

GW - 019

C-103s

Chavez, Carl J, EMNRD

From: Chavez, Carl J, EMNRD
Sent: Wednesday, June 17, 2009 11:12 AM
To: Bratcher, Mike, EMNRD
Subject: RE: Loco Hills MIT/Sonar. etc. Inquiry

FYI.

It appears that there are 3 wells at this site based on my table with testing on one LPG storage well. Let me know if you are aware of more than one LPG Storage Well at the facility. Calibration sheets show instrument calibrated within last 6 months.

Looks like the 4 hr. formation MIT w/ nitrogen held steady at 280 psig and is within the +/- 1% pass range. The depth to the cavern is shallow, but the 280 psig held. Good.

Looks like the 30 minute EPA MIT w/ nitrogen held steady at 380 psig and is within +/- 10% pass range. Good.

Please contact me if you have questions or any concerns. Thank you.

Carl J. Chavez, CHMM
New Mexico Energy, Minerals & Natural Resources Dept.
Oil Conservation Division, Environmental Bureau
1220 South St. Francis Dr., Santa Fe, New Mexico 87505
Office: (505) 476-3490
Fax: (505) 476-3462
E-mail: CarlJ.Chavez@state.nm.us
Website: <http://www.emnrd.state.nm.us/ocd/index.htm>
(Pollution Prevention Guidance is under "Publications")

From: Bratcher, Mike, EMNRD
Sent: Wednesday, June 17, 2009 7:09 AM
To: Chavez, Carl J, EMNRD
Subject: RE: Loco Hills MIT/Sonar. etc. Inquiry

Carl,

I received the charts, C-103 and calibration data for the MIT on the casing, and the Nitrogen test. I had copies imaged to the well file (Leonard St.#1 – 30-015-06192). Do you want the original charts or should we keep them here? JB w/LHGSF said it would take a couple of weeks to get the Sonar test results back.

Thanks,

Mike Bratcher
NMOCD District 2
575-748-1283 Ext.108

From: Chavez, Carl J, EMNRD
Sent: Tuesday, June 16, 2009 3:11 PM
To: Bratcher, Mike, EMNRD
Subject: Loco Hills MIT/Sonar. etc. Inquiry

Mike:

Did you want to talk with me about this LPG Facility? Thnx.

Carl J. Chavez, CHMM
New Mexico Energy, Minerals & Natural Resources Dept.
Oil Conservation Division, Environmental Bureau
1220 South St. Francis Dr., Santa Fe, New Mexico 87505
Office: (505) 476-3490
Fax: (505) 476-3462
E-mail: CarlJ.Chavez@state.nm.us
Website: <http://www.emnrd.state.nm.us/ocd/index.htm>
(Pollution Prevention Guidance is under "Publications")

Submit 3 Copies To Appropriate District Office
 District I
 1625 N. French Dr., Hobbs, NM 88240
 District II
 1301 W Grand Avenue, Artesia, NM 88210
 District III
 1000 Rio Brazos Rd., Aztec, NM 87410
 District IV
 1220 S St Francis Dr., Santa Fe, NM 87505

State of New Mexico
 Energy, Minerals and Natural Resources

Form C-103
 Revised March 25, 1999

OIL CONSERVATION DIVISION

1220 South St. Francis Dr.
 Santa Fe, NM 87505

JUN - 8 2009

WELL API NO. 30-015-06172
5 Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6 State Oil & Gas Lease No. OK-635
7 Lease Name or Unit Agreement Name

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 type="checkbox"/> Gas Well <input type="checkbox"/> Other <u>Salt Dome Storage Leonard State</u>	8 Well No. <u>#1</u>
2 Name of Operator <u>Loco Hills L.S.F. LTD</u>	9 Pool name or Wildcat
3. Address of Operator <u>1231 Old Annette Rd Alheda, Texas 76008</u>	
4. Well Location Unit Letter <u>L</u> <u>2069</u> feet from the <u>South</u> line and <u>119.3</u> feet from the <u>West</u> line Section <u>22</u> Township <u>17-S</u> Range <u>29-E</u> NMPM County <u>El Paso</u>	
10 Elevation (Show whether DR, RKB, RT, GR, etc.)	

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 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"/>	MULTIPLE COMPLETION <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER <input type="checkbox"/>		OTHER: <u>MIT & Nitrogen Test</u>	<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. For Multiple Completions Attach wellbore diagram of proposed completion or recompilation

June 3, 2009

1. MIT on casing 370' for 30 minutes (chart enclosed?)
 Turn on Packer set 523 ft. (T.D. 525')
2. Ran sonic on well #1

June 4, 2009 Injected Nitrogen for Open hole Test

June 5, 2009 Ran open hole Nitrogen test 270' for 4 hours,
 Chart enclosed

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

SIGNATURE John B Smith TITLE Terminal Operator DATE 6-5-09

Type or print name John B Smith Telephone No. (575) 672-1331
 (This space for State use)

APPROVED BY Accepted for record TITLE _____ DATE JUN 09 2009
 Conditions of approval, if any NMOGD

JUN - 8 2009

Wildcat Measurement Service, Inc.

