

ABOVE THIS LINE FOR DIVISION USE ONLY

NEW MEXICO OIL CONSERVATION DIVISION

- Engineering Bureau -

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



ADMINISTRATIVE APPLICATION CHECKLIST

THIS CHECKLIST IS MANDATORY FOR ALL ADMINISTRATIVE APPLICATIONS FOR EXCEPTIONS TO DIVISION RULES AND REGULATIONS WHICH REQUIRE PROCESSING AT THE DIVISION LEVEL IN SANTA FE

Application Acronyms:

- [NSL-Non-Standard Location] [NSP-Non-Standard Proration Unit] [SD-Simultaneous Dedication]
- [DHC-Downhole Commingling] [CTB-Lease Commingling] [PLC-Pool/Lease Commingling]
- [PC-Pool Commingling] [OLS - Off-Lease Storage] [OLM-Off-Lease Measurement]
- [WFX-Waterflood Expansion] [PMX-Pressure Maintenance Expansion]
- [SWD-Salt Water Disposal] [IPI-Injection Pressure Increase]
- [EOR-Qualified Enhanced Oil Recovery Certification] [PPR-Positive Production Response]

- [1] **TYPE OF APPLICATION** - Check Those Which Apply for [A]
- [A] Location - Spacing Unit - Simultaneous Dedication
 NSL NSP SD
- Check One Only for [B] or [C]
- [B] Commingling - Storage - Measurement
 DHC CTB PLC PC OLS OLM
- [C] Injection - Disposal - Pressure Increase - Enhanced Oil Recovery
 WFX PMX SWD IPI EOR PPR
- [D] Other: Specify _____
- [2] **NOTIFICATION REQUIRED TO:** - Check Those Which Apply, or Does Not Apply
- [A] Working, Royalty or Overriding Royalty Interest Owners
- [B] Offset Operators, Leaseholders or Surface Owner
- [C] Application is One Which Requires Published Legal Notice
- [D] Notification and/or Concurrent Approval by BLM or SLO
U.S. Bureau of Land Management - Commissioner of Public Lands, State Land Office
- [E] For all of the above, Proof of Notification or Publication is Attached, and/or,
- [F] Waivers are Attached
- [3] **SUBMIT ACCURATE AND COMPLETE INFORMATION REQUIRED TO PROCESS THE TYPE OF APPLICATION INDICATED ABOVE.**

[4] **CERTIFICATION:** I hereby certify that the information submitted with this application for administrative approval is **accurate** and **complete** to the best of my knowledge. I also understand that **no action** will be taken on this application until the required information and notifications are submitted to the Division.

Note: Statement must be completed by an individual with managerial and/or supervisory capacity.

Mark Stephens	<i>Mark Stephens</i>	Reg. Comp. Analyst	1/24/03
Print or Type Name	Signature	Title	Date
		Mark_Stephens@oxy.com	
		e-mail Address	

03 JAN 31 PM 11:09
OIL CONSERVATION DIV.



Occidental Permian Limited Partnership

Houston Office
P.O. Box 4294
Houston, TX 77210-4294
(281) 552-1000

January 30, 2003

State of New Mexico
Energy, Minerals & Natural Resources Department
Oil Conservation Division
Attn: Mr. William V. Jones, P.E.
1220 S. St. Francis Dr.
Santa Fe, NM 87504

03 JAN 31 PM 11:09
OIL CONSERVATION DIV.

RE: Expansion of Pressure Maintenance Project (R-6199-B, 10/22/01)
North Hobbs (Grayburg/San Andres) Unit
Hobbs; Grayburg – San Andres Pool
Well No. 442 (API No. 30-025-27001)
Letter P, Section 30, T-18-S, R-38-E
Lea County, NM

Dear Mr. Jones:

Occidental Permian Limited Partnership respectfully requests administrative approval for expansion of the subject pressure maintenance project by amending the injection rate and injection pressure of produced water, and by adding CO₂ and produced gas as injectants for North Hobbs G/SA Unit No. 442 (see Exhibit 1). Well No. 442, currently an active water injection well, was previously approved for injection under Administrative Order No. PMX-109 (8/13/81).

