November 11, 1997

THE TARGET

State of New Mexico Energy & Minerals Department Oil Conservation Division P. O. Box 6429 Santa Fe, New Mexico 87505

> RE: Request for Amendment Commingling Order PLC-102

Attention: Engineering Department

The enclosed recompletion forms have been filed with the Oil Conservation Division Hobbs District Office and the Bureau of Land Management for the West Corbin "13" Federal Lease, Well #1. · 13195

Maralo, Inc. requests that the above order be amended to surface commingle the West Corbin Delaware and the North Querecho Plains 50500 Delaware Pool production.

All other stipulations as set forth in the original order dated July 22, 1993, and amended October 6, 1993 and December 2, 1993 are applicable. SOUTH CORBIN WOLKAMP

Thank you for your assistance.

Sincerely,

Jonother Logan Dorothea Logan

Regulatory Analyst

encls. (4)

Form 3160-4 (October 1990)

UNITED STATES DEPARTMENT OF THE INTERIOR

SUBMIT IN DUPLICATE. (See other Instructions on reverse side) FOR APPROVED OMB NO. 1004-0137 Expires: December 31, 1991

SD

5. LEASE DESIGNATION AND SERIAL NO.

		BURE	AU OF LAND	MANAGEM	ENT		Tereste bio	NM-53239			
WELL CO	MPLET	ION C	R RECOM	PLETION	REPORT	AND	LOG*	6. IF INDIAN,	ALLOTTEE OR TRIBE NAME		
1a. TYPE OF WEL	L:	OII. WELL	X CAS D	DRY	Other			7. UNIT AGREE	MENT NAME		
b TYPE OF COM	PLETION:		W	Da1	Other			_			
HEW (WORK	DEEC-	BACK XX	PIFF. XX	Other			8. FARM OR	LEASE NAME, WELL NO.		
WELL L	OVER L	☐ EN		DESVE.	Other				IN "13" FEDERAL #1		
								9. API WELL NO			
3. ADDRESS AND	LO, INC.							30-025-316			
			ND TY 70701	•	(915) 6	04 744	81		POOL, OR WILDCAT		
4. LOCATION OF WE	BOX 83	SZ, MIULA	IND, TX 79702	cordance with a	\ - <i>i</i>				PLAINS; DELAWARE, NORT		
							,		, M., OR BLOCK AND SURVEY		
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At top prod. int	erval repo	rted below						CEC 12 T	soc noor		
SAME At total depth								SEC 13, T	103, K32E		
total dop.			i	14. PERMIT N	0.	DATE IS	8SUED	12. COUNTY OF	1 13. STATE		
SAME								PARISH			
S name antinom	1 10 7:55		71 DATE	COMPL. (Ready	to ared) 1 -			·	19. ELEV. CASINGHEAD		
RECOMPLETION	10. DATE	E T.D. REAC			18			(B, RT, GR, ETC.)*	CASHINGBAD		
10/13/97	<u> </u>			20/97	TIMEN COLUMN		3833' GR	S ROTARY TOOLS	CABLE TOOLS		
20. TOTAL DEPTH, MD	♠ TVD		ACK T.D., MD 4 TV	HOW	"LTIPLE COMPL MANY"	"	DRILLED		, CABGA TOOLS		
11,400'		_	665'					!	1.06 min		
24. PRODUCING INTE	RVAL(B), 0	THIS CO	MILETION-TOP,	BOTTOM, NAME	(MD AND TVD)	•			25. WAS DIRECTIONAL SURVEY MADE		
5874' - 5931' <u>[</u>	DELAWARE	•									
									<u> </u>		
26. TYPE ELECTRIC	AND OTHER	LOGE RUN	,					1 2	27. WAS WELL CORED		
28.			CASIN	G RECORD (R	epart all string	re set in	well)				
CASING SIZE/GRADE	WEIGH	RT. LB./FT.	DEPTH SET		HOLE SIZE			. CEMENTING RECORD	AMOUNT PULLED		
13-3/8"	54	1.5#	460'		17-1/2"	500	SXS CL. C	- CIRC TO SURF			
8-5/8"	32		4500		12-1/4"	4		- CIRC TO SURF			
5-1/2"	$-\frac{32}{17}$		11400		7-7/8"	4		SXS TOC @ 3320			
J-1/2			11-00				<u> </u>				
29.		7 73	VER RECORD	1		'	30.	TUBING RECOI	RT)		
				ACKS CEMENT*	SCREEN (M	-	SIZE	DEPTH SET (MD			
SIZE	TOP (M	B) BC	TTOM (MD)	ACKS CEMENT	SCREEN (E			·			
					_	-	2-7/8"	58371			
		1	<u> </u>		<u> </u>			<u> </u>			
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· · · · · · · · · · · · · · · · · · ·							30	0,000 GALS SPEC	C.FRAC, W/65,000# 20/4		
33.*					ODUCTION				000# SUP TF 20/40 RSN		
10/20/97	TON	1	ION METHOD (FIG. X 15" X 24"		pumping—size	and ty	pe of pump)	well shut-	PRODUCING		
DATE OF TEST	HOURS ?	,	CHOKE SIZE	PROD'N. FOR	OIL-BBL.		GAS-MCF.	WATER-BBL.	GAS-OIL RATIO		
10/28/97	}	HRS.	-	TEST PERIOD	77		27	119	351		
LOW. TUBING PRESS.	CASING	PRESSURE	CALCULATED	OIL-BBL.	GAS-	-MCF.	WAT	TERHBL.	OIL GRAVITY-API (CORE.)		
-	_		24-HOUR BATE				1		35.0		
34. DISPOSITION OF G	AS (Sold	used for tue	l. vented. etc.)	1	<u> </u>			TEST WITNESS			
SOLD	(~ Jim)	/ 4/ / #1	,,,					BOYD CHESS			
35. LIST OF ATTACH)/ # Vm-							1 3512			
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arown /	inst	7.	Louis	m+m	REGULATO	RY ANA	ALYST	DATE	NOVEMBER 11, 1997		
SIGNED		_	your	TITLE .				DATE			

