

District I
1625 N. French Dr., Hobbs, NM 88240
Phone:(505) 393-6161 Fax:(505) 393-0720

District II

1301 W. Grand Ave., Artesia, NM 88210
Phone:(505) 748-1283 Fax:(505) 748-9720

District III

1000 Rio Brazos Rd., Aztec, NM 87410
Phone:(505) 334-6178 Fax:(505) 334-6170

District IV

1220 S. St Francis Dr., Santa Fe, NM 87505
Phone:(505) 476-3470 Fax:(505) 476-3462

State of New Mexico
Energy, Minerals and Natural Resources

Form C-139
Permit 74392
Revised June 10, 2003

Oil Conservation Division
1220 S. St Francis Dr.
Santa Fe, NM 87505
(505) 476-3440

APPLICATION FOR PRODUCTION RESTORATION PROJECT

I. Operator and Well:

Operator name & address JAM OIL LLC PO BOX 1382 ARTESIA NM 88211						OGRID Number 256430		
Contact Party Amanda Johnson						Phone 575-365-4054		
Property Name MARY ANN CANNON				Well Number 005		API Number 30-005-10109		
UL - Lot O	Section 27	Township 10S	Range 25E	Feet From The 660	North/South Line S	Feet From The 1980	East/West Line E	County Chaves

II. Pool and Production Restoration:

Previous Producing Pool(s) (If change in Pools): BITTER LAKE,SAN ANDRES, SOUTH	
Date Production Restoration started: 4/25/2008	Date Well Returned to Production: 4/30/2008
Describe the process used to return the well to production (Attach additional information if necessary): 4-25-08 Pulled up to hole w/ pulling unit, found no rods in hole, 1 joint of 2 3/8" tubing. Pulled tubing out and shut down. 4-26-08 Tallied 30 joints of 2 3/8" tubing. Ran tubing, tagged @ 943', pulled 29th joint out and set seating nipple @919.6' and shut down. 4-29-08 ran 2"x1 1/2"x 10rwtc pump. Ran 35 rods in and tagged and pulled out, ran subs and spaced well and shut down. 4-30-08 Set used Cobat pump jack and spaced rods and returned to production.	

III. Identify the period and Division records which show the Well had thirty (30) days or less production for the twenty-four consecutive months prior to restoring production:

Records Showing Well produced less than 30 days during 24 month period: <input type="checkbox"/> Well File record showing that well was plugged <input checked="" type="checkbox"/> OCD production data <input type="checkbox"/> OCD Form C-115 (Operator's Monthly Report)	Month/Year (Beginning of 24 month period): 3/1/2006 Month/Year (End of 24 month period): 5/2/2008
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IV. Signature:

I hereby certify that the information above is true and complete to the best of my knowledge and belief.			
Signature	Electronically Signed	Title	President
Date		5/4/2008	
Type or print name	Amanda Johnson	E-mail address	amandajohnson@plateautel.net
Telephone No.		575-746-1154	

FOR OIL CONSERVATION DIVISION USE ONLY:

V. CERTIFICATION OF APPROVAL:

This Application is hereby approved and the above-referenced well is designated a Production Restoration Project. By copy hereof, the Division notifies the Secretary of the Taxation and Revenue Department of this Approval and certifies that production was restored on:

Date Production Restored as Reported on C-115: Unknown

Date Well Returned to Production: 4/30/2008

Signature District Supervisor: Tim Gum District 2 Date 6/18/2008

VI. DATE OF NOTIFICATION TO THE SECRETARY OF THE TAXATION AND REVENUE DEPARTMENT: 6/18/2008