Also submitted in support of our request is the following documentation:

- Administrative Application Checklist
- An Injection Well Data Sheet
- OCD Form C-102
- A map reflecting the location of the subject well. The map identifies all wells located within a two-mile radius of Well No. 442 and has a one-half mile radius circle drawn around the well which identifies the well's Area of Review
- Exhibit 2 (showing nearby wells which have previously been approved for similar injectants/rates in accordance with Order No. R-6199-B)



Occidental Permian Limited Partnership

Houston Office
P.O. Box 4294
Houston, TX 77210-4294
(281) 552-1000

- A statement describing any changes in status or construction of any well penetrating the injection interval within the subject well's ½-mile Area of Review (Exhibit 3)
- A list of Offset Operators and Surface Owners (these parties have been notified of this application by certified mail)
- An Affidavit of Publication and copy of the legal advertisement that was published in the county in which the well is located

Your favorable consideration of our request will be appreciated. If you have any questions of a technical nature, please call Oxy's David Nelson at (505) 397-8211. Otherwise, please call me at (281) 552-1158.

Very truly yours,

Mark Stephens

Mark Stephens
Regulatory Compliance Analyst

CC: Oil Conservation Division
Hobbs District Office
1625 N. French Drive
Hobbs, NM 88240

State of New Mexico
Commissioner of Public Lands
P.O. Box 1148
Santa Fe, NM 87504-1148

Bureau of Land Management
Roswell District Office
2909 West Second Street
Roswell, NM 88201

Offset Operators (see attached list)

Surface Owners (see attached list)

EXHIBIT 1

North Hobbs (Grayburg/San Andres) Unit
Well No. 442
1300' FSL & 1050' FEL, Letter P, Section 30, T-18-S, R-38-E
Lea County, New Mexico

Produced Water

Maximum Injection Rate	9000 BWPD*
Average Injection Rate	N/A
Maximum Surface Injection Pressure	1100 PSI* (will not exceed 2400 psi bottom hole pressure)
Average Surface Injection Pressure	N/A

(* In accordance with Order No. R-6199-B, effective 10/22/01)

CO2 & Produced Gas

Maximum Injection Rate	15,000 MCFGPD*
Average Injection Rate	N/A
Maximum Surface Injection Pressure	CO2 – 1250 PSI* (will not exceed 2400 psi bottom hole pressure) CO2 w/produced gas – 1770 PSI* (will not exceed 2400 psi bottom hole pressure)
Average Surface Injection Pressure	N/A

(* In accordance with Order No. R-6199-B, effective 10/22/01)

Source Water - San Andres produced water

Injection Interval: Approximately 4000' to TD (4510')

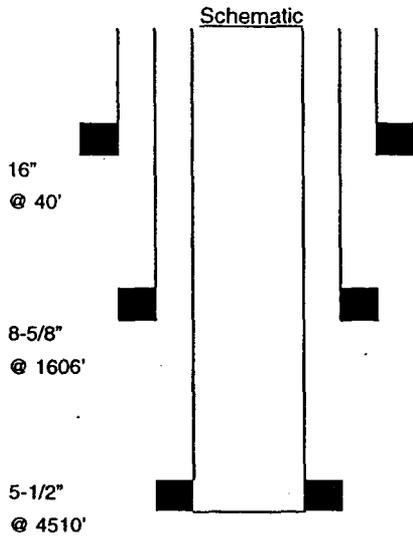
Next higher oil zone - Byers (Queen) @ +/- 3680'

Next lower oil zone - Glorieta @ +/- 5300'

Occidental Permian Limited Partnership affirms that available geologic and engineering data has been examined resulting in the finding of no evidence of open faults or any other hydrologic connection between the disposal zone and any underground source of drinking water.