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BOTTOM 460' 3537 3939 4997' 5812 9382 9524 10115 10365 10365 110394 110666 111400
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Rustler Yates Seven River Queen Grayburg Delaware Bone Spring 1st Bone Sp 2nd Bone Sp 3rd Bone sp
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TOP TRUE VERT. DEPTH 1300' 2382' 2893 3755 4632 5838' 6887' 8390' 99040' 9903'

OIL CONSERVATION DIVISION

DISTRICT | 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

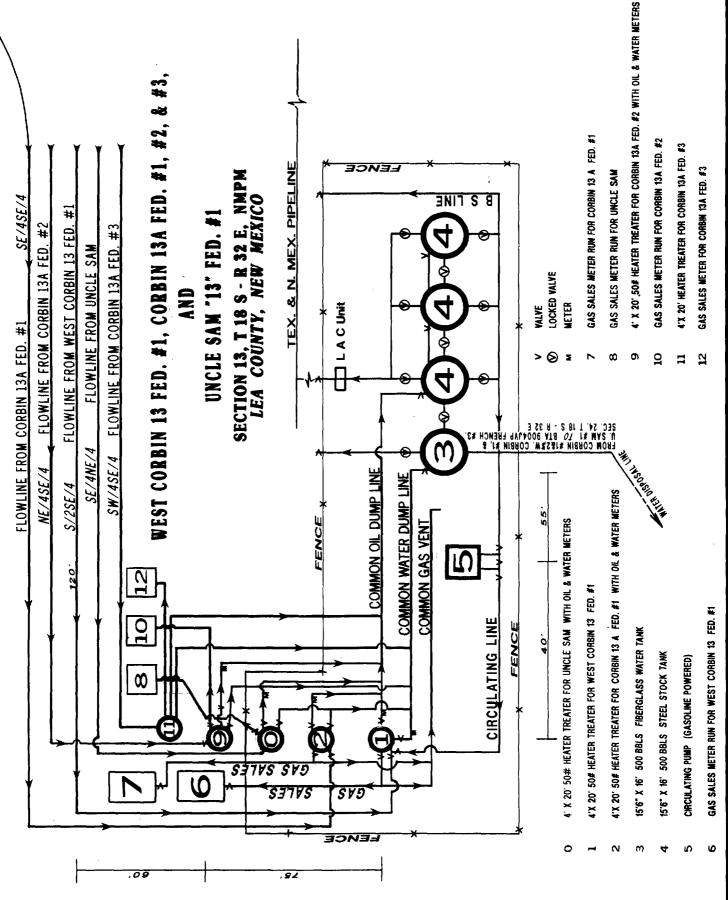
DISTRICT III
1000 Rio Brasce Rd., Artec, NM 87410

