AMOUNT	KIND OF SHOE	CUT AND PULLED FROM	PERFORATIONS	PURPOSE
8 5/8	24	New	315	Float			Surface string
5 1/2	14	New	3695	Float		* 3593 - 3628	

MUDDING AND CEMENTING RECORD

SIZE OF HOLE	SIZE OF CASING	WHERE SET	NO. BAGS OF CEMENT	METHOD USED	MUD GRAVITY	AMOUNT OF MUD USED
12 1/4	8 5/8	326	300	Pump & Plug		
7 7/8	5 1/2	3705	250 / 4% gel	Pump & Plug		

RECORD OF PRODUCTION AND STIMULATION

(Record the Process used, No. of Qts. or Gals. used, interval treated or shot.)

Perforated 3593 - 3606, 3609 - 3615, 3617 - 3620, 3626 - 3628 with 4 shots/foot.
Treated with 1000 gal. mud acid and SOT with 25,000 gal. refined oil and 50,000 lbs. sand.
Result of Production Stimulation. Flowed 167 bbls. oil and 22 bbls. BS&W in 6 hours through a 22/64" choke. Tubing pressure was 475 p.s.i. GOR-668.
Depth Cleaned Out 3695 D.F.

1959 AUG 23
 MAIN OFFICE OCC
 5 17

RECORD OF DRILL-STEM AND SPECIAL TESTS

If drill-stem or other special tests or deviation surveys were made, submit report on separate sheet and attach hereto

TOOLS USED

Rotary tools were used from feet to feet, and from feet to feet.
 Cable tools were used from feet to feet, and from feet to feet.

PRODUCTION

Put to Producing 19.....

OIL WELL: The production during the first 24 hours was barrels of liquid of which% was
 was oil;% was emulsion;% water; and% was sediment. A.P.I.
 Gravity.....

GAS WELL: The production during the first 24 hours was M.C.F. plus barrels of
 liquid Hydrocarbon. Shut in Pressure..... lbs.

Length of Time Shut in.....

PLEASE INDICATE BELOW FORMATION TOPS (IN CONFORMANCE WITH GEOGRAPHICAL SECTION OF STATE):

Southeastern New Mexico		Northwestern New Mexico	
T. Anhy.....	1800	T. Devonian.....	T. Ojo Alamo.....
T. Salt.....	1850	T. Silurian.....	T. Kirtland-Fruitland.....
B. Salt.....	2700	T. Montoya.....	T. Farmington.....
T. Yates.....	2710	T. Simpson.....	T. Pictured Cliffs.....
T. 7 Rivers.....	2815	T. McKee.....	T. Menefee.....
T. Queen.....	3150	T. Ellenburger.....	T. Point Lookout.....
T. Grayburg.....		T. Gr. Wash.....	T. Mancos.....
T. San Andres.....		T. Granite.....	T. Dakota.....
T. Glorieta.....		T.	T. Morrison.....
T. Drinkard.....		T.	T. Penn.....
T. Tubbs.....		T.	T.
T. Abo.....		T.	T.
T. Penn.....		T.	T.
T. Miss.....		T.	T.

FORMATION RECORD

From	To	Thickness in Feet	Formation	From	To	Thickness in Feet	Formation
1000	1100	100	Red & Blue sand				
1100	1200	100	Red sand				
1200	1311	111	Red sand & sandstone				
1311	2720	1409	sandstone & shale				
2720	2976	256	sandstone, lime, & Gyp				
2976	3011	35	lime & Gyp				
3011	3700	689	lime				

ATTACH SEPARATE SHEET IF ADDITIONAL SPACE IS NEEDED

I hereby swear or affirm that the information given herewith is a complete and correct record of the well and all work done on it so far as can be determined from available records.

August 12, 1937

Company or Operator..... *James Pauline Coal & Oil Co.* Address..... *1200 ...* (Date)
 Name..... *Jerry E. ...* Position or Title.....