416 East Main Street
P.O. Box 1836
Artesia, New Mexico 88211
Office: (575)746-3481
Toll Free: 1-888-421-9453

Calibration Certificate

Company Name: OK Hotoil

Recorder Type: Bristol

Recorder Serial: # MFG-1877

Recorder Pressure Range: 0-1000# Accuracy +/-: 0.2% PSIG

Temperature Range: _____ Deg F.

Increasing Pressure			Decreasing Pressure		
Applied Pressure	Indicated Pressure	Error%	Applied Pressure	Indicated Pressure	Error%
0.0#	0.0#	0	800#	800#	0
100#	100#	0	600#	600#	0
300#	300#	0	400#	400#	0
500#	500#	0	200#	200#	0
700#	700#	0	0.0#	0.0#	0
1000#	1000#	0			

Temperature Test		
Applied Temperature	Indicated Temperature	Error%

Certified Calibration Instrument Used
 Gauge: Crystal
 Deadweight: _____

Remarks: _____

Calibration Date: 5/29/2009

Technician: Troy Sutherland

5 0 AM 6-5-097

Laco Hills bsp
Krampl 540V
LDR 175 29:0
Saku B Smith
John O. Smith
Edward J. Smith
Terminal Operator

15-06-1924

JUN 8 1909
JUN 8 1909



GRAPHIC CONTROLS CORPORATION
BUFFALO, NEW YORK

CHART NO. MC MP-500

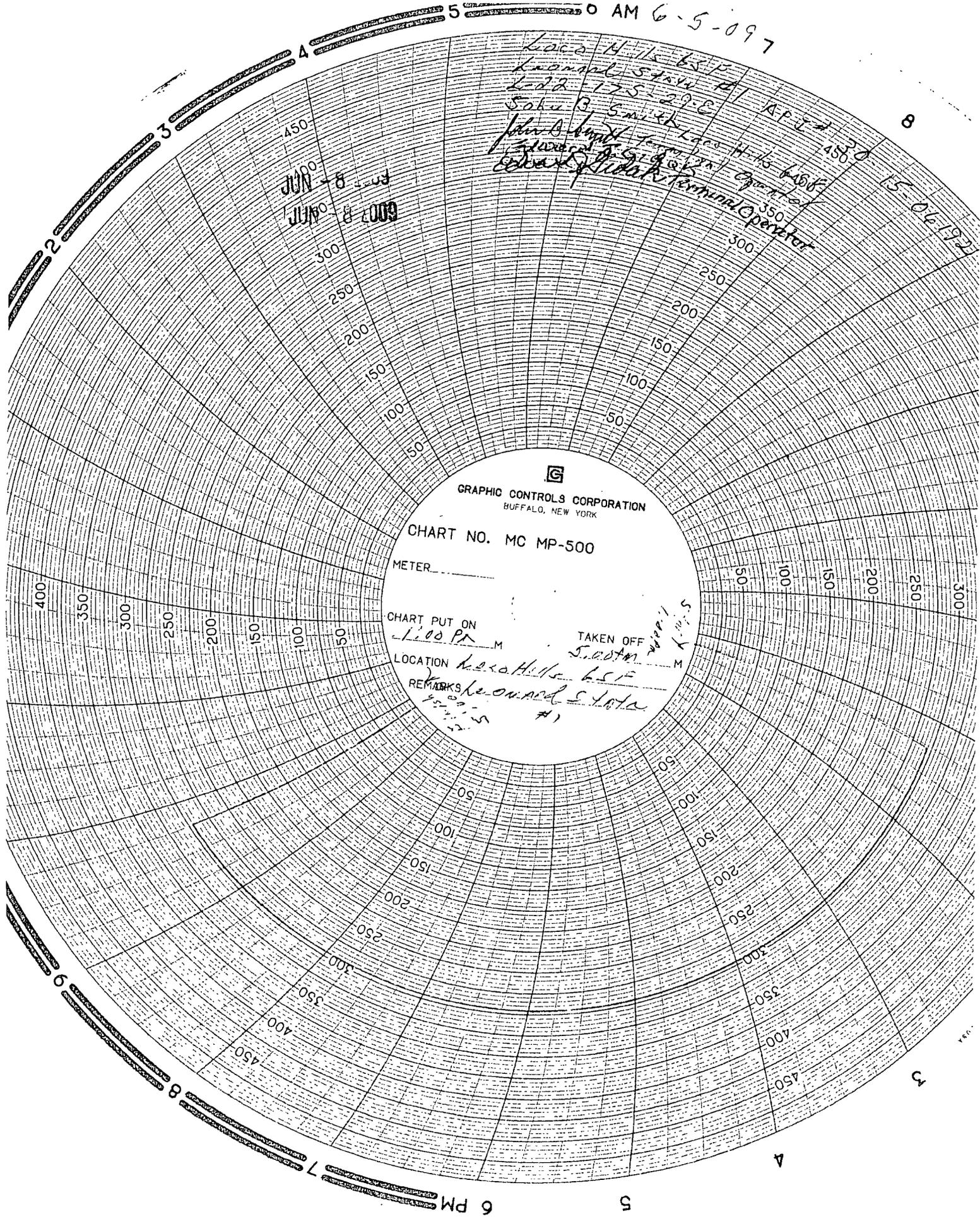
METER

CHART PUT ON
1:00 PM

TAKEN OFF
5:00 PM

LOCATION Laco Hills bsp

REMARKS
Krampl 540V
LDR 175 29:0
Saku B Smith
John O. Smith
Edward J. Smith
Terminal Operator



6 PM

5

Wildcat Measurement Service, Inc.

JUN - 8 2009

416 East Main Street
 P.O. Box 1836
 Artesia, New Mexico 88211
 Office: (575)746-3481
 Toll Free: 1-888-421-9453

Calibration Certificate

Company Name: Loco Hills GFS _____

Recorder Type: Barton _____

Recorder Serial: # 265-13819 _____

Recorder Pressure Range: 0-500# _____ Accuracy +/-: 0.2% PSIG

Temperature Range: _____ Deg F.

Increasing Pressure			Decreasing Pressure		
Applied Pressure	Indicated Pressure	Error%	Applied Pressure	Indicated Pressure	Error%
0.0#	0.0#	0	400#	400#	0
50#	50#	0	300#	300#	0
150#	150#	0	200#	200#	0
250#	250#	0	100#	100#	0
350#	350#	0	0.0#	0.0#	0
500#	500#	0			

Temperature Test		
Applied Temperature	Indicated Temperature	Error%

Certified Calibration Instrument Used
 Gauge: Crystal _____
 Deadweight: _____

Remarks: _____

Calibration Date: 6/3/2009

Technician: *Chandler Montgomery* Chandler Montgomery

Submit 3 Copies To Appropriate District Office
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 1301 W. Grand Avenue, Artesia, NM 88210
 District III