INJECTION WELL DATA SHEET

Operator Occidental Permian Limited Partnership		Lease North Hobbs G/SA Unit			County Lea
Well No. 30-442	Footage Location 1300' FSL & 1050' FEL	Section 30	Township 18-S	Range 38-E	Unit Letter P



<u>Surface Casing</u>		<u>Tubular Data</u>	
Size	16"	Cemented with	40 sxs.
TOC	SURF	Determined by	CIRC
Hole size _____			
<u>Intermediate Casing</u>			
Size	8-5/8"	Cemented with	850 sxs.
TOC	SURF	Determined by	CIRC
Hole size _____			
<u>Long string Casing</u>			
Size	5-1/2"	Cemented with	900 sxs.
TOC	SURF	Determined by	CIRC
Hole size _____			
<u>Liner</u>			
Size	_____	Cemented with	_____ sxs.
TOC	_____	Determined by	_____
Hole size _____			
<u>Total depth</u>	4510'		

Injection interval
Approx. 4000 feet to TD

Completion type Perforated Casing

Tubing size 3-1/2" lined with Duoline (Fiberglass liner) set in a
Guiberson – Uni VI packer at Within 100 feet of the top perf.
(brand and model)

Other Data

- Name of the injection formation San Andres
- Name of field or Pool Hobbs; Grayburg – San Andres
- Is this a new well drilled for injection? Yes No
If no, for what purpose was the well originally drilled? Injection
- Has the well ever been perforated in any other zone(s)? List all such perforated intervals and give plugging detail (sacks of cement or bridge plug(s) used) None
- Give the depth to and name of any overlying and/or underlying oil and gas zones (pools) in this area.
Byers (Queen), +/- 3680'; Glorieta, 5300'

District I
 PO Box 1980, Hobbs, NM 88241-1980
 District II
 811 S. 1st Street, Artesia, NM 88210-2834
 District III
 1000 Rio Brazos Rd., Aztec, NM 87410
 District IV
 2040 South Pacheco, Santa Fe, NM 87505

State of New Mexico
 Energy, Minerals & Natural Resources Department

OIL CONSERVATION DIVISION
 2040 South Pacheco
 Santa Fe, NM 87505

Form C-102
 Revised October 18, 1994
 Instructions on back
 Submit to Appropriate District Office
 State Lease - 4 Copies
 Fee Lease - 3 Copies

AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

¹ API Number 30-025-27001		² Pool Code 31920	³ Pool Name Hobbs; Grayburg - San Andres
⁴ Property Code 19520	⁵ Property Name North Hobbs (GSA) Unit		⁶ Well Number 442
⁷ OGRID No. 157984	⁸ Operator Name Occidental Permian Limited Partnership		⁹ Elevation 3646

¹⁰ Surface Location

UL or lot no.	Section	Township	Range	Lot. Idn	Feet from the	North/South Line	Feet from the	East/West line	County
P	30	18-S	38-E		1300	South	1050	East	Lea

¹¹ Bottom Hole Location If Different From Surface

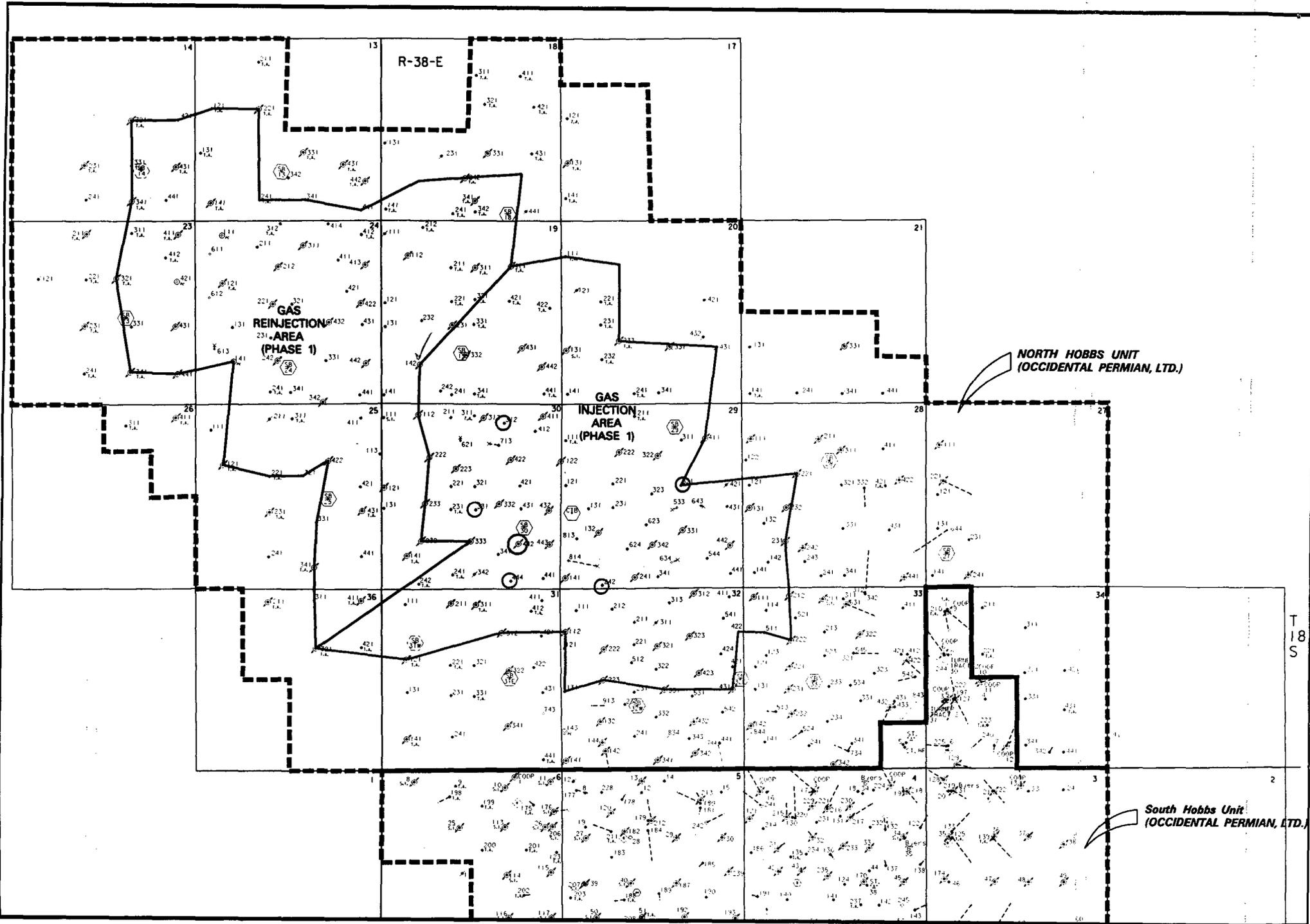
UL or lot no.	Section	Township	Range	Lot. Idn	Feet from the	North/South Line	Feet from the	East/West line	County

¹² Dedicated Acres	¹³ Joint or Infill	¹⁴ Consolidation Code	¹⁵ Order No.
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NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED OR A NON--STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION

				<p>¹⁷ OPERATOR CERTIFICATION</p> <p><i>I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.</i></p> <p style="text-align: right;"><u>MARK Stephens</u></p> <p>Signature Mark Stephens</p> <p>Printed Name Regulatory Compliance Analyst</p> <p>Title January 24, 2003</p> <p>Date</p>
				<p>¹⁸ SURVEYOR CERTIFICATION</p> <p><i>I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief.</i></p> <p>Date of Survey</p> <p>Signature and Seal of Professional Surveyer:</p> <p>Certificate Number</p>

Exhibit 2 (Well No. 442 circled in red; wells approved for injection under Order No. R-6199-B circled in blue)



T
18
S

South Hobbs Unit
(OCCIDENTAL PERMIAN, LTD.)

Exhibit "B"
Division Order No. R-6199-B
North Hobbs Grayburg San Andres Unit Tertiary Recovery Project
Approved Injection Wells (Existing Wells)