BEST COPY available

NEW MEXICO OIL CONSERVATION COMMISSION
SANTA FE, NEW MEXICO

Form C-110
Revised 7/1/55

(File the original and 4 copies with the appropriate district office)

CERTIFICATE OF COMPLIANCE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Company or Operator Texas Pacific Coal & Oil Company Lease State "A" A/C-1

Well No. 60 Unit Letter G S 13 T 23S R 36E Pool Langlie-Mattix

County Lea Kind of Lease (State, Fed. or Patented) State

If well produces oil or condensate, give location of tanks: Unit NE 1/4 S 13 T 23S R 36E

Authorized Transporter of Oil or Condensate Texas-New Mexico Pipeline Co.

Address Box 1510 Midland, Texas

(Give address to which approved copy of this form is to be sent)

Authorized Transporter of Gas _____

Address _____ Date Connected _____

(Give address to which approved copy of this form is to be sent)

If Gas is not being sold, give reasons and also explain its present disposition:

Gas being vented. No pipeline connection.

Reasons for Filing: (Please check proper box) New Well _____ (x)

Change in Transporter of (Check One): Oil () Dry Gas () C'head () Condensate ()

Change in Ownership _____ () Other _____ ()

Remarks: _____ (Give explanation below)

The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.

Executed this the 26th day of May 1959

By John R. Pitt

Title Petroleum Engineer

Company Texas Pacific Coal & Oil Co.

Address P. O. Box 1688

Hobbs, New Mexico

Approved _____ 19 _____

OIL CONSERVATION COMMISSION

By [Signature]

Title _____

REQUEST FOR (OIL) - (GAS) ALLOWABLE

New Well
Recompletion

This form shall be submitted by the operator before an initial allowable will be assigned to any completed Oil or Gas well. Form C-104 is to be submitted in QUADRUPPLICATE to the same District Office to which Form C-101 was sent. The allowable will be assigned effective 7:00 A.M. on date of completion or recompletion, provided this form is filed during calendar month of completion or recompletion. The completion date shall be that date in the case of an oil well when new oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

Hobbs, New Mexico

May 26, 1959

(Place)

(Date)

WE ARE HEREBY REQUESTING AN ALLOWABLE FOR A WELL KNOWN AS:

Texas Pacific Coal & Oil Co. State "A" A/c-1, Well No. 60, in SW 1/4 NE 1/4,
(Company or Operator) (Lease)

G, Sec. 13, T. 23S, R. 36E, NMPM, Langlie-Mattix Pool
Unit Letter

Lea

County Date Spudded 5/5/59 Date Drilling Completed 5/15/59

Please indicate location:

Elevation 3402 KB 3391 GL Total Depth 3706 PBD 3695

Top Oil/Gas Pay 3593 Name of Prod. Form. Queens

D	C	B	A
E	F	G x	H
L	K	J	I
M	N	O	P

PRODUCING INTERVAL -

Perforations 3593-3606; 3609-3615; 3617-20; 3626-28

Open Hole - Depth Casing Shoe 3705 Depth Tubing 3635

OIL WELL TEST -

Natural Prod. Test: _____ bbls.oil, _____ bbls water in _____ hrs, _____ min. Choke Size _____

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): 167 bbls.oil, 22 bbls water in 6 hrs, - min. Choke Size 22/64

GAS WELL TEST - T.P. 475 GOR 668

Natural Prod. Test: _____ MCF/Day; Hours flowed _____ Choke Size _____

Tubing, Casing and Cementing Record

Size	Feet	Sax
8-5/8	315	300
5-1/2	3695	250
2-3/8	3625	

Method of Testing (pitot, back pressure, etc.): _____

Test After Acid or Fracture Treatment: _____ MCF/Day; Hours flowed _____

Choke Size _____ Method of Testing: _____

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): 1,000 gal. mud acid

Casing Press. _____ Tubing Press. 2500 Date first new oil run to tanks 5/24/59

Oil Transporter Texas-New Mexico Pipeline Company

Gas Transporter None

Remarks: _____

I hereby certify that the information given above is true and complete to the best of my knowledge.