 1000 Rio Brazos Rd., Aztec, NM 87410
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 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
 Energy, Minerals and Natural Resources

Form C-103
 Revised March 25, 1999

OIL CONSERVATION DIVISION
 1220 South St. Francis Dr.
 Santa Fe, NM 87505

WELL API NO. <i>30-15-06192</i>
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. <i>RK-635</i>
7. Lease Name or Unit Agreement Name: <i>Leonard State</i>
8. Well No. <i>1</i>
9. Pool name or Wildcat

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 *Salt Dome Storage*

2. Name of Operator
Long Hills GSF LTD

3. Address of Operator
1231 Old Annette Rd. Alamo, Texas 76002

4. Well Location
 Unit Letter *L* : *2069* feet from the *South* line and *119.3* feet from the *West* line
 Section *22* Township *17-S* Range *29-E* NMPM County *Lubbock*

10. Elevation (Show whether DR, RKB, RT, GR, etc.)
GR

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

<p>NOTICE OF INTENTION TO:</p> <p>PERFORM REMEDIAL WORK <input checked="" type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/></p> <p>TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/></p> <p>PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPLETION <input type="checkbox"/></p> <p>OTHER: <input type="checkbox"/></p>	<p>SUBSEQUENT REPORT OF:</p> <p>REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/></p> <p>COMMENCE DRILLING OPNS. <input type="checkbox"/> PLUG AND ABANDONMENT <input type="checkbox"/></p> <p>CASING TEST AND CEMENT JOB <input type="checkbox"/></p> <p>OTHER: <input type="checkbox"/></p>
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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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompilation.

Sonar Test of well for capacity, and configuration
After sonar test run MIT test on casing (300psi for 30min)
chart recorded
Open hole nitrogen test - Appx 300# for 4 hours
chart recorded

Estimated start date June 2, 2009
 I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE *John B. Smith* TITLE *Terminal Operator* DATE *5/15/09*

Type or print name *John B. Smith* Telephone No. *(525) 622-2*
 (This space for State use)

APPROVED BY *Wiley Brannon* TITLE *BNV Spac* DATE *MAY 18 2009*
 Conditions of approval, if any: