

1R - 85

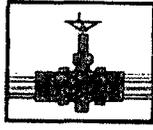
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Plugging  
REPORTS

DATE:

12-10-09

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**PLAINS**  
PIPELINE, L.P.

RECEIVED

2009 DEC 30 PM 1 38

December 10, 2009

Mr. Edward Hansen  
New Mexico Oil Conservation Division  
Environmental Bureau  
1220 South St. Francis Drive  
Santa Fe, New Mexico 87505

RE: Plains Pipeline, L.P. Red Byrd #1 Release Site  
NMOCD Reference # 1R-0085  
Unit Letter H of Section 10, Township 20 South, Range 36 East  
Lea County, New Mexico

Plains Pipeline, L.P. Vacuum 10" to Jal Release Site  
NMOCD Reference # 1R-385  
Unit Letter M of Section 20, Township 19 South, Range 37 East  
Lea County, New Mexico

Dear Mr. Hansen:

Please find the attached reports documenting the plugging and abandonment of monitor wells at the above referenced release sites. The monitor wells were plugged by Straub Corporation of Stanton, Texas (License Number WD-1478) using industry standard practices, approved by The New Mexico Office of the State Engineer (NMOSE).

Should you have any questions or comments, please contact me at (575) 441-1099.

Sincerely,

Jason Henry  
Remediation Coordinator  
Plains Pipeline, L.P.

Enclosure



# WELL RECORD & LOG

OFFICE OF THE STATE ENGINEER

[www.ose.state.nm.us](http://www.ose.state.nm.us)

<b>1. GENERAL AND WELL LOCATION</b>	POD NUMBER (WELL NUMBER) <b>RED BYRD #1 MW-1</b>				OSE FILE NUMBER(S)					
	WELL OWNER NAME(S) <b>PLAINS MARKETING LP</b>				PHONE (OPTIONAL)					
	WELL OWNER MAILING ADDRESS <b>333 CLAY STREET, SUITE 1600</b>				CITY <b>HOUSTON</b>		STATE <b>TX</b>		ZIP <b>77078</b>	
	WELL LOCATION (FROM GPS)	DEGREES LATITUDE	MINUTES 36	SECONDS 10.00 N	* ACCURACY REQUIRED: ONE TENTH OF A SECOND	DEGREES LONGITUDE	MINUTES 18	SECONDS 1.00 W	* DATUM REQUIRED: WGS 84	
	DESCRIPTION RELATING WELL LOCATION TO STREET ADDRESS AND COMMON LANDMARKS <b>LEA COUNTY</b>									
<b>2. OPTIONAL</b>	(2.5 ACRE) ¼	(10 ACRE) ¼	(40 ACRE) ¼	(160 ACRE) ¼	SECTION	TOWNSHIP <input type="checkbox"/> NORTH <input type="checkbox"/> SOUTH		RANGE <input type="checkbox"/> EAST <input type="checkbox"/> WEST		
	SUBDIVISION NAME				LOT NUMBER		BLOCK NUMBER		UNIT/TRACT	
	HYDROGRAPHIC SURVEY				MAP NUMBER		TRACT NUMBER			
<b>3. DRILLING INFORMATION</b>	LICENSE NUMBER <b>WD1478</b>		NAME OF LICENSED DRILLER <b>EDWARD BRYAN</b>			NAME OF WELL DRILLING COMPANY <b>STRAUB CORPORATION</b>				
	DRILLING STARTED <b>10-28-09</b>		DRILLING ENDED <b>10-28-09</b>	DEPTH OF COMPLETED WELL (FT) <b>41.4</b>		BORE HOLE DEPTH (FT) <b>41.4</b>	DEPTH WATER FIRST ENCOUNTERED (FT)			
	COMPLETED WELL IS: <input type="checkbox"/> ARTESIAN <input type="checkbox"/> DRY HOLE <input checked="" type="checkbox"/> SHALLOW (UNCONFINED)					STATIC WATER LEVEL IN COMPLETED WELL (FT)				
	DRILLING FLUID: <input checked="" type="checkbox"/> AIR <input type="checkbox"/> MUD <input type="checkbox"/> ADDITIVES - SPECIFY:									
	DRILLING METHOD: <input type="checkbox"/> ROTARY <input type="checkbox"/> HAMMER <input type="checkbox"/> CABLE TOOL <input type="checkbox"/> OTHER - SPECIFY:									
	DEPTH (FT) FROM TO		BORE HOLE DIA. (IN)	CASING MATERIAL		CONNECTION TYPE (CASING)	INSIDE DIA. CASING (IN)	CASING WALL THICKNESS (IN)	SLOT SIZE (IN)	
<b>4. WATER BEARING STRATA</b>	DEPTH (FT) FROM TO	THICKNESS (FT)	FORMATION DESCRIPTION OF PRINCIPAL WATER-BEARING STRATA (INCLUDE WATER-BEARING CAVITIES OR FRACTURE ZONES)					YIELD (GPM)		
METHOD USED TO ESTIMATE YIELD OF WATER-BEARING STRATA						TOTAL ESTIMATED WELL YIELD (GPM)				

FOR OSE INTERNAL USE

WELL RECORD & LOG (Version 6/9/08)

FILE NUMBER		POD NUMBER		TRN NUMBER	
LOCATION					PAGE 1 OF 2

5. SEAL AND PUMP	TYPE OF PUMP: <input type="checkbox"/> SUBMERSIBLE <input type="checkbox"/> JET <input type="checkbox"/> NO PUMP - WELL NOT EQUIPPED <input type="checkbox"/> TURBINE <input type="checkbox"/> CYLINDER <input type="checkbox"/> OTHER - SPECIFY:						
	ANNULAR SEAL AND GRAVEL PACK	DEPTH (FT)		BORE HOLE DIA. (IN)	MATERIAL TYPE AND SIZE	AMOUNT (CUBIC FT)	METHOD OF PLACEMENT
		FROM	TO				
		41.4	2'	5	7 BAGS OF 3/8 HOLEPLUG		TOPLoad
2'	0	5	.5 BAGS OF CEMENT		TOPLoad		

6. GEOLOGIC LOG OF WELL	DEPTH (FT)		THICKNESS (FT)	COLOR AND TYPE OF MATERIAL ENCOUNTERED (INCLUDE WATER-BEARING CAVITIES OR FRACTURE ZONES)	WATER BEARING?	
	FROM	TO			<input type="checkbox"/> YES	<input type="checkbox"/> NO
					<input type="checkbox"/> YES	<input type="checkbox"/> NO
					<input type="checkbox"/> YES	<input type="checkbox"/> NO
					<input type="checkbox"/> YES	<input type="checkbox"/> NO
					<input type="checkbox"/> YES	<input type="checkbox"/> NO
					<input type="checkbox"/> YES	<input type="checkbox"/> NO
					<input type="checkbox"/> YES	<input type="checkbox"/> NO
					<input type="checkbox"/> YES	<input type="checkbox"/> NO
					<input type="checkbox"/> YES	<input type="checkbox"/> NO
					<input type="checkbox"/> YES	<input type="checkbox"/> NO
					<input type="checkbox"/> YES	<input type="checkbox"/> NO
					<input type="checkbox"/> YES	<input type="checkbox"/> NO
					<input type="checkbox"/> YES	<input type="checkbox"/> NO

ATTACH ADDITIONAL PAGES AS NEEDED TO FULLY DESCRIBE THE GEOLOGIC LOG OF THE WELL

7. TEST & ADDITIONAL INFO	WELL TEST	METHOD: <input type="checkbox"/> BAILER <input type="checkbox"/> PUMP <input type="checkbox"/> AIR LIFT <input type="checkbox"/> OTHER - SPECIFY:
		TEST RESULTS - ATTACH A COPY OF DATA COLLECTED DURING WELL TESTING, INCLUDING START TIME, END TIME, AND A TABLE SHOWING DISCHARGE AND DRAWDOWN OVER THE TESTING PERIOD.
	ADDITIONAL STATEMENTS OR EXPLANATIONS: <b>PLUGGING REPORT</b>	

8. SIGNATURE	THE UNDERSIGNED HEREBY CERTIFIES THAT, TO THE BEST OF HIS OR HER KNOWLEDGE AND BELIEF, THE FOREGOING IS A TRUE AND CORRECT RECORD OF THE ABOVE DESCRIBED HOLE AND THAT HE OR SHE WILL FILE THIS WELL RECORD WITH THE STATE ENGINEER AND THE PERMIT HOLDER WITHIN 20 DAYS AFTER COMPLETION OF WELL DRILLING:	
	 SIGNATURE OF DRILLER	12/2/09 DATE



# WELL RECORD & LOG

OFFICE OF THE STATE ENGINEER

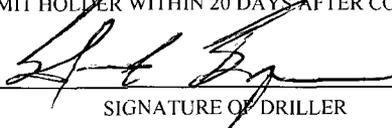
[www.ose.state.nm.us](http://www.ose.state.nm.us)

<b>1. GENERAL AND WELL LOCATION</b>	POD NUMBER (WELL NUMBER) <b>RED BYRD #1 MW-3</b>				OSE FILE NUMBER(S)									
	WELL OWNER NAME(S) <b>PLAINS MARKETING LP</b>				PHONE (OPTIONAL)									
	WELL OWNER MAILING ADDRESS <b>333 CLAY STREET, SUITE 1600</b>				CITY <b>HOUSTON</b>		STATE <b>TX</b>		ZIP <b>77078</b>					
	WELL LOCATION (FROM GPS)	DEGREES LATITUDE <b>32</b>		MINUTES <b>36</b>		SECONDS <b>10.00 N</b>		* ACCURACY REQUIRED: ONE TENTH OF A SECOND * DATUM REQUIRED: WGS 84						
		LONGITUDE <b>103</b>		<b>18</b>		<b>1.00 W</b>								
DESCRIPTION RELATING WELL LOCATION TO STREET ADDRESS AND COMMON LANDMARKS <b>LEA COUNTY</b>														
<b>2. OPTIONAL</b>	(2.5 ACRE) <b>¼</b>		(10 ACRE) <b>¼</b>		(40 ACRE) <b>¼</b>		(160 ACRE) <b>¼</b>		SECTION	TOWNSHIP <input type="checkbox"/> NORTH <input type="checkbox"/> SOUTH		RANGE <input type="checkbox"/> EAST <input type="checkbox"/> WEST		
	SUBDIVISION NAME					LOT NUMBER		BLOCK NUMBER		UNIT/TRACT				
	HYDROGRAPHIC SURVEY								MAP NUMBER		TRACT NUMBER			
<b>3. DRILLING INFORMATION</b>	LICENSE NUMBER <b>WD1478</b>		NAME OF LICENSED DRILLER <b>EDWARD BRYAN</b>				NAME OF WELL DRILLING COMPANY <b>STRAUB CORPORATION</b>							
	DRILLING STARTED <b>10-28-09</b>		DRILLING ENDED <b>10-28-09</b>		DEPTH OF COMPLETED WELL (FT) <b>6'</b>		BORE HOLE DEPTH (FT) <b>6'</b>		DEPTH WATER FIRST ENCOUNTERED (FT)					
	COMPLETED WELL IS: <input type="checkbox"/> ARTESIAN <input type="checkbox"/> DRY HOLE <input checked="" type="checkbox"/> SHALLOW (UNCONFINED)								STATIC WATER LEVEL IN COMPLETED WELL (FT)					
	DRILLING FLUID: <input checked="" type="checkbox"/> AIR <input type="checkbox"/> MUD <input type="checkbox"/> ADDITIVES - SPECIFY:													
	DRILLING METHOD: <input type="checkbox"/> ROTARY <input type="checkbox"/> HAMMER <input type="checkbox"/> CABLE TOOL <input type="checkbox"/> OTHER - SPECIFY:													
	DEPTH (FT)		BORE HOLE DIA. (IN)		CASING MATERIAL		CONNECTION TYPE (CASING)		INSIDE DIA. CASING (IN)		CASING WALL THICKNESS (IN)		SLOT SIZE (IN)	
	FROM	TO												
<b>4. WATER BEARING STRATA</b>	DEPTH (FT)		THICKNESS (FT)		FORMATION DESCRIPTION OF PRINCIPAL WATER-BEARING STRATA (INCLUDE WATER-BEARING CAVITIES OR FRACTURE ZONES)							YIELD (GPM)		
	FROM	TO												
METHOD USED TO ESTIMATE YIELD OF WATER-BEARING STRATA									TOTAL ESTIMATED WELL YIELD (GPM)					

FOR OSE INTERNAL USE

WELL RECORD & LOG (Version 6/9/08)

FILE NUMBER		POD NUMBER		TRN NUMBER	
LOCATION					PAGE 1 OF 2

<b>5. SEAL AND PUMP</b>	TYPE OF PUMP: <input type="checkbox"/> SUBMERSIBLE <input type="checkbox"/> JET <input type="checkbox"/> NO PUMP - WELL NOT EQUIPPED						
	<input type="checkbox"/> TURBINE <input type="checkbox"/> CYLINDER <input type="checkbox"/> OTHER - SPECIFY:						
	ANNULAR SEAL AND GRAVEL PACK	DEPTH (FT)		BORE HOLE DIA. (IN)	MATERIAL TYPE AND SIZE	AMOUNT (CUBIC FT)	METHOD OF PLACEMENT
		FROM	TO				
6'		2'	5	1 BAGS OF 3/8 HOLEPLUG		TOPLOAD	
	2'	0	5	.5 BAGS OF CEMENT		TOPLOAD	
<b>6. GEOLOGIC LOG OF WELL</b>	DEPTH (FT)		THICKNESS (FT)	COLOR AND TYPE OF MATERIAL ENCOUNTERED (INCLUDE WATER-BEARING CAVITIES OR FRACTURE ZONES)	WATER BEARING?		
	FROM	TO			<input type="checkbox"/> YES	<input type="checkbox"/> NO	
						<input type="checkbox"/> YES	<input type="checkbox"/> NO
						<input type="checkbox"/> YES	<input type="checkbox"/> NO
						<input type="checkbox"/> YES	<input type="checkbox"/> NO
						<input type="checkbox"/> YES	<input type="checkbox"/> NO
						<input type="checkbox"/> YES	<input type="checkbox"/> NO
						<input type="checkbox"/> YES	<input type="checkbox"/> NO
						<input type="checkbox"/> YES	<input type="checkbox"/> NO
						<input type="checkbox"/> YES	<input type="checkbox"/> NO
						<input type="checkbox"/> YES	<input type="checkbox"/> NO
						<input type="checkbox"/> YES	<input type="checkbox"/> NO
						<input type="checkbox"/> YES	<input type="checkbox"/> NO
						<input type="checkbox"/> YES	<input type="checkbox"/> NO
ATTACH ADDITIONAL PAGES AS NEEDED TO FULLY DESCRIBE THE GEOLOGIC LOG OF THE WELL							
<b>7. TEST &amp; ADDITIONAL INFO</b>	WELL TEST    METHOD: <input type="checkbox"/> BAILER <input type="checkbox"/> PUMP <input type="checkbox"/> AIR LIFT <input type="checkbox"/> OTHER - SPECIFY:						
	TEST RESULTS - ATTACH A COPY OF DATA COLLECTED DURING WELL TESTING, INCLUDING START TIME, END TIME, AND A TABLE SHOWING DISCHARGE AND DRAWDOWN OVER THE TESTING PERIOD.						
	ADDITIONAL STATEMENTS OR EXPLANATIONS: <b>PLUGGING REPORT</b>						
<b>8. SIGNATURE</b>	THE UNDERSIGNED HEREBY CERTIFIES THAT, TO THE BEST OF HIS OR HER KNOWLEDGE AND BELIEF, THE FOREGOING IS A TRUE AND CORRECT RECORD OF THE ABOVE DESCRIBED HOLE AND THAT HE OR SHE WILL FILE THIS WELL RECORD WITH THE STATE ENGINEER AND THE PERMIT HOLDER WITHIN 20 DAYS AFTER COMPLETION OF WELL DRILLING:						
	 SIGNATURE OF DRILLER			12/6/09 DATE			



# WELL RECORD & LOG

OFFICE OF THE STATE ENGINEER

[www.ose.state.nm.us](http://www.ose.state.nm.us)

<b>1. GENERAL AND WELL LOCATION</b>	POD NUMBER (WELL NUMBER) <b>RED BYRD #1 MW-4</b>				OSE FILE NUMBER(S)					
	WELL OWNER NAME(S) <b>PLAINS MARKETING LP</b>				PHONE (OPTIONAL)					
	WELL OWNER MAILING ADDRESS <b>333 CLAY STREET, SUITE 1600</b>				CITY <b>HOUSTON</b>		STATE <b>TX</b>		ZIP <b>77078</b>	
	WELL LOCATION (FROM GPS)	DEGREES LATITUDE	MINUTES 36	SECONDS 10.00 N	* ACCURACY REQUIRED: ONE TENTH OF A SECOND * DATUM REQUIRED: WGS 84					
		LONGITUDE	103	18						1.00 W
DESCRIPTION RELATING WELL LOCATION TO STREET ADDRESS AND COMMON LANDMARKS <b>LEA COUNTY</b>										
<b>2. OPTIONAL</b>	(2.5 ACRE) ¼	(10 ACRE) ¼	(40 ACRE) ¼	(160 ACRE) ¼	SECTION		TOWNSHIP <input type="checkbox"/> NORTH <input type="checkbox"/> SOUTH		RANGE <input type="checkbox"/> EAST <input type="checkbox"/> WEST	
	SUBDIVISION NAME				LOT NUMBER		BLOCK NUMBER		UNIT/TRACT	
	HYDROGRAPHIC SURVEY						MAP NUMBER		TRACT NUMBER	
<b>3. DRILLING INFORMATION</b>	LICENSE NUMBER <b>WD1478</b>		NAME OF LICENSED DRILLER <b>EDWARD BRYAN</b>				NAME OF WELL DRILLING COMPANY <b>STRAUB CORPORATION</b>			
	DRILLING STARTED <b>10-28-09</b>		DRILLING ENDED <b>10-28-09</b>		DEPTH OF COMPLETED WELL (FT) <b>37</b>		BORE HOLE DEPTH (FT) <b>37</b>		DEPTH WATER FIRST ENCOUNTERED (FT)	
	COMPLETED WELL IS: <input type="checkbox"/> ARTESIAN <input type="checkbox"/> DRY HOLE <input checked="" type="checkbox"/> SHALLOW (UNCONFINED)								STATIC WATER LEVEL IN COMPLETED WELL (FT)	
	DRILLING FLUID: <input checked="" type="checkbox"/> AIR <input type="checkbox"/> MUD <input type="checkbox"/> ADDITIVES - SPECIFY:									
	DRILLING METHOD: <input type="checkbox"/> ROTARY <input type="checkbox"/> HAMMER <input type="checkbox"/> CABLE TOOL <input type="checkbox"/> OTHER - SPECIFY:									
	DEPTH (FT)		BORE HOLE DIA. (IN)	CASING MATERIAL	CONNECTION TYPE (CASING)	INSIDE DIA. CASING (IN)	CASING WALL THICKNESS (IN)	SLOT SIZE (IN)		
	FROM	TO								
<b>4. WATER BEARING STRATA</b>	DEPTH (FT)		THICKNESS (FT)	FORMATION DESCRIPTION OF PRINCIPAL WATER-BEARING STRATA (INCLUDE WATER-BEARING CAVITIES OR FRACTURE ZONES)					YIELD (GPM)	
	FROM	TO								
METHOD USED TO ESTIMATE YIELD OF WATER-BEARING STRATA							TOTAL ESTIMATED WELL YIELD (GPM)			

FOR OSE INTERNAL USE

WELL RECORD & LOG (Version 6/9/08)

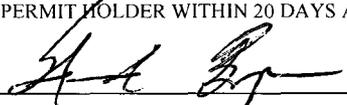
FILE NUMBER	POD NUMBER	TRN NUMBER
LOCATION		PAGE 1 OF 2

5. SEAL AND PUMP	TYPE OF PUMP: <input type="checkbox"/> SUBMERSIBLE <input type="checkbox"/> JET <input type="checkbox"/> NO PUMP - WELL NOT EQUIPPED <input type="checkbox"/> TURBINE <input type="checkbox"/> CYLINDER <input type="checkbox"/> OTHER - SPECIFY:						
	ANNULAR SEAL AND GRAVEL PACK	DEPTH (FT)		BORE HOLE DIA. (IN)	MATERIAL TYPE AND SIZE	AMOUNT (CUBIC FT)	METHOD OF PLACEMENT
		FROM	TO				
		37	2'	5	2 BAGS OF 3/8 HOLEPLUG		TOPLOAD
2'	0	5	.5 BAGS OF CEMENT		TOPLOAD		

6. GEOLOGIC LOG OF WELL	DEPTH (FT)		THICKNESS (FT)	COLOR AND TYPE OF MATERIAL ENCOUNTERED (INCLUDE WATER-BEARING CAVITIES OR FRACTURE ZONES)	WATER BEARING?
	FROM	TO			
					<input type="checkbox"/> YES <input type="checkbox"/> NO
					<input type="checkbox"/> YES <input type="checkbox"/> NO
					<input type="checkbox"/> YES <input type="checkbox"/> NO
					<input type="checkbox"/> YES <input type="checkbox"/> NO
					<input type="checkbox"/> YES <input type="checkbox"/> NO
					<input type="checkbox"/> YES <input type="checkbox"/> NO
					<input type="checkbox"/> YES <input type="checkbox"/> NO
					<input type="checkbox"/> YES <input type="checkbox"/> NO
					<input type="checkbox"/> YES <input type="checkbox"/> NO
					<input type="checkbox"/> YES <input type="checkbox"/> NO
					<input type="checkbox"/> YES <input type="checkbox"/> NO
					<input type="checkbox"/> YES <input type="checkbox"/> NO

ATTACH ADDITIONAL PAGES AS NEEDED TO FULLY DESCRIBE THE GEOLOGIC LOG OF THE WELL

7. TEST & ADDITIONAL INFO	WELL TEST	METHOD: <input type="checkbox"/> BAILER <input type="checkbox"/> PUMP <input type="checkbox"/> AIR LIFT <input type="checkbox"/> OTHER - SPECIFY:
	TEST RESULTS - ATTACH A COPY OF DATA COLLECTED DURING WELL TESTING, INCLUDING START TIME, END TIME, AND A TABLE SHOWING DISCHARGE AND DRAWDOWN OVER THE TESTING PERIOD.	
	ADDITIONAL STATEMENTS OR EXPLANATIONS: <b>PLUGGING REPORT</b>	

8. SIGNATURE	THE UNDERSIGNED HEREBY CERTIFIES THAT, TO THE BEST OF HIS OR HER KNOWLEDGE AND BELIEF, THE FOREGOING IS A TRUE AND CORRECT RECORD OF THE ABOVE DESCRIBED HOLE AND THAT HE OR SHE WILL FILE THIS WELL RECORD WITH THE STATE ENGINEER AND THE PERMIT HOLDER WITHIN 20 DAYS AFTER COMPLETION OF WELL DRILLING:	
	 _____ SIGNATURE OF DRILLER	12/2/09 _____ DATE



# WELL RECORD & LOG

OFFICE OF THE STATE ENGINEER

[www.ose.state.nm.us](http://www.ose.state.nm.us)

<b>1. GENERAL AND WELL LOCATION</b>	POD NUMBER (WELL NUMBER) <b>RED BYRD #1 MW-5</b>				OSE FILE NUMBER(S)					
	WELL OWNER NAME(S) <b>PLAINS MARKETING LP</b>				PHONE (OPTIONAL)					
	WELL OWNER MAILING ADDRESS <b>333 CLAY STREET, SUITE 1600</b>				CITY <b>HOUSTON</b>		STATE <b>TX</b>		ZIP <b>77078</b>	
	WELL LOCATION (FROM GPS)	DEGREES LATITUDE <b>32</b>	MINUTES <b>36</b>	SECONDS <b>10.00 N</b>	* ACCURACY REQUIRED: ONE TENTH OF A SECOND * DATUM REQUIRED: WGS 84					
		LONGITUDE <b>103</b>	<b>18</b>	<b>1.00 W</b>						
DESCRIPTION RELATING WELL LOCATION TO STREET ADDRESS AND COMMON LANDMARKS <b>LEA COUNTY</b>										
<b>2. OPTIONAL</b>	(2.5 ACRE) <b>¼</b>	(10 ACRE) <b>¼</b>	(40 ACRE) <b>¼</b>	(160 ACRE) <b>¼</b>	SECTION	TOWNSHIP <input type="checkbox"/> NORTH <input type="checkbox"/> SOUTH		RANGE <input type="checkbox"/> EAST <input type="checkbox"/> WEST		
	SUBDIVISION NAME				LOT NUMBER		BLOCK NUMBER		UNIT/TRACT	
	HYDROGRAPHIC SURVEY						MAP NUMBER		TRACT NUMBER	
<b>3. DRILLING INFORMATION</b>	LICENSE NUMBER <b>WD1478</b>		NAME OF LICENSED DRILLER <b>EDWARD BRYAN</b>			NAME OF WELL DRILLING COMPANY <b>STRAUB CORPORATION</b>				
	DRILLING STARTED <b>10-28-09</b>		DRILLING ENDED <b>10-28-09</b>	DEPTH OF COMPLETED WELL (FT) <b>42.1</b>		BORE HOLE DEPTH (FT) <b>42.1</b>	DEPTH WATER FIRST ENCOUNTERED (FT)			
	COMPLETED WELL IS: <input type="checkbox"/> ARTESIAN <input type="checkbox"/> DRY HOLE <input checked="" type="checkbox"/> SHALLOW (UNCONFINED)						STATIC WATER LEVEL IN COMPLETED WELL (FT)			
	DRILLING FLUID: <input checked="" type="checkbox"/> AIR <input type="checkbox"/> MUD <input type="checkbox"/> ADDITIVES - SPECIFY:									
	DRILLING METHOD: <input type="checkbox"/> ROTARY <input type="checkbox"/> HAMMER <input type="checkbox"/> CABLE TOOL <input type="checkbox"/> OTHER - SPECIFY:									
	DEPTH (FT)		BORE HOLE DIA. (IN)	CASING MATERIAL	CONNECTION TYPE (CASING)	INSIDE DIA. CASING (IN)	CASING WALL THICKNESS (IN)	SLOT SIZE (IN)		
	FROM	TO								
<b>4. WATER BEARING STRATA</b>	DEPTH (FT)		THICKNESS (FT)	FORMATION DESCRIPTION OF PRINCIPAL WATER-BEARING STRATA (INCLUDE WATER-BEARING CAVITIES OR FRACTURE ZONES)					YIELD (GPM)	
	FROM	TO								
METHOD USED TO ESTIMATE YIELD OF WATER-BEARING STRATA						TOTAL ESTIMATED WELL YIELD (GPM)				

FOR OSE INTERNAL USE

WELL RECORD & LOG (Version 6/9/08)

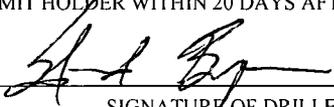
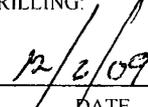
FILE NUMBER		POD NUMBER		TRN NUMBER	
LOCATION					PAGE 1 OF 2