Approved: MAY 27 1959, 19.....

Texas Pacific Coal & Oil Company

(Company or Operator)

OIL CONSERVATION COMMISSION

By: *John S. Tate*

(Signature)

Title: Petroleum ENGINEER

Send Communications regarding well to:

Name: Texas PACIFIC Coal & Oil Company

Address: P. O. Box 1688 - Hobbs, N. M.

By: *[Signature]*

Engineer

Title: _____

NEW MEXICO OIL CONSERVATION COMMISSION

FORM C-103
(Rev 3-55)

MISCELLANEOUS REPORTS ON WELLS

(Submit to appropriate District Office as per Commission Rule 1106)

Name of Company Texas Pacific Coal & Oil Company		Address: P. O. Box 1688 Hobbs, New Mexico			
Lease State of New Mexico "A" A/c-1	Well No. 60	Unit Letter G	Section 13	Township 23-S	Range 36-E
Date Work Performed 5/13/59	Pool Langlie-Mattix		County Lea		

THIS IS A REPORT OF: (Check appropriate block)

Beginning Drilling Operations
 Casing Test and Cement Job
 Other (Explain):
 Plugging
 Remedial Work

Detailed account of work done, nature and quantity of materials used, and results obtained.

Drilled to T. D. of 3706'. Ran 112 jts. (3695'), 5½" 14# J-55, smls. csg. set at 3705'. Cemented with 250 sacks reg. neat 4% gel. Pumped plug to 3638' at 11:45 P.M., 5/13/59. Ran float shoe and float collar. Float collar on top of second joint.

Ran temperature survey after 12 hours. Top of cement at 2180'. Cement in 5½" casing at 3512'. Drilled out cement to 3695'. Tested casing with 900 psi for 30 minutes before and after drilling out cement.

Witnessed by Jerry Eskew	Position Petroleum Engineer	Company Texas Pacific Coal & Oil Company
------------------------------------	---------------------------------------	--

FILL IN BELOW FOR REMEDIAL WORK REPORTS ONLY

ORIGINAL WELL DATA

D F Elev.	T D	P B T D	Producing Interval	Completion Date
Tubing Diameter	Tubing Depth	Oil String Diameter	Oil String Depth	
Perforated Interval(s)				
Open Hole Interval		Producing Formation(s)		

RESULTS OF WORKOVER

Test	Date of Test	Oil Production BPD	Gas Production MCFPD	Water Production BPD	GOR Cubic feet/Bbl	Gas Well Potential MCFPD
Before Workover						
After Workover						

OIL CONSERVATION COMMISSION

I hereby certify that the information given above is true and complete to the best of my knowledge.

Approved by 	Name Jerry Eskew
Title Petroleum Engineer	Position Petroleum Engineer
Date	Company Texas Pacific Coal & Oil Company

NEW MEXICO OIL CONSERVATION COMMISSION

FORM C-103
(Rev 3-55)

MISCELLANEOUS REPORTS ON WELLS

HOBBS OFFICE 070

(Submit to appropriate District Office as per Commission Rule 1106)

Name of Company Texas Pacific Coal & Oil Company		Address P. O. Box 1688		Date MAY 12 AM 6 55		City Hobbs, New Mexico	
Lease State "A" A/c-1	Well No. 60	Unit Letter G	Section 13	Township 23-S	Range 36-E		
Date Work Performed 5/5/59	Pool Langlie-Mattix		County Lea				

THIS IS A REPORT OF: (Check appropriate block)

Beginning Drilling Operations
 Casing Test and Cement Job
 Other (Explain):
 Plugging
 Remedial Work

Detailed account of work done, nature and quantity of materials used, and results obtained.

Spudded at 5:30 P.M., 5/5/59. Drilled to 328' in redbed. Ran 10 joints 8-5/8" 24#, H-40, smls. casing, 315', with float shoe set at 326'. Cemented w/300 sacks reg. neat. Pumped plug to 286' at 10:00 P.M., 5/5/59, cement circulated. Tested casing in 24 hours with 800 psi for thirty minutes. Test o.k.