Well Name & Number	API Number	Well Location	Injection Interval	Packer Depth
NHGBSAU No. 341 **	30-025-05446	660' FSL & 1980' FEL, Unit O, Section 13, T-18S, R-37E	4,000'-4,263'	3,900'
NHGBSAU No. 441 **	30-025-12732	330' FSL & 330' FEL, Unit F, Section 13, T-18S, R-37E	4,000'-4,258'	3,900'
NHGBSAU No. 232 **	30-025-29172	2501' FSL & 1410' FWL, Unit K, Section 19, T-18S, R-38E	4,000'-4,420'	3,900'
NHGBSAU No. 141 **	30-025-05485	1315' FSL & 1315' FWL, Unit M, Section 24, T-18S, R-37E	4,000'-4,270'	3,900'
NHGBSAU No. 331 **	30-025-05488	1320' FSL & 1325' FEL, Unit J, Section 24, T-18S, R-37E	4,000'-4,210'	3,900'
NIIGBSAU No. 411 **	30-025-23522	990' FNL & 990' FEL, Unit A, Section 24, T-18S, R-37E	4,000'-4,283'	3,900'
NHGBSAU No. 414 **	30-025-28879	10' FNL & 1280' FEL, Unit A, Section 24, T-18S, R-37E	4,000'-4,370'	3,900'
NHGBSAU No. 431 **	30-025-05487	2310' FSL & 330' FEL, Unit I, Section 24, T-18S, R-37E	4,000'-4,300'	3,900'
NHGBSAU No. 411 **	30-025-05503	330' FNL & 330' FEL, Unit A, Section 25, T-18S, R-37E	4,000'-4,259'	3,900'
NHGBSAU No. 242	30-025-28413	100' FSL & 1400' FWL, Unit N, Section 29, T-18S, R-38E	4,000'-4,370'	3,900'
NHGBSAU No. 321	30-025-07431	2310' FNL & 1650' FEL, Unit G, Section 29, T-18S, R-38E	4,000'-4,309'	3,900'
NHGBSAU No. 113 **	30-025-29064	1310' FNL & 195' FWL, Unit D, Section 30, T-18S, R-38E	4,000'-4,370'	3,900'
NHGBSAU No. 312	30-025-29197	530' FNL & 1448' FEL, Unit B, Section 30, T-18S, R-38E	4,000'-4,431'	3,900'
NHGBSAU No. 331	30-025-07472	2335' FSL & 2310' FEL, Unit J, Section 30, T-18S, R-38E	4,000'-4,238'	3,900'
NHGBSAU No. 444	30-025-28959	215' FSL & 1255' FEL, Unit P, Section 30, T-18S, R-38E	4,000'-4,370'	3,900'
NHGBSAU No. 131	30-025-07527	2310' FSL & 330' FWL, Unit L, Section 32, T-18S, R-38E	4,000'-4,250'	3,900'
NIIGBSAU No. 422	30-025-29074	1385' FNL & 110' FEL, Unit H, Section 32, T-18S, R-38E	4,000'-4,370'	3,900'
NHGBSAU No. 111	30-025-12505	330' FNL & 330' FWL, Unit D, Section 33, T-18S, R-38E	4,000'-4,237'	3,900'
NHGBSAU No. 141 **	30-025-05437	660' FSL & 660' FWL, Unit M, Section 13, T-18S, R-37E	4,000'-4,235'	3,900'
NHGBSAU No. 221 **	30-025-05439	1980' FNL & 1980' FWL, Unit F, Section 13, T-18S, R-37E	4,000'-4,160'	3,900'
NHGBSAU No. 321 **	30-025-05457	2310' FNL & 1650' FEL, Unit G, Section 14, T-18S, R-37E	4,000'-4,350'	3,900'
NHGBSAU No. 121 **	30-025-05503	1650' FNL & 990' FWL, Unit E, Section 25, T-18S, R-37E	4,000'-4,261'	3,900'
NHGBSAU No. 341 **	30-025-05497	660' FSL & 1650' FEL, Unit O, Section 25, T-18S, R-37E	4,000'-4,220'	3,900'
NHGBSAU No. 411	30-025-07454	990' FNL & 990' FEL, Unit A, Section 29, T-18S, R-38E	4,000'-4,335'	3,900'
NHGBSAU No. 321 **	30-025-05540	1650' FNL & 1650' FEL, Unit G, Section 36, T-18S, R-37E	4,000'-4,300'	3,900'
NHGBSAU No. 121 **	30-025-05440	1980' FNL & 660' FWL, Unit E, Section 13, T-18S, R-37E	4,000'-4,235'	3,900'
NHGBSAU No. 241 **	30-025-05436	660' FSL & 1980' FWL, Unit N, Section 13, T-18S, R-37E	4,000'-4,320'	3,900'
NIIGBSAU No. 341 **	30-025-05450	660' FSL & 1650' FEL, Unit O, Section 14, T-18S, R-37E	4,000'-4,350'	3,900'
NHGBSAU No. 342 **	30-025-07342	330' FSL & 2310' FEL, Unit O, Section 18, T-18S, R-38E	4,000'-4,286'	3,900'
NHGBSAU No. 311 **	30-025-07369	1309' FNL & 2310' FEL, Unit B, Section 19, T-18S, R-38E	4,000'-4,296'	3,900'
NHGBSAU No. 411 **	30-025-07370	1300' FNL & 1300' FEL, Unit A, Section 19, T-18S, R-38E	4,000'-4,342'	3,900'
NHGBSAU No. 233	30-025-27214	1610' FSL & 1850' FWL, Unit K, Section 20, T-18S, R-38E	4,000'-4,510'	3,900'
NHGBSAU No. 321 **	30-025-05463	1650' FNL & 1650' FEL, Unit G, Section 23, T-18S, R-37E	4,000'-4,265'	3,900'
NHGBSAU No. 341 **	30-025-05475	990' FSL & 1650' FEL, Unit O, Section 23, T-18S, R-37E	4,000'-4,302'	3,900'
NHGBSAU No. 121 **	30-025-05476	1650' FNL & 990' FWL, Unit E, Section 24, T-18S, R-37E	4,000'-4,319'	3,900'
NHGBSAU No. 121 **	30-025-07514	1980' FNL & 990' FWL, Unit E, Section 31, T-18S, R-38E	4,000'-4,300'	3,900'