<b>5. SEAL AND PUMP</b>	TYPE OF PUMP:	<input type="checkbox"/> SUBMERSIBLE	<input type="checkbox"/> JET	<input type="checkbox"/> NO PUMP - WELL NOT EQUIPPED			
		<input type="checkbox"/> TURBINE	<input type="checkbox"/> CYLINDER	<input type="checkbox"/> OTHER - SPECIFY:			
	ANNULAR SEAL AND GRAVEL PACK	DEPTH (FT)		BORE HOLE DIA. (IN)	MATERIAL TYPE AND SIZE	AMOUNT (CUBIC FT)	METHOD OF PLACEMENT
		FROM	TO				
	42.1	2'	5	2 BAGS OF 3/8 HOLEPLUG		TOPLoad	
	2'	0	5	.5 BAGS OF CEMENT		TOPLoad	

<b>6. GEOLOGIC LOG OF WELL</b>	DEPTH (FT)		THICKNESS (FT)	COLOR AND TYPE OF MATERIAL ENCOUNTERED (INCLUDE WATER-BEARING CAVITIES OR FRACTURE ZONES)	WATER BEARING?	
	FROM	TO			<input type="checkbox"/> YES	<input type="checkbox"/> NO
					<input type="checkbox"/> YES	<input type="checkbox"/> NO
					<input type="checkbox"/> YES	<input type="checkbox"/> NO
					<input type="checkbox"/> YES	<input type="checkbox"/> NO
					<input type="checkbox"/> YES	<input type="checkbox"/> NO
					<input type="checkbox"/> YES	<input type="checkbox"/> NO
					<input type="checkbox"/> YES	<input type="checkbox"/> NO
					<input type="checkbox"/> YES	<input type="checkbox"/> NO
					<input type="checkbox"/> YES	<input type="checkbox"/> NO
					<input type="checkbox"/> YES	<input type="checkbox"/> NO
					<input type="checkbox"/> YES	<input type="checkbox"/> NO
					<input type="checkbox"/> YES	<input type="checkbox"/> NO
					<input type="checkbox"/> YES	<input type="checkbox"/> NO
					<input type="checkbox"/> YES	<input type="checkbox"/> NO

ATTACH ADDITIONAL PAGES AS NEEDED TO FULLY DESCRIBE THE GEOLOGIC LOG OF THE WELL

<b>7. TEST &amp; ADDITIONAL INFO</b>	WELL TEST	METHOD: <input type="checkbox"/> BAILER <input type="checkbox"/> PUMP <input type="checkbox"/> AIR LIFT <input type="checkbox"/> OTHER - SPECIFY:
		TEST RESULTS - ATTACH A COPY OF DATA COLLECTED DURING WELL TESTING, INCLUDING START TIME, END TIME, AND A TABLE SHOWING DISCHARGE AND DRAWDOWN OVER THE TESTING PERIOD.
	ADDITIONAL STATEMENTS OR EXPLANATIONS: <b>PLUGGING REPORT</b>	

<b>8. SIGNATURE</b>	THE UNDERSIGNED HEREBY CERTIFIES THAT, TO THE BEST OF HIS OR HER KNOWLEDGE AND BELIEF, THE FOREGOING IS A TRUE AND CORRECT RECORD OF THE ABOVE DESCRIBED HOLE AND THAT HE OR SHE WILL FILE THIS WELL RECORD WITH THE STATE ENGINEER AND THE PERMIT HOLDER WITHIN 20 DAYS AFTER COMPLETION OF WELL DRILLING:	
	 _____ SIGNATURE OF DRILLER	 _____ DATE



# WELL RECORD & LOG

OFFICE OF THE STATE ENGINEER

[www.ose.state.nm.us](http://www.ose.state.nm.us)

<b>1. GENERAL AND WELL LOCATION</b>	POD NUMBER (WELL NUMBER) <b>RED BYRD #1 MW-8</b>				OSE FILE NUMBER(S)									
	WELL OWNER NAME(S) <b>PLAINS MARKETING LP</b>				PHONE (OPTIONAL)									
	WELL OWNER MAILING ADDRESS <b>333 CLAY STREET, SUITE 1600</b>				CITY <b>HOUSTON</b>		STATE <b>TX</b>		ZIP <b>77078</b>					
	WELL LOCATION (FROM GPS)	DEGREES LATITUDE	MINUTES 32	SECONDS 36	10.00	N	* ACCURACY REQUIRED: ONE TENTH OF A SECOND * DATUM REQUIRED: WGS 84							
		LONGITUDE	103	18	1.00	W								
DESCRIPTION RELATING WELL LOCATION TO STREET ADDRESS AND COMMON LANDMARKS <b>LEA COUNTY</b>														
<b>2. OPTIONAL</b>	(2.5 ACRE) 1/4		(10 ACRE) 1/4		(40 ACRE) 1/4		(160 ACRE) 1/4		SECTION	TOWNSHIP <input type="checkbox"/> NORTH <input type="checkbox"/> SOUTH		RANGE <input type="checkbox"/> EAST <input type="checkbox"/> WEST		
	SUBDIVISION NAME					LOT NUMBER		BLOCK NUMBER		UNIT/TRACT				
	HYDROGRAPHIC SURVEY								MAP NUMBER		TRACT NUMBER			
<b>3. DRILLING INFORMATION</b>	LICENSE NUMBER <b>WD1478</b>		NAME OF LICENSED DRILLER <b>EDWARD BRYAN</b>				NAME OF WELL DRILLING COMPANY <b>STRAUB CORPORATION</b>							
	DRILLING STARTED <b>10-28-09</b>		DRILLING ENDED <b>10-28-09</b>		DEPTH OF COMPLETED WELL (FT) <b>43.7</b>		BORE HOLE DEPTH (FT) <b>43.7</b>		DEPTH WATER FIRST ENCOUNTERED (FT)					
	COMPLETED WELL IS: <input type="checkbox"/> ARTESIAN <input type="checkbox"/> DRY HOLE <input checked="" type="checkbox"/> SHALLOW (UNCONFINED)								STATIC WATER LEVEL IN COMPLETED WELL (FT)					
	DRILLING FLUID: <input checked="" type="checkbox"/> AIR <input type="checkbox"/> MUD <input type="checkbox"/> ADDITIVES - SPECIFY:													
	DRILLING METHOD: <input type="checkbox"/> ROTARY <input type="checkbox"/> HAMMER <input type="checkbox"/> CABLE TOOL <input type="checkbox"/> OTHER - SPECIFY:													
	DEPTH (FT)		BORE HOLE DIA. (IN)		CASING MATERIAL		CONNECTION TYPE (CASING)		INSIDE DIA. CASING (IN)		CASING WALL THICKNESS (IN)		SLOT SIZE (IN)	
	FROM	TO												
<b>4. WATER BEARING STRATA</b>	DEPTH (FT)		THICKNESS (FT)		FORMATION DESCRIPTION OF PRINCIPAL WATER-BEARING STRATA (INCLUDE WATER-BEARING CAVITIES OR FRACTURE ZONES)						YIELD (GPM)			
	FROM	TO												
METHOD USED TO ESTIMATE YIELD OF WATER-BEARING STRATA									TOTAL ESTIMATED WELL YIELD (GPM)					

FOR OSE INTERNAL USE

WELL RECORD & LOG (Version 6/9/08)

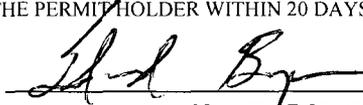
FILE NUMBER			POD NUMBER			TRN NUMBER		
LOCATION							PAGE 1 OF 2	

5. SEAL AND PUMP	TYPE OF PUMP: <input type="checkbox"/> SUBMERSIBLE <input type="checkbox"/> JET <input type="checkbox"/> NO PUMP - WELL NOT EQUIPPED <input type="checkbox"/> TURBINE <input type="checkbox"/> CYLINDER <input type="checkbox"/> OTHER - SPECIFY:						
	ANNULAR SEAL AND GRAVEL PACK	DEPTH (FT)		BORE HOLE DIA. (IN)	MATERIAL TYPE AND SIZE	AMOUNT (CUBIC FT)	METHOD OF PLACEMENT
		FROM	TO				
		43.7	2'	5	2 BAGS OF 3/8 HOLEPLUG		TOPLOAD
2'	0	5	.5 BAGS OF CEMENT		TOPLOAD		

6. GEOLOGIC LOG OF WELL	DEPTH (FT)		THICKNESS (FT)	COLOR AND TYPE OF MATERIAL ENCOUNTERED (INCLUDE WATER-BEARING CAVITIES OR FRACTURE ZONES)	WATER BEARING?
	FROM	TO			
					<input type="checkbox"/> YES <input type="checkbox"/> NO
					<input type="checkbox"/> YES <input type="checkbox"/> NO
					<input type="checkbox"/> YES <input type="checkbox"/> NO
					<input type="checkbox"/> YES <input type="checkbox"/> NO
					<input type="checkbox"/> YES <input type="checkbox"/> NO
					<input type="checkbox"/> YES <input type="checkbox"/> NO
					<input type="checkbox"/> YES <input type="checkbox"/> NO
					<input type="checkbox"/> YES <input type="checkbox"/> NO
					<input type="checkbox"/> YES <input type="checkbox"/> NO
					<input type="checkbox"/> YES <input type="checkbox"/> NO
					<input type="checkbox"/> YES <input type="checkbox"/> NO
					<input type="checkbox"/> YES <input type="checkbox"/> NO

ATTACH ADDITIONAL PAGES AS NEEDED TO FULLY DESCRIBE THE GEOLOGIC LOG OF THE WELL

7. TEST & ADDITIONAL INFO	WELL TEST	METHOD: <input type="checkbox"/> BAILER <input type="checkbox"/> PUMP <input type="checkbox"/> AIR LIFT <input type="checkbox"/> OTHER - SPECIFY:
	TEST RESULTS - ATTACH A COPY OF DATA COLLECTED DURING WELL TESTING, INCLUDING START TIME, END TIME, AND A TABLE SHOWING DISCHARGE AND DRAWDOWN OVER THE TESTING PERIOD.	
	ADDITIONAL STATEMENTS OR EXPLANATIONS: <b>PLUGGING REPORT</b>	

8. SIGNATURE	THE UNDERSIGNED HEREBY CERTIFIES THAT, TO THE BEST OF HIS OR HER KNOWLEDGE AND BELIEF, THE FOREGOING IS A TRUE AND CORRECT RECORD OF THE ABOVE DESCRIBED HOLE AND THAT HE OR SHE WILL FILE THIS WELL RECORD WITH THE STATE ENGINEER AND THE PERMIT HOLDER WITHIN 20 DAYS AFTER COMPLETION OF WELL DRILLING:	
	 SIGNATURE OF DRILLER	<u>12/6/09</u> DATE



# WELL RECORD & LOG

OFFICE OF THE STATE ENGINEER

[www.ose.state.nm.us](http://www.ose.state.nm.us)

<b>1. GENERAL AND WELL LOCATION</b>	POD NUMBER (WELL NUMBER) <b>RED BYRD #1 MW-9</b>				OSE FILE NUMBER(S)							
	WELL OWNER NAME(S) <b>PLAINS MARKETING LP</b>				PHONE (OPTIONAL)							
	WELL OWNER MAILING ADDRESS <b>333 CLAY STREET, SUITE 1600</b>				CITY <b>HOUSTON</b>		STATE <b>TX</b>		ZIP <b>77078</b>			
	WELL LOCATION (FROM GPS)	DEGREES LATITUDE <b>32</b>	MINUTES <b>36</b>	SECONDS <b>10.00</b> N	* ACCURACY REQUIRED: ONE TENTH OF A SECOND	DEGREES LONGITUDE <b>103</b>	MINUTES <b>18</b>	SECONDS <b>1.00</b> W	* DATUM REQUIRED: WGS 84			
	DESCRIPTION RELATING WELL LOCATION TO STREET ADDRESS AND COMMON LANDMARKS <b>LEA COUNTY</b>											
<b>2. OPTIONAL</b>	(2.5 ACRE) <b>¼</b>		(10 ACRE) <b>¼</b>		(40 ACRE) <b>¼</b>		(160 ACRE) <b>¼</b>		SECTION	TOWNSHIP <input type="checkbox"/> NORTH <input type="checkbox"/> SOUTH	RANGE <input type="checkbox"/> EAST <input type="checkbox"/> WEST	
	SUBDIVISION NAME					LOT NUMBER		BLOCK NUMBER		UNIT/TRACT		
	HYDROGRAPHIC SURVEY								MAP NUMBER		TRACT NUMBER	
<b>3. DRILLING INFORMATION</b>	LICENSE NUMBER <b>WD1478</b>		NAME OF LICENSED DRILLER <b>EDWARD BRYAN</b>				NAME OF WELL DRILLING COMPANY <b>STRAUB CORPORATION</b>					
	DRILLING STARTED <b>10-28-09</b>		DRILLING ENDED <b>10-28-09</b>		DEPTH OF COMPLETED WELL (FT) <b>42.8</b>		BORE HOLE DEPTH (FT) <b>42.8</b>		DEPTH WATER FIRST ENCOUNTERED (FT)			
	COMPLETED WELL IS: <input type="checkbox"/> ARTESIAN <input type="checkbox"/> DRY HOLE <input checked="" type="checkbox"/> SHALLOW (UNCONFINED)								STATIC WATER LEVEL IN COMPLETED WELL (FT)			
	DRILLING FLUID: <input checked="" type="checkbox"/> AIR <input type="checkbox"/> MUD <input type="checkbox"/> ADDITIVES - SPECIFY:											
	DRILLING METHOD: <input type="checkbox"/> ROTARY <input type="checkbox"/> HAMMER <input type="checkbox"/> CABLE TOOL <input type="checkbox"/> OTHER - SPECIFY:											
	DEPTH (FT)		BORE HOLE DIA. (IN)	CASING MATERIAL		CONNECTION TYPE (CASING)	INSIDE DIA. CASING (IN)	CASING WALL THICKNESS (IN)	SLOT SIZE (IN)			
	FROM	TO										
<b>4. WATER BEARING STRATA</b>	DEPTH (FT)		THICKNESS (FT)	FORMATION DESCRIPTION OF PRINCIPAL WATER-BEARING STRATA (INCLUDE WATER-BEARING CAVITIES OR FRACTURE ZONES)						YIELD (GPM)		
	FROM	TO										
METHOD USED TO ESTIMATE YIELD OF WATER-BEARING STRATA								TOTAL ESTIMATED WELL YIELD (GPM)				

FOR OSE INTERNAL USE

WELL RECORD & LOG (Version 6/9/08)

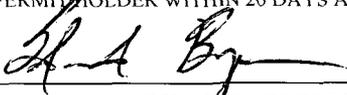
FILE NUMBER		POD NUMBER		TRN NUMBER	
LOCATION					PAGE 1 OF 2

5. SEAL AND PUMP	TYPE OF PUMP: <input type="checkbox"/> SUBMERSIBLE <input type="checkbox"/> JET <input type="checkbox"/> NO PUMP - WELL NOT EQUIPPED <input type="checkbox"/> TURBINE <input type="checkbox"/> CYLINDER <input type="checkbox"/> OTHER - SPECIFY:						
	ANNULAR SEAL AND GRAVEL PACK	DEPTH (FT)		BORE HOLE DIA. (IN)	MATERIAL TYPE AND SIZE	AMOUNT (CUBIC FT)	METHOD OF PLACEMENT
		FROM	TO				
		42.8	2'	5	5 BAGS OF 3/8 HOLEPLUG		TOPLOAD
2'	0	5	.5 BAGS OF CEMENT		TOPLOAD		

6. GEOLOGIC LOG OF WELL	DEPTH (FT)		THICKNESS (FT)	COLOR AND TYPE OF MATERIAL ENCOUNTERED (INCLUDE WATER-BEARING CAVITIES OR FRACTURE ZONES)	WATER BEARING?	
	FROM	TO			<input type="checkbox"/> YES	<input type="checkbox"/> NO
					<input type="checkbox"/> YES	<input type="checkbox"/> NO
					<input type="checkbox"/> YES	<input type="checkbox"/> NO
					<input type="checkbox"/> YES	<input type="checkbox"/> NO
					<input type="checkbox"/> YES	<input type="checkbox"/> NO
					<input type="checkbox"/> YES	<input type="checkbox"/> NO
					<input type="checkbox"/> YES	<input type="checkbox"/> NO
					<input type="checkbox"/> YES	<input type="checkbox"/> NO
					<input type="checkbox"/> YES	<input type="checkbox"/> NO
					<input type="checkbox"/> YES	<input type="checkbox"/> NO
					<input type="checkbox"/> YES	<input type="checkbox"/> NO
					<input type="checkbox"/> YES	<input type="checkbox"/> NO
					<input type="checkbox"/> YES	<input type="checkbox"/> NO

ATTACH ADDITIONAL PAGES AS NEEDED TO FULLY DESCRIBE THE GEOLOGIC LOG OF THE WELL

7. TEST & ADDITIONAL INFO	WELL TEST	METHOD: <input type="checkbox"/> BAILER <input type="checkbox"/> PUMP <input type="checkbox"/> AIR LIFT <input type="checkbox"/> OTHER - SPECIFY:
	TEST RESULTS - ATTACH A COPY OF DATA COLLECTED DURING WELL TESTING, INCLUDING START TIME, END TIME, AND A TABLE SHOWING DISCHARGE AND DRAWDOWN OVER THE TESTING PERIOD.	
ADDITIONAL STATEMENTS OR EXPLANATIONS: <b>PLUGGING REPORT</b> <b>37.8 ' OF CASING LEFT IN HOLE</b>		

8. SIGNATURE	THE UNDERSIGNED HEREBY CERTIFIES THAT, TO THE BEST OF HIS OR HER KNOWLEDGE AND BELIEF, THE FOREGOING IS A TRUE AND CORRECT RECORD OF THE ABOVE DESCRIBED HOLE AND THAT HE OR SHE WILL FILE THIS WELL RECORD WITH THE STATE ENGINEER AND THE PERMIT HOLDER WITHIN 20 DAYS AFTER COMPLETION OF WELL DRILLING:	
	 SIGNATURE OF DRILLER	<u>12/6/09</u> DATE



# WELL RECORD & LOG

OFFICE OF THE STATE ENGINEER

[www.ose.state.nm.us](http://www.ose.state.nm.us)

<b>1. GENERAL AND WELL LOCATION</b>	POD NUMBER (WELL NUMBER) <b>RED BYRD #1 MW-10</b>				OSE FILE NUMBER(S)								
	WELL OWNER NAME(S) <b>PLAINS MARKETING LP</b>				PHONE (OPTIONAL)								
	WELL OWNER MAILING ADDRESS <b>333 CLAY STREET, SUITE 1600</b>				CITY <b>HOUSTON</b>		STATE <b>TX</b>		ZIP <b>77078</b>				
	WELL LOCATION (FROM GPS)	DEGREES LATITUDE <b>32</b>		MINUTES <b>36</b>		SECONDS <b>10.00 N</b>		* ACCURACY REQUIRED: ONE TENTH OF A SECOND * DATUM REQUIRED: WGS 84					
		LONGITUDE <b>103</b>		<b>18</b>		<b>1.00 W</b>							
DESCRIPTION RELATING WELL LOCATION TO STREET ADDRESS AND COMMON LANDMARKS <b>LEA COUNTY</b>													
<b>2. OPTIONAL</b>	(2.5 ACRE) <b>¼</b>		(10 ACRE) <b>¼</b>		(40 ACRE) <b>¼</b>		(160 ACRE) <b>¼</b>		SECTION	TOWNSHIP <input type="checkbox"/> NORTH <input type="checkbox"/> SOUTH		RANGE <input type="checkbox"/> EAST <input type="checkbox"/> WEST	
	SUBDIVISION NAME					LOT NUMBER		BLOCK NUMBER		UNIT/TRACT			
	HYDROGRAPHIC SURVEY							MAP NUMBER		TRACT NUMBER			
<b>3. DRILLING INFORMATION</b>	LICENSE NUMBER <b>WD1478</b>		NAME OF LICENSED DRILLER <b>EDWARD BRYAN</b>				NAME OF WELL DRILLING COMPANY <b>STRAUB CORPORATION</b>						
	DRILLING STARTED <b>10-28-09</b>		DRILLING ENDED <b>10-28-09</b>		DEPTH OF COMPLETED WELL (FT) <b>40</b>		BORE HOLE DEPTH (FT) <b>40</b>		DEPTH WATER FIRST ENCOUNTERED (FT)				
	COMPLETED WELL IS: <input type="checkbox"/> ARTESIAN <input type="checkbox"/> DRY HOLE <input checked="" type="checkbox"/> SHALLOW (UNCONFINED)							STATIC WATER LEVEL IN COMPLETED WELL (FT)					
	DRILLING FLUID: <input checked="" type="checkbox"/> AIR <input type="checkbox"/> MUD <input type="checkbox"/> ADDITIVES - SPECIFY:												
	DRILLING METHOD: <input type="checkbox"/> ROTARY <input type="checkbox"/> HAMMER <input type="checkbox"/> CABLE TOOL <input type="checkbox"/> OTHER - SPECIFY:												
	DEPTH (FT)		BORE HOLE DIA. (IN)	CASING MATERIAL		CONNECTION TYPE (CASING)	INSIDE DIA. CASING (IN)	CASING WALL THICKNESS (IN)	SLOT SIZE (IN)				
	FROM	TO											
<b>4. WATER BEARING STRATA</b>	DEPTH (FT)		THICKNESS (FT)	FORMATION DESCRIPTION OF PRINCIPAL WATER-BEARING STRATA (INCLUDE WATER-BEARING CAVITIES OR FRACTURE ZONES)					YIELD (GPM)				
	FROM	TO											
METHOD USED TO ESTIMATE YIELD OF WATER-BEARING STRATA							TOTAL ESTIMATED WELL YIELD (GPM)						

FOR OSE INTERNAL USE

WELL RECORD & LOG (Version 6/9/08)

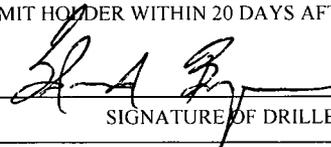
FILE NUMBER		POD NUMBER		TRN NUMBER	
LOCATION					PAGE 1 OF 2

5. SEAL AND PUMP	TYPE OF PUMP: <input type="checkbox"/> SUBMERSIBLE <input type="checkbox"/> JET <input type="checkbox"/> NO PUMP - WELL NOT EQUIPPED <input type="checkbox"/> TURBINE <input type="checkbox"/> CYLINDER <input type="checkbox"/> OTHER - SPECIFY:						
	ANNULAR SEAL AND GRAVEL PACK	DEPTH (FT)		BORE HOLE DIA. (IN)	MATERIAL TYPE AND SIZE	AMOUNT (CUBIC FT)	METHOD OF PLACEMENT
		FROM	TO				
		40	2'	5	2 BAGS OF 3/8 HOLEPLUG		TOPLoad
2'	0	5	.5 BAGS OF CEMENT		TOPLoad		

6. GEOLOGIC LOG OF WELL	DEPTH (FT)		THICKNESS (FT)	COLOR AND TYPE OF MATERIAL ENCOUNTERED (INCLUDE WATER-BEARING CAVITIES OR FRACTURE ZONES)	WATER BEARING? <input type="checkbox"/> YES <input type="checkbox"/> NO
	FROM	TO			
					<input type="checkbox"/> YES <input type="checkbox"/> NO
					<input type="checkbox"/> YES <input type="checkbox"/> NO
					<input type="checkbox"/> YES <input type="checkbox"/> NO
					<input type="checkbox"/> YES <input type="checkbox"/> NO
					<input type="checkbox"/> YES <input type="checkbox"/> NO
					<input type="checkbox"/> YES <input type="checkbox"/> NO
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					<input type="checkbox"/> YES <input type="checkbox"/> NO
					<input type="checkbox"/> YES <input type="checkbox"/> NO
					<input type="checkbox"/> YES <input type="checkbox"/> NO

ATTACH ADDITIONAL PAGES AS NEEDED TO FULLY DESCRIBE THE GEOLOGIC LOG OF THE WELL

7. TEST & ADDITIONAL INFO	WELL TEST	METHOD: <input type="checkbox"/> BAILER <input type="checkbox"/> PUMP <input type="checkbox"/> AIR LIFT <input type="checkbox"/> OTHER - SPECIFY:
	TEST RESULTS - ATTACH A COPY OF DATA COLLECTED DURING WELL TESTING, INCLUDING START TIME, END TIME, AND A TABLE SHOWING DISCHARGE AND DRAWDOWN OVER THE TESTING PERIOD.	
	ADDITIONAL STATEMENTS OR EXPLANATIONS: <b>PLUGGING REPORT</b>	

8. SIGNATURE	THE UNDERSIGNED HEREBY CERTIFIES THAT, TO THE BEST OF HIS OR HER KNOWLEDGE AND BELIEF, THE FOREGOING IS A TRUE AND CORRECT RECORD OF THE ABOVE DESCRIBED HOLE AND THAT HE OR SHE WILL FILE THIS WELL RECORD WITH THE STATE ENGINEER AND THE PERMIT HOLDER WITHIN 20 DAYS AFTER COMPLETION OF WELL DRILLING:	
	 SIGNATURE OF DRILLER	12/2/09 DATE



# WELL RECORD & LOG

OFFICE OF THE STATE ENGINEER

[www.ose.state.nm.us](http://www.ose.state.nm.us)

<b>1. GENERAL AND WELL LOCATION</b>	POD NUMBER (WELL NUMBER) <b>RED BYRD #1 MW-13</b>				OSE FILE NUMBER(S)							
	WELL OWNER NAME(S) <b>PLAINS MARKETING LP</b>				PHONE (OPTIONAL)							
	WELL OWNER MAILING ADDRESS <b>333 CLAY STREET, SUITE 1600</b>				CITY <b>HOUSTON</b>		STATE <b>TX</b>		ZIP <b>77078</b>			
	WELL LOCATION (FROM GPS)		DEGREES LATITUDE <b>32</b>		MINUTES <b>36</b>		SECONDS <b>10.00 N</b>		* ACCURACY REQUIRED: ONE TENTH OF A SECOND * DATUM REQUIRED: WGS 84			
			LONGITUDE <b>103</b>		<b>18</b>		<b>1.00 W</b>					
DESCRIPTION RELATING WELL LOCATION TO STREET ADDRESS AND COMMON LANDMARKS <b>LEA COUNTY</b>												
<b>2. OPTIONAL</b>	(2.5 ACRE) <b>1/4</b>		(10 ACRE) <b>1/4</b>		(40 ACRE) <b>1/4</b>		(160 ACRE) <b>1/4</b>		SECTION			
	SUBDIVISION NAME				LOT NUMBER		BLOCK NUMBER		UNIT/TRACT			
	HYDROGRAPHIC SURVEY						MAP NUMBER		TRACT NUMBER			
<b>3. DRILLING INFORMATION</b>	LICENSE NUMBER <b>WD1478</b>		NAME OF LICENSED DRILLER <b>EDWARD BRYAN</b>				NAME OF WELL DRILLING COMPANY <b>STRAUB CORPORATION</b>					
	DRILLING STARTED <b>10-28-09</b>		DRILLING ENDED <b>10-28-09</b>		DEPTH OF COMPLETED WELL (FT) <b>45.1</b>		BORE HOLE DEPTH (FT) <b>45.1</b>		DEPTH WATER FIRST ENCOUNTERED (FT)			
	COMPLETED WELL IS: <input type="checkbox"/> ARTESIAN <input type="checkbox"/> DRY HOLE <input checked="" type="checkbox"/> SHALLOW (UNCONFINED)								STATIC WATER LEVEL IN COMPLETED WELL (FT)			
	DRILLING FLUID: <input checked="" type="checkbox"/> AIR <input type="checkbox"/> MUD <input type="checkbox"/> ADDITIVES - SPECIFY:											
	DRILLING METHOD: <input type="checkbox"/> ROTARY <input type="checkbox"/> HAMMER <input type="checkbox"/> CABLE TOOL <input type="checkbox"/> OTHER - SPECIFY:											
	DEPTH (FT)		BORE HOLE DIA. (IN)		CASING MATERIAL		CONNECTION TYPE (CASING)		INSIDE DIA. CASING (IN)		CASING WALL THICKNESS (IN)	SLOT SIZE (IN)
	FROM	TO										
<b>4. WATER BEARING STRATA</b>	DEPTH (FT)		THICKNESS (FT)		FORMATION DESCRIPTION OF PRINCIPAL WATER-BEARING STRATA (INCLUDE WATER-BEARING CAVITIES OR FRACTURE ZONES)					YIELD (GPM)		
	FROM	TO										
METHOD USED TO ESTIMATE YIELD OF WATER-BEARING STRATA							TOTAL ESTIMATED WELL YIELD (GPM)					

FOR OSE INTERNAL USE

WELL RECORD & LOG (Version 6/9/08)

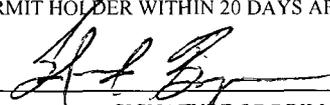
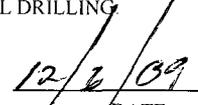
FILE NUMBER			POD NUMBER			TRN NUMBER		
LOCATION							PAGE 1 OF 2	

5. SEAL AND PUMP	TYPE OF PUMP: <input type="checkbox"/> SUBMERSIBLE <input type="checkbox"/> JET <input type="checkbox"/> NO PUMP - WELL NOT EQUIPPED <input type="checkbox"/> TURBINE <input type="checkbox"/> CYLINDER <input type="checkbox"/> OTHER - SPECIFY:						
	ANNULAR SEAL AND GRAVEL PACK	DEPTH (FT)		BORE HOLE DIA. (IN)	MATERIAL TYPE AND SIZE	AMOUNT (CUBIC FT)	METHOD OF PLACEMENT
		FROM	TO				
		45.1	2'	5	2 BAGS OF 3/8 HOLEPLUG		TOPLOAD
2'	0	5	.5 BAGS OF CEMENT		TOPLOAD		

6. GEOLOGIC LOG OF WELL	DEPTH (FT)		THICKNESS (FT)	COLOR AND TYPE OF MATERIAL ENCOUNTERED (INCLUDE WATER-BEARING CAVITIES OR FRACTURE ZONES)	WATER BEARING?
	FROM	TO			
					<input type="checkbox"/> YES <input type="checkbox"/> NO
					<input type="checkbox"/> YES <input type="checkbox"/> NO
					<input type="checkbox"/> YES <input type="checkbox"/> NO
					<input type="checkbox"/> YES <input type="checkbox"/> NO
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					<input type="checkbox"/> YES <input type="checkbox"/> NO
					<input type="checkbox"/> YES <input type="checkbox"/> NO
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					<input type="checkbox"/> YES <input type="checkbox"/> NO
					<input type="checkbox"/> YES <input type="checkbox"/> NO
					<input type="checkbox"/> YES <input type="checkbox"/> NO

ATTACH ADDITIONAL PAGES AS NEEDED TO FULLY DESCRIBE THE GEOLOGIC LOG OF THE WELL

7. TEST & ADDITIONAL INFO	WELL TEST	METHOD: <input type="checkbox"/> BAILER <input type="checkbox"/> PUMP <input type="checkbox"/> AIR LIFT <input type="checkbox"/> OTHER - SPECIFY:
	TEST RESULTS - ATTACH A COPY OF DATA COLLECTED DURING WELL TESTING, INCLUDING START TIME, END TIME, AND A TABLE SHOWING DISCHARGE AND DRAWDOWN OVER THE TESTING PERIOD.	
	ADDITIONAL STATEMENTS OR EXPLANATIONS: <b>PLUGGING REPORT</b> <b>35.1 ' OF CASING LEFT IN HOLE</b>	

8. SIGNATURE	THE UNDERSIGNED HEREBY CERTIFIES THAT, TO THE BEST OF HIS OR HER KNOWLEDGE AND BELIEF, THE FOREGOING IS A TRUE AND CORRECT RECORD OF THE ABOVE DESCRIBED HOLE AND THAT HE OR SHE WILL FILE THIS WELL RECORD WITH THE STATE ENGINEER AND THE PERMIT HOLDER WITHIN 20 DAYS AFTER COMPLETION OF WELL DRILLING.	
	 _____ SIGNATURE OF DRILLER	 _____ DATE



# WELL RECORD & LOG

OFFICE OF THE STATE ENGINEER

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<b>1. GENERAL AND WELL LOCATION</b>	POD NUMBER (WELL NUMBER) <b>RED BYRD #1 MW-14</b>				OSE FILE NUMBER(S)			
	WELL OWNER NAME(S) <b>PLAINS MARKETING LP</b>				PHONE (OPTIONAL)			
	WELL OWNER MAILING ADDRESS <b>333 CLAY STREET, SUITE 1600</b>				CITY <b>HOUSTON</b>	STATE <b>TX</b>	ZIP <b>77078</b>	
	WELL LOCATION (FROM GPS)	DEGREES LATITUDE <b>32</b>	MINUTES <b>36</b>	SECONDS <b>10.00</b> N	* ACCURACY REQUIRED: ONE TENTH OF A SECOND * DATUM REQUIRED: WGS 84			
		LONGITUDE <b>103</b>	<b>18</b>	<b>1.00</b> W				
DESCRIPTION RELATING WELL LOCATION TO STREET ADDRESS AND COMMON LANDMARKS <b>LEA COUNTY</b>								
<b>2. OPTIONAL</b>	(2.5 ACRE) <b>¼</b>	(10 ACRE) <b>¼</b>	(40 ACRE) <b>¼</b>	(160 ACRE) <b>¼</b>	SECTION	TOWNSHIP <input type="checkbox"/> NORTH <input type="checkbox"/> SOUTH	RANGE <input type="checkbox"/> EAST <input type="checkbox"/> WEST	
	SUBDIVISION NAME				LOT NUMBER	BLOCK NUMBER	UNIT/TRACT	
	HYDROGRAPHIC SURVEY					MAP NUMBER	TRACT NUMBER	
<b>3. DRILLING INFORMATION</b>	LICENSE NUMBER <b>WD1478</b>	NAME OF LICENSED DRILLER <b>EDWARD BRYAN</b>			NAME OF WELL DRILLING COMPANY <b>STRAUB CORPORATION</b>			
	DRILLING STARTED <b>10-28-09</b>	DRILLING ENDED <b>10-28-09</b>	DEPTH OF COMPLETED WELL (FT) <b>45.3</b>	BORE HOLE DEPTH (FT) <b>45.3</b>	DEPTH WATER FIRST ENCOUNTERED (FT)			
	COMPLETED WELL IS: <input type="checkbox"/> ARTESIAN <input type="checkbox"/> DRY HOLE <input checked="" type="checkbox"/> SHALLOW (UNCONFINED)				STATIC WATER LEVEL IN COMPLETED WELL (FT)			
	DRILLING FLUID: <input checked="" type="checkbox"/> AIR <input type="checkbox"/> MUD <input type="checkbox"/> ADDITIVES - SPECIFY:							
	DRILLING METHOD: <input type="checkbox"/> ROTARY <input type="checkbox"/> HAMMER <input type="checkbox"/> CABLE TOOL <input type="checkbox"/> OTHER - SPECIFY:							
	DEPTH (FT) FROM TO		BORE HOLE DIA. (IN)	CASING MATERIAL	CONNECTION TYPE (CASING)	INSIDE DIA. CASING (IN)	CASING WALL THICKNESS (IN)	SLOT SIZE (IN)
<b>4. WATER BEARING STRATA</b>	DEPTH (FT) FROM TO		THICKNESS (FT)	FORMATION DESCRIPTION OF PRINCIPAL WATER-BEARING STRATA (INCLUDE WATER-BEARING CAVITIES OR FRACTURE ZONES)			YIELD (GPM)	
METHOD USED TO ESTIMATE YIELD OF WATER-BEARING STRATA					TOTAL ESTIMATED WELL YIELD (GPM)			

FOR OSE INTERNAL USE

WELL RECORD & LOG (Version 6/9/08)

FILE NUMBER	POD NUMBER	TRN NUMBER
LOCATION	PAGE 1 OF 2	

5. SEAL AND PUMP	TYPE OF PUMP: <input type="checkbox"/> SUBMERSIBLE <input type="checkbox"/> JET <input type="checkbox"/> NO PUMP - WELL NOT EQUIPPED <input type="checkbox"/> TURBINE <input type="checkbox"/> CYLINDER <input type="checkbox"/> OTHER - SPECIFY:						
	ANNULAR SEAL AND GRAVEL PACK	DEPTH (FT)		BORE HOLE DIA. (IN)	MATERIAL TYPE AND SIZE	AMOUNT (CUBIC FT)	METHOD OF PLACEMENT
		FROM	TO				
		45.3	2'	5	2 BAGS OF 3/8 HOLEPLUG		TOPLOAD
2'	0	5	.5 BAGS OF CEMENT		TOPLOAD		

6. GEOLOGIC LOG OF WELL	DEPTH (FT)		THICKNESS (FT)	COLOR AND TYPE OF MATERIAL ENCOUNTERED (INCLUDE WATER-BEARING CAVITIES OR FRACTURE ZONES)	WATER BEARING?
	FROM	TO			
					<input type="checkbox"/> YES <input type="checkbox"/> NO
					<input type="checkbox"/> YES <input type="checkbox"/> NO
					<input type="checkbox"/> YES <input type="checkbox"/> NO
					<input type="checkbox"/> YES <input type="checkbox"/> NO
					<input type="checkbox"/> YES <input type="checkbox"/> NO
					<input type="checkbox"/> YES <input type="checkbox"/> NO
					<input type="checkbox"/> YES <input type="checkbox"/> NO
					<input type="checkbox"/> YES <input type="checkbox"/> NO
					<input type="checkbox"/> YES <input type="checkbox"/> NO
					<input type="checkbox"/> YES <input type="checkbox"/> NO
					<input type="checkbox"/> YES <input type="checkbox"/> NO
					<input type="checkbox"/> YES <input type="checkbox"/> NO

ATTACH ADDITIONAL PAGES AS NEEDED TO FULLY DESCRIBE THE GEOLOGIC LOG OF THE WELL

7. TEST & ADDITIONAL INFO	WELL TEST	METHOD: <input type="checkbox"/> BAILER <input type="checkbox"/> PUMP <input type="checkbox"/> AIR LIFT <input type="checkbox"/> OTHER - SPECIFY:
	TEST RESULTS - ATTACH A COPY OF DATA COLLECTED DURING WELL TESTING, INCLUDING START TIME, END TIME, AND A TABLE SHOWING DISCHARGE AND DRAWDOWN OVER THE TESTING PERIOD.	
	ADDITIONAL STATEMENTS OR EXPLANATIONS: <b>PLUGGING REPORT</b>	

8. SIGNATURE	THE UNDERSIGNED HEREBY CERTIFIES THAT, TO THE BEST OF HIS OR HER KNOWLEDGE AND BELIEF, THE FOREGOING IS A TRUE AND CORRECT RECORD OF THE ABOVE DESCRIBED HOLE AND THAT HE OR SHE WILL FILE THIS WELL RECORD WITH THE STATE ENGINEER AND THE PERMIT HOLDER WITHIN 20 DAYS AFTER COMPLETION OF WELL DRILLING.	
	 _____ SIGNATURE OF DRILLER	 _____ DATE



# WELL RECORD & LOG

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<b>1. GENERAL AND WELL LOCATION</b>	POD NUMBER (WELL NUMBER) <b>RED BYRD #1 MW-15</b>				OSE FILE NUMBER(S)					
	WELL OWNER NAME(S) <b>PLAINS MARKETING LP</b>				PHONE (OPTIONAL)					
	WELL OWNER MAILING ADDRESS <b>333 CLAY STREET, SUITE 1600</b>				CITY <b>HOUSTON</b>		STATE <b>TX</b>		ZIP <b>77078</b>	
	WELL LOCATION (FROM GPS)	DEGREES LATITUDE <b>32</b>	MINUTES <b>36</b>	SECONDS <b>10.00</b> N	* ACCURACY REQUIRED: ONE TENTH OF A SECOND * DATUM REQUIRED: WGS 84					
		LONGITUDE <b>103</b>	<b>18</b>	<b>1.00</b> W						
DESCRIPTION RELATING WELL LOCATION TO STREET ADDRESS AND COMMON LANDMARKS <b>LEA COUNTY</b>										
<b>2. OPTIONAL</b>	(2.5 ACRE) <b>¼</b>	(10 ACRE) <b>¼</b>	(40 ACRE) <b>¼</b>	(160 ACRE) <b>¼</b>	SECTION	TOWNSHIP <input type="checkbox"/> NORTH <input type="checkbox"/> SOUTH		RANGE <input type="checkbox"/> EAST <input type="checkbox"/> WEST		
	SUBDIVISION NAME				LOT NUMBER	BLOCK NUMBER		UNIT/TRACT		
	HYDROGRAPHIC SURVEY					MAP NUMBER		TRACT NUMBER		
<b>3. DRILLING INFORMATION</b>	LICENSE NUMBER <b>WD1478</b>		NAME OF LICENSED DRILLER <b>EDWARD BRYAN</b>			NAME OF WELL DRILLING COMPANY <b>STRAUB CORPORATION</b>				
	DRILLING STARTED <b>10-28-09</b>		DRILLING ENDED <b>10-28-09</b>	DEPTH OF COMPLETED WELL (FT) <b>43</b>		BORE HOLE DEPTH (FT) <b>43</b>	DEPTH WATER FIRST ENCOUNTERED (FT)			
	COMPLETED WELL IS: <input type="checkbox"/> ARTESIAN <input type="checkbox"/> DRY HOLE <input checked="" type="checkbox"/> SHALLOW (UNCONFINED)					STATIC WATER LEVEL IN COMPLETED WELL (FT)				
	DRILLING FLUID: <input checked="" type="checkbox"/> AIR <input type="checkbox"/> MUD <input type="checkbox"/> ADDITIVES - SPECIFY:									
	DRILLING METHOD: <input type="checkbox"/> ROTARY <input type="checkbox"/> HAMMER <input type="checkbox"/> CABLE TOOL <input type="checkbox"/> OTHER - SPECIFY:									
	DEPTH (FT)		BORE HOLE DIA. (IN)	CASING MATERIAL	CONNECTION TYPE (CASING)	INSIDE DIA. CASING (IN)	CASING WALL THICKNESS (IN)	SLOT SIZE (IN)		
	FROM	TO								
	<b>4. WATER BEARING STRATA</b>	DEPTH (FT)		THICKNESS (FT)	FORMATION DESCRIPTION OF PRINCIPAL WATER-BEARING STRATA (INCLUDE WATER-BEARING CAVITIES OR FRACTURE ZONES)				YIELD (GPM)	
FROM		TO								
METHOD USED TO ESTIMATE YIELD OF WATER-BEARING STRATA						TOTAL ESTIMATED WELL YIELD (GPM)				

FOR OSE INTERNAL USE

WELL RECORD & LOG (Version 6/9/08)

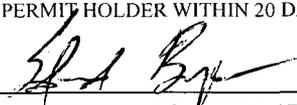
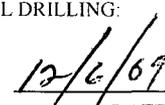
FILE NUMBER		POD NUMBER		TRN NUMBER	
LOCATION					PAGE 1 OF 2

5. SEAL AND PUMP	TYPE OF PUMP: <input type="checkbox"/> SUBMERSIBLE <input type="checkbox"/> JET <input type="checkbox"/> NO PUMP - WELL NOT EQUIPPED <input type="checkbox"/> TURBINE <input type="checkbox"/> CYLINDER <input type="checkbox"/> OTHER - SPECIFY:						
	ANNULAR SEAL AND GRAVEL PACK	DEPTH (FT)		BORE HOLE DIA. (IN)	MATERIAL TYPE AND SIZE	AMOUNT (CUBIC FT)	METHOD OF PLACEMENT
		FROM	TO				
		43	2'	5	3 BAGS OF 3/8 HOLEPLUG		TOPLOAD
2'	0	5	.5 BAGS OF CEMENT		TOPLOAD		

6. GEOLOGIC LOG OF WELL	DEPTH (FT)		THICKNESS (FT)	COLOR AND TYPE OF MATERIAL ENCOUNTERED (INCLUDE WATER-BEARING CAVITIES OR FRACTURE ZONES)	WATER BEARING? <input type="checkbox"/> YES <input type="checkbox"/> NO
	FROM	TO			
					<input type="checkbox"/> YES <input type="checkbox"/> NO
					<input type="checkbox"/> YES <input type="checkbox"/> NO
					<input type="checkbox"/> YES <input type="checkbox"/> NO
					<input type="checkbox"/> YES <input type="checkbox"/> NO
					<input type="checkbox"/> YES <input type="checkbox"/> NO
					<input type="checkbox"/> YES <input type="checkbox"/> NO
					<input type="checkbox"/> YES <input type="checkbox"/> NO
					<input type="checkbox"/> YES <input type="checkbox"/> NO
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					<input type="checkbox"/> YES <input type="checkbox"/> NO
					<input type="checkbox"/> YES <input type="checkbox"/> NO
					<input type="checkbox"/> YES <input type="checkbox"/> NO
					<input type="checkbox"/> YES <input type="checkbox"/> NO

ATTACH ADDITIONAL PAGES AS NEEDED TO FULLY DESCRIBE THE GEOLOGIC LOG OF THE WELL

7. TEST & ADDITIONAL INFO	WELL TEST	METHOD: <input type="checkbox"/> BAILER <input type="checkbox"/> PUMP <input type="checkbox"/> AIR LIFT <input type="checkbox"/> OTHER - SPECIFY:
	TEST RESULTS - ATTACH A COPY OF DATA COLLECTED DURING WELL TESTING, INCLUDING START TIME, END TIME, AND A TABLE SHOWING DISCHARGE AND DRAWDOWN OVER THE TESTING PERIOD.	
	ADDITIONAL STATEMENTS OR EXPLANATIONS: <b>PLUGGING REPORT</b>	

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	 _____ SIGNATURE OF DRILLER	 _____ DATE