Witnessed by Jerry Eskew	Position Petroleum Engineer	Company Texas Pacific Coal & Oil Company
------------------------------------	---------------------------------------	--

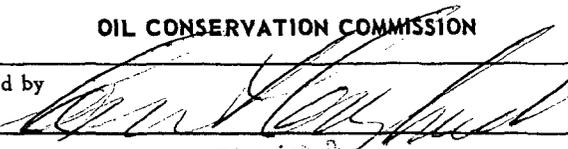
FILL IN BELOW FOR REMEDIAL WORK REPORTS ONLY

ORIGINAL WELL DATA

D F Elev.	T D	P B T D	Producing Interval	Completion Date
Tubing Diameter	Tubing Depth	Oil String Diameter	Oil String Depth	
Perforated Interval(s)				
Open Hole Interval		Producing Formation(s)		

RESULTS OF WORKOVER

Test	Date of Test	Oil Production BPD	Gas Production MCFPD	Water Production BPD	GOR Cubic feet/Bbl	Gas Well Potential MCFPD
Before Workover						
After Workover						

OIL CONSERVATION COMMISSION		I hereby certify that the information given above is true and complete to the best of my knowledge.	
Approved by 	Name Jerry Eskew		
Title Engineer District A	Position Petroleum Engineer		
Date MAY 12 1959	Company Texas Pacific Coal & Oil Company		

OIL CONSERVATION COMMISSION

P. O. BOX 871

SANTA FE, NEW MEXICO

W. J. ...
100-233-...

September 24, 1959

C
O
P
Y

Texas Pacific Coal & Oil Company
Hobbs, New Mexico

Attention: Mr. Jerry Eskew

Administrative Order NFO-449

Gentlemen:

Reference is made to your application for permission to flare or vent low pressure casinghead gas from your State of New Mexico "A" Wells No 60, 57 and 66, located in the SW/4 NE/4, NW/4 NE/4, NW/4 NW/4, of Section 13, Township 23 South, Range 36 East, NMPM, Lea County, New Mexico, in the Langlie-Mattix Pool

By authority granted me under provisions of paragraph (10) of Order R-520, as amended by Order R-553, you are hereby authorized to flare gas from the above described wells until December 23, 1959.

In the future if you secure a connection for your gas, you must file an amended C-110 showing the applicable information. If you have not filed Form C-110, please do so immediately in compliance with the rule.

Prior to December 10, 1959, please furnish the Santa Fe office of the Commission with a progress report of your efforts to eliminate the flaring or venting of gas from the above described well. Failure to do so will subject the well to cancellation of allowable.

Very truly yours,

A. L. PORTER, Jr.,
Secretary-Director

ALP/JEK/og

cc: Oil Conservation Commission - Hobbs

OIL CONSERVATION COMMISSION
P. O. BOX 871
SANTA FE, NEW MEXICO

13-23-36
STATE A
Wells No. 60

January 11, 1960

C

Texas Pacific Coal & Oil Company
Hobbs, New Mexico

O

Attention: Mr. Jerry Eskew

Re: Administrative Orders NFO-429
and NFO-449

P

Gentlemen:

You are hereby notified that Administrative Order NFO-449 granted September 24, 1959, expired December 10, 1959. Well records on file at this office indicate that gas connections have not been made to your State "A" Wells No. 60, 57 and 66 located in the SW/4 NE/4, NW/4 NE/4 NW/4 NW/4 of Section 13, Township 23 South, Range 36 East, Lea County, New Mexico, in the Langlie-Mattix Pool.

Y

Flaring or venting of gas from the above described wells after December 10, 1959, is in violation of Order R-520 as amended by Order R-553, of the Oil Conservation Commission, and subjects the wells to cancellation of allowable.

Prior to January 20, 1960, please furnish the Santa Fe and Hobbs offices of the Commission with the reports requested in Commission letter to you dated September 24, 1959.

Status of your State "A" Ac 1 Well No. 27 covered by Administrative Order NFO-429 is requested at this time also.