WELL LOCATION AND ACREAGE DEDICATION PLAT

All Distances must be from the outer boundaries of the section

Maria lo, Inc. Mest Corbin 13 Fed. 1 Unit Letter Section Teverality 18 South 32 East Number 19 Actual Feetage Location of Vali: 660 feet from the East Inc. Decidented arrange: 19 Maria Feetage Location of Vali: 660 feet from the East Inc. Decidented arrange: 19 Maria Feetage Contained on the vali 19 Maria Harman Production of Vali: 19 Maria Harman 1	Operator	·		Lease			Well No.
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Actual Footage Levelton of Vall 660 660 660 660 660 660 660 660 660 6	Unit Letter		Township			County	<u> </u>
Actival Postage Leaving or Well' 660 for from the SOUTH line and 660 for the first line. Post Carend Leaving Fermation 3833.0 Pockusing Fermation QUERECHO PLAINS; DELAMARE, NORTH 40 Acres 1. Outline the arreage dedicated to the subject well by colored pentil or hackure marks on the plat below. 2. If more than one lease is dedicated to the subject well by the south of the		1		32	Fact wurpy	ء ا	22
660 for form the South The and 660 for form from the East line Pool 3833.0 DELAMARE. Producing Formation Pool QUERCHO PLAINS; DELAMARE, NORTH 40 Acres 1.0 cutting the acresge delicated to the rubject wall by colored pencil or handbare marks on the plat believ. 2. If more than one lease of delicated to the wall, ordine each and identity the ownership thereof (both as to working interest and reynty). 3. If more than one lease of delicated to the wall, ordine each and identity the ownership thereof (both as to working interest and reynty). 3. If more than one lease of delicated to the wall, have the interest of all owners been consolidated. The reverse is "no" list of owners and tract descriptions which have actually been consolidated. (Use reverse side of this form message to the wall unit all interests have been consolidated. (Use reverse side of the wall has non-standard unit, eliminating such interest, has been approved by the Division. OPERATOR CERTIFICATION 1 Average servity the disc enterest of male and sales. Final can be a formation and the operation of the policy of male should be a consolidated. (The reverse side of the wall has a constant of the male services in the other consolidation. Agent for Maralo, Inc. OPERATOR CERTIFICATION 1 Average servity the disc entered and sales. Final can be a consolidated to the consolidation and the consolidation of the sales of male services in the sale of the s		eation of Well:	10 300 611	<u> </u>			
Grewand lawel Ear. 3833.0 DELAMARE QUERECHO PLAINS; DELAMARE, NORTH 40 Acres 2. If more than one lease is dedicated to the wall, outline each and identify the ownership thereof (both as to working interest and royalty). 3. If more than one lease of different ownership is dedicated to the wall, have the interest of all owners been consolidated by communitization, continuous force-pooling, etc.? 4. Yes 4. Yes 4. No. R enswer is "yes" type of consolidation 5. If more than one lease of different ownership is dedicated to the wall, have the interest of all owners been consolidated by communitization, continuous transfer in "inc" list of owners and tract descriptions which have actually been consolidated. (Use reverse side of this form necessary. 4. No allowable will be assigned to the wall unit all interests have been consolidated (by communitization, unitization, forced-pooling, otherwise) or until a non-standard unit, eliminating such interest, has been approved by the Dirision. 5. OPERATOR CERTIFICATION 1 havely carrify that fits out incention shows on the continuous properties of the section of the sect	660	Ç 0.1	cth	660	44 6	. Fast	94
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TANK BATTERY



District I PO Box 1980, Hobbs, NM \$8241-1980 District II

State of New Mexico
Energy, Minerals & Natural Resources Department

Form C-104 Revised February 10, 1994 Instructions on back

PO Drawer DD, Artesia, NM 88211-0719 District III

OIL CONSERVATION DIVISION PO Box 2088 Santa Fe. NM 87504-2088

Submit to Appropriate District Office 5 Copies

1000 Rio Brazos Rd., Aztec, NM 87410

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IF THIS IS AN AMENDED REPORT, CHECK THE BOX LABLED "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 ellowable 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 changes of operator, property name, well number, transporter, or other such changes.