**** Denotes wells that are authorized to inject CO₂, water and produced gas.
All other wells are authorized to inject CO₂ and water only.**

Exhibit 3

Statement describing any changes in status or construction of any well penetrating the injection interval within the ½-mile radius Area of Review of North Hobbs Unit G/SA Unit Well No. 442

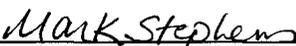
A review of the subject well's AOR shows that five new wells (all operated by Texland Petroleum-Hobbs, LLC) have been drilled within the ½-mile radius since the previous review occurred (done as a part of Oxy's August, 2001 application to amend Order No. R-6199). These wells are:

Bowers "A" Federal No. 39 (30-025-35727)
Bowers "A" Federal No. 42 (30-025-35756)
Bowers "A" Federal No. 43 (30-025-35852)
Bowers "A" Federal No. 44 (30-025-35914)
W.D. Grimes (NCT-A) No. 26 (30-025-35866)

The attached copies of sundry notices and completion reports for each well show that cement was circulated to surface off both casing strings thus affording adequate protection of the injection interval (approx. 4000' to 4510') of Oxy's North Hobbs G/SA Unit No. 442.

NOTE:

Although Texland's W.D. Grimes (NCT-A) Well No. 24 (30-025-35669) shows to be within the subject well's ½-mile AOR, this well has not yet been drilled (copy of Form C-101 approved 11/20/01 is also attached).



Mark Stephens
Regulatory Compliance Analyst
Occidental Permian Limited Partnership

Form 3160-5
(August 1999)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUNDRY NOTICES AND REPORTS ON WELLS
Do not use this form for proposals to drill or to re-enter an
abandoned well. Use Form 3160-3 (APD) for such proposals.

FORM APPROVED
OMB No. 1004-0135
Expires November 30, 2000

5. Lease Serial No.
LC-032233-A

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.