Very truly yours,

A. L. PORTER, Jr.,
Secretary-Director

ALP/JEK/og
cc: Oil Conservation Commission - Hobbs

NEW MEXICO OIL CONSERVATION COMMISSION
Santa Fe, New Mexico

Form C-101
 Revised (12/1/55)

NOTICE OF INTENTION TO DRILL

OCC OFFICE 000

Notice must be given to the District Office of the Oil Conservation Commission and approval obtained before drilling or recompletion begins. If changes in the proposed plan are considered advisable, a copy of this notice showing such changes will be returned to the sender. Submit this notice in QUINTUPLICATE. One copy will be returned following approval. See additional instructions in Rules and Regulations of the Commission. If State Land submit 6 Copies Attach Form C-128 in triplicate to first 3 copies of form C-101

Fort Worth, Texas
 (Place)

April 29, 1959
 (Date)

OIL CONSERVATION COMMISSION
 SANTA FE, NEW MEXICO

Gentlemen:

You are hereby notified that it is our intention to commence the Drilling of a well to be known as
TEXAS PACIFIC COAL AND OIL COMPANY

(Company or Operator)

State of New Mexico "A" Ac. 1
 (Lease)

Well No. 60

"G"
 (Unit)

The well is

located 1980 feet from the North line and 1980 feet from the East line of Section 13, T.23-S, R. 36-NMPM.

(GIVE LOCATION FROM SECTION LINE)

Langlie-Mattix Pool,

Lea County

County

If State Land the Oil and Gas Lease is No. A-983

If patented land the owner is

Address

We propose to drill well with drilling equipment as follows: Rotary Rig

The status of plugging bond is Required Bond on File

Drilling Contractor F. W. A. Drilling Company

First National Bank Building

Wichita Falls, Texas

We intend to complete this well in the 7-Rivers

formation at an approximate depth of 4,000 feet.

CASING PROGRAM

We propose to use the following strings of Casing and to cement them as indicated:

Size of Hole	Size of Casing	Weight per Foot	New or Second Hand	Depth	Sacks Cement
11"	8-5/8"	28#	New	300'	300
7-7/8"	5-1/2"	14#	New	4,000'	500

If changes in the above plans become advisable we will notify you immediately.

ADDITIONAL INFORMATION (If recompletion give full details of proposed plan of work.)

MAY 4 1959

Approved _____, 19_____
 Except as follows:

OIL CONSERVATION COMMISSION

By _____

Sincerely yours,

TEXAS PACIFIC COAL AND OIL COMPANY

(Company or Operator)