A separate C-104 must be filed for each pool in a multiple completion.

Improperly filled out or incomplete forms may be returned to operators unapproved.

- 1. Operator's name and address
- Operator's OGRID number. If you do not have one it will be assigned and filled in by the District office. 2.
- Reason for filing code from the following table:

 NW New Well

 RC Recompletion

 CH Change of Operator

 AO Add oil/condensate transporter

 CO Change oil/condensate transporter

 AG Add gas transporter

 CG Change gas transporter

 RT Request for test allowable (include volume requested)

 If for any other reason write that reason in this box. 3.

If for any other reason write that reason in this box.

- The API number of this well 4 4.
- The name of the pool for this completion 5.
- в. The pool code for this pool
- 7. The property code for this completion
- The property name (well name) for this completion 8.
- 9. The well number for this completion
- The surface location of this completion NOTE: If the United States government survey designates a Lot Number for this location use that number in the 'UL or lot no.' box. Otherwise use the OCD unit letter. 10.
- 11, The bottom hole location of this completion
- Lease code from the following table:
 F Federal
 S State
 P Fas
 J Jicarilla
 N Navajo
 U Ute Mountain Ute
 I Other Indian Tribe 12.
- The producing method code from the following table:
 F Flowing
 P Pumping or other artificial lift 13.
- MO/DA/YR that this completion was first connected to a gas transporter
- The permit number from the District approved C-129 for this completion 15.
- 16. MO/DA/YR of the C-129 approval for this completion
- MO/DA/YR of the expiration of C-129 approval for this 17. completion
- 18. The gas or oil transporter's OGRID number
- 19. Name and address of the transporter of the product
- The number assigned to the POD from which this product will be transported by this transporter. If this is a new well or recompletion and this POD has no number the district office will assign a number and write it here. 20.
- 21. Product code from the following table:

- The ULSTR location of this POD if it is different from the well completion location and a short description of the POD (Example: "Battery A", "Jones CPD", etc.) 22.
- The POD number of the storage from which water is moved from this property. If this is a new well or recompletion and this POD has no number the district office will assign a number and write it here. 23.
- The ULSTR location of this POD if it is different from the well completion location and a short description of the POD (Example: "Battery A Water Tank", "Jones CPD Water Tank", etc.) 24.
- 25. MO/DA/YR drilling commenced
- 28. MO/DA/YR this completion was ready to produce
- Total vertical depth of the well 27.
- 28. Plugback vertical depth
- Top and bottom perforation in this completion or casing shoe and TD if openhols 29.
- 30. Inside diameter of the well bore
- 31. Outside diameter of the casing and tubing
- Depth of casing and tubing. If a casing liner show top and bottom. 32.
- 33, Number of sacks of cement used per casing string

The following test data is for an oil well it must be from a test conducted only after the total volume of load oil is recovered.

- MO/DA/YR that new oil was first produced
- MO/DA/YR that gas was first produced into a pipeline 35.
- 36. MO/DA/YR that the following test was completed
- 37. Length in hours of the test
- Flowing tubing pressure oil wells Shut-in tubing pressure gas wells 38.
- Flowing casing pressure oil wells Shut-in casing pressure gas wells 39.
- 40. Diameter of the choke used in the test
- 41, Barrels of oil produced during the test
- 42 Barrels of water produced during the test
- MCF of gas produced during the test
- 44. Gas well calculated absolute open flow in MCF/D
- The method used to test the well:

 F Flowing
 P Pumping
 S Swabbing
 If other method please write it in. 45
- The signature, printed name, and title of the person authorized to make this report, the date this report was signed, and the telephone number to call for questions about this report~ y 46.
- The previous operator's name, the signature, printed name, and title of the previous operator's representative authorized to verify that the previous operator no longer operates this completion, and the date this report was signed by that person 47.