8. Well Name and No.
Bowers "A" Federal #39

9. API Well No.
30-025-35727

10. Field and Pool, or Exploratory Area
Hobbs: Upper Blinbery

11. County or Parish, State
**Lea
New Mexico**

SUBMIT IN TRIPLICATE - Other instructions on reverse side

1. Type of Well
 Oil Well Gas Well Other

2. Name of Operator
Texland Petroleum-Hobbs, L.L.C.

3a. Address
777 Main Street, Ste. 3200 Fort Worth TX 76102

3b. Phone No. (include area code)
(817)338-2751

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
2505 FSL & 1415 FE.: Sec.30,T18S,R38E, NMPM

12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/ Resume)	<input type="checkbox"/> Water Shut-Off
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other Spud & set casing
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

13. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recomplete horizontally, give subsurface locations measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

SPUD TIME: 10/25/01 drilled. 10/27/01 drilled to 1537' CSG REPORT: Ran 34 Jts. 8 5/8" 24# J55 STC csg. set at 1537', CENTRALIZERS: 13 every 3rd joint. CMT REPORT: Cmt w/550 ex. w/3% Salt & 1/4# Floccs. Mixed 12.9 ppg, 1.97 yield & 250 ex. Premium plus w/2% CaCl & 1/4 Floccs. Mixed 14.8 ppg & 1.32 yield. Displace csg w/95 BFW. PD @ :45 hr on 10/27/01. Float held. Circ. 125 ex cmt. NMOCD notified but not present. 10/28/01 - 10/30/01 drilled Anhydrite & salt.

14. I hereby certify that the foregoing is true and correct

Name (Printed/Typed) **Ann Burdette** Title **Regulatory Analyst**

Signature *[Signature]* Date **10/30/2001**

K2

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by _____ Title _____ Date _____

Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon. Office _____

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

N.M. Oil Cons. Division
1625 N. French Dr.
Hobbs, NM 88240
APPROVED
OMB No. 1004-0135
Expires November 30, 2000
Lease Serial No.
LC 892233-A

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.

SUBMIT IN TRIPLICATE - Other instructions on reverse side

1. Type of Well <input type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other		6. If Indian, Allottee or Tribe Name
2. Name of Operator Texland Petroleum-Hobbs,L.L.C.		7. If Unit or CA/Agreement, Name and/or No.
3a. Address 777 Main Street, Ste. 3200	3b. Phone No. (include area code) (817)336-2751	8. Well Name and No. Bowers "A" Federal #39
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 2505 FSL & 1415 FE.: Sec.30,T18S,R38E, NMPM		9. API Well No. 30-025-35727
		10. Field and Pool, or Exploratory Area Hobbs: Upper Blinebry
		11. County or Parish, State Lea New Mexico

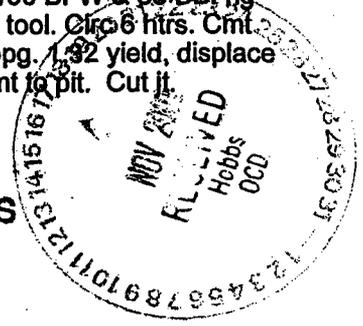
12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/ Resume)	<input type="checkbox"/> Water Shut-Off
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other <u>set production casing</u>
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

13. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recomplate horizontally, give subsurface locations measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

TD 11/03/01 @ 6030'. 11/04/01 CSG. REPORT: Ran 119 jts. 5 1/2# J55 csg. & 16 jts. 17# J55 LTC set at 6025'.
CENTRALIZERS: 15 jts. 1,3,6,8,11,14,17,20,23,26,29,32,51,102,137. CMT REPORT: Cmt 1st stage w/400 sx. super H w/2 1/2# salt, 4/10% LAP-1. 3/10% CFR-3, 1/4# D-air-a, Mix 13.2 ppg 4.86 yield. Displace csg w/60 BFW & 83 BBI rig mud. PD at 15:30 hrs. on 11/3/01. Float held. Drop bomb open stage tool, circ. 75 sx. cmt off DV tool. Circ 6 hrs. Cmt 2nd stage w/900 sx. interfill C mixed at 11.9 ppg 2.41 yield & 50 sx. Premium plus mixed at 14.8 ppg. 1.32 yield, displace csg w/92 BFW. PD @ 21:40 hrs. on 11/3/01. Close stage tool w/2645# tool held. Circ. 189 sx cmt to pit. Cut jt. Released rig at 23:00 hrs. on 11/3/01.