By _____

Position Manager of Production

Send Communications regarding well to

Name D. A. Bonney

Address P. O. Box 2110, Fort Worth 1, Texas

WELL LOCATION AND ACREAGE DEDICATION PLAT

SEE INSTRUCTIONS FOR COMPLETING THIS FORM ON THE REVERSE SIDE

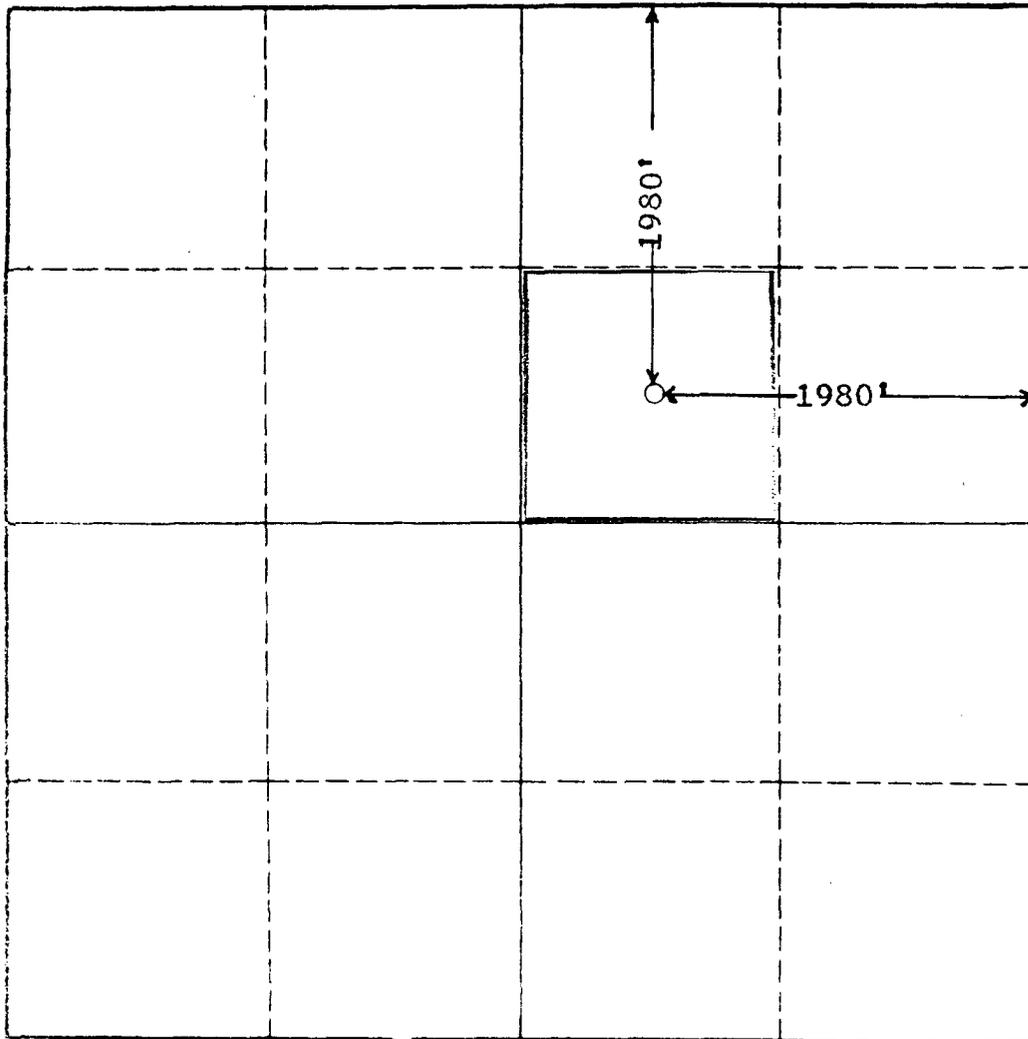
SECTION A

Operator Texas Pacific Coal & Oil Co.		Lease N.M. State "A" Account #1		Well No. 60 7 23
Unit Letter G	Section 13	Township 23 South	Range 36 East	County Lea
Actual Footage Location of Well: 1980 feet from the North line and 1980 feet from the East line				
Ground Level Elev.	Producing Formation 7-Rivers	Pool Langlie-Mattix	Dedicated Acreage: 40 Acres	

1. Is the Operator the only owner in the dedicated acreage outlined on the plat below? YES NO . ("Owner" means the person who has the right to drill into and to produce from any pool and to appropriate the production either for himself or for himself and another. (65-3-29 (e) NMSA 1935 Comp.)
2. If the answer to question one is "no," have the interests of all the owners been consolidated by communitization agreement or otherwise? YES NO . If answer is "yes," Type of Consolidation _____
3. If the answer to question two is "no," list all the owners and their respective interests below:

Owner	Land Description

SECTION B



CERTIFICATION

I hereby certify that the information in SECTION A above is true and complete to the best of my knowledge and belief.

Name: *[Signature]*
 Position: **Manager of Production**
 Company: **TEXAS PACIFIC COAL & OIL CO.**
 Date: **April 29, 1959**

I hereby certify that the well location shown on the plat in SECTION B 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 knowledge and belief.

Date Surveyed: **4-28-59**
 Registered Professional Engineer and/or Land Surveyor, **JOHN W. WEST**
[Signature]
 Certificate No. **W.M. - P.E. & L.S. NO. 676**