

CMD : ONGARD 07/15/96 09:03:46  
OG6C102 C102-WELL LOCATION, DEDICATED ACREAGE PLAT OGOAD -EMFN

API Well No : 30 45 11404 Well No : 9 Eff Date : 05-02-1994  
Pool Idn : 72319 BLANCO-MESAVERDE (PRORATED GAS)

Prop Idn : 294 BARNES B

OGRID Idn : 778 AMOCO PRODUCTION CO  
GL Elevation : 99999

	U/L	Sec	Township	Range	North/South	East/West	Prop/Act(P/A)
B.H. Locn	M	13	32N	11W	FTG 999 F S FTG	999 F E	P
OCD U/L	M						
Lot Identifier:			API County	:	45		

If more than 1 lease of different ownership is dedicated to the well, have the interest of all owners been consolidated? (Y/N) :  
Type of consolidation (Comm, Unit, Forced Pooling - C/U/F/O) :

PF01 HELP PF02 PF03 EXIT PF04 GoTo PF05 PF06 CONFIRM  
PF07 PF08 PF09 PRINT PF10 NEXT-WC PF11 HISTORY PF12 ACRE

7.15.96

Well is now a POW - Intent is  
all use here.

Maate will send what is  
necessary to bring well info keep  
to date

FOR DIVISION

USE ONLY:

APPLICATION FOR CONTINUED STRIPPER CLASSIFICATION

5A. Indicate Type of Lease <input type="checkbox"/> STATE <input type="checkbox"/> FEDERAL		5. State Oil & Gas Lease No.	
7. Unit Agreement Name		APPROPRIATE FILING FEE(S) ENCLOSED? YES _____ NO _____	
		DATE COMPLETE APPLICATION FILED _____ DATE DETERMINATION MADE _____ WAS APPLICATION CONTESTED? YES _____ NO _____ NAME(S) OF INTERVENOR(S), IF ANY:	
8. Form of Lease Name		Effective October 1, 1986, a non-refundable filing fee of \$25.00 per category for each application is mandatory. (Rule 2, Order No. R-5878-B-3)	
9. Well No.		2. Name of Operator	
10. Field and Pool, or Wildcat		3. Address of Operator	
12. County		4. Location of Well UNIT LETTER _____ LOCATED _____ FEET FROM THE _____ LINE FEET FROM THE _____ LINE TWP. _____ RGE. _____ NEPRD _____	
11. Name and Address of Purchaser(s)		AND _____ FEET FROM THE _____ LINE OF SEC. _____ TWP. _____ RGE. _____ NEPRD _____	

CLASSIFICATION

1. Check appropriate box for category sought and information submitted. Enter required information on lines 2 and 3.c., below.
2. Filing fee(s), amount enclosed: \$ \_\_\_\_\_
3. All applications must contain the items required by the applicable rule of the Division's "Special Rules for Applications for Wellhead Price Ceiling Category Determinations" as follows:
  - A. Increased production resulting from recognized enhanced recovery techniques
    - All items required by Rule 19
    - Well is seasonally affected
    - All items required by Rule 20
  - B. Increased production resulting from temporary pressure buildup for the 90-day period ending \_\_\_\_\_
    - All items required by Rule 21

I HEREBY CERTIFY THAT THE INFORMATION CONTAINED HEREIN IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF.

NAME OF APPLICANT (Type or Print) \_\_\_\_\_

SIGNATURE OF APPLICANT \_\_\_\_\_

Title \_\_\_\_\_

Date \_\_\_\_\_

EXAMINER

The information contained herein includes all of the information required to be filed by the applicant under Subpart 8 of Part 274 of the FERC regulations.

Approved  Disapproved

FOR DIVISION USE ONLY