ACCEPTED FOR RECORD
(ORIG. SGD.) DAVID R. GLASS
NOV 13 2001
DAVID R. GLASS
PETROLEUM ENGINEER



14. I hereby certify that the foregoing is true and correct Name (Printed/Typed) Ann Burdette	Title Regulatory Analyst
Signature <i>Ann Burdette</i>	Date 11/09/2001

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by	Title	Date
Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.	Office	

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

(Instructions on reverse)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

N.M. Oil Cons. Division
1625 N. Franklin Dr.
Hobbs, NM 88240
FORM APPROVED 1004-0137
Effective November 30, 2000
LC-032233-A

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

1a. Type of Well Oil Well Gas Well Dry Other Injection
 b. Type of Completion New Well Work Over Deepen Plug Back Diff. Resvr.,
 Other _____

2. Name of Operator
 Texland Petroleum-Hobbs, L.L. C

3. Address 777 Main Street, Ste. 3200 Fort Worth, Tx 76102
 3.a Phone No. (Include area code) (817)336-2751

4. Location of Well (Report location clearly and in accordance with Federal requirements)*
 At Surface 2505 FSL & 1415 FEL Sec.30, T18S, R38E NMPM NW1/4 SE 1/4
 At top prod. interval reported below
 At total depth

6. If Indian, Allottee or Tribe Name
 7. Unit or CA Agreement Name and no.
 8. Lease Name and Well No.
 Bowers "A" Federal 39
 9. API Well No.
 30-025-35727
 10. Field and Pool, or Exploratory
 Hobbs: Upper Blinebry
 11. Sec., T., R., M., on Block and Survey or Area
 12. County or Parish Lea 13. State NM
 17. Elevations (DF, RKB, RT, GL)*
 3650-

14. Date Spudded 10/25/2001
 15. Date T.D. Reached 11/03/2001
 16. Date Completed D & A Ready to Prod.

18. Total Depth: MD 6030 TVD 6030
 19. Plug Back T.D.: MD 6021 TVD 6021
 20. Depth Bridge Plug Set: MD TVD

21. Type of Electric & Other Mechanical Logs Run (Submit copy of each)
 CNL-CCL-GR
 22. Was well cored? No Yes (Submit analysis)
 Was DST run? No Yes (Submit analysis)
 Directional Survey? No Yes (Submit copy)

23. Casing and Liner Record (Report all strings set in well)

Hole Size	Size/Grade	Wt. (#/ft.)	Top (MD)	Bottom (MD)	Stage Cementer Depth	No. of Sk. & Type of Cement	Slurry Vol. (BBL)	Cement Top*	Amount Pulled
12 1/4	8 5/8	24	Surface	1537	1537	800		Surface	
7 7/8	5 1/2	15.5	Surface	6025		1350		Surface	

24. Tubing Record

Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)
2 3/8	5734	5734						

25. Producing Intervals

Formation	Top	Bottom	Perforated Interval	Size	No. Holes	Perf. Status
A) Upper Blinebry	5785	5953	5785 - 5953	2 SPF	52	
B)						
C)						
D)						

26. Perforation Record

27. Acid, Fracture, Treatment, Cement Squeeze, Etc.

Depth Interval	Amount and Type of Material
5785 - 5953	Acidized w/10,000 gals 15% HCL

28. Production - Interval A

Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
			→						

Choice Size Tbg. Press. Flwg. SI Csg. Press. 24 Hr. Rate Oil BBL Gas MCF Water BBL Gas : Oil Ratio Well Status

Production - Interval B

Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
			→						

Choke Size Tbg. Press. Flwg. SI Csg. Press. 24 Hr. Rate Oil BBL Gas MCF Water BBL Gas : Oil Ratio Well Status

ACCEPTED FOR RECORD
 JAN 25 2002
 GARY GOURLEY
 PETROLEUM ENGINEER

(See Instructions and spaces for additional data on reverse side)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

1625 N. French Drive
Hobbs, NM 88001

FORM APPROVED
OMB No. 1004-0135
Expires November 30, 2000

SUNDRY NOTICES AND REPORTS ON WELLS
Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.

5. Lease Serial No.
LC-032233-A

6. If Indian, Allottee or Tribe Name

7. If Unit or C/A Agreement, Name and/or No.
Bowers A Fed.

8. Well Name and No.
42

9. API Well No.
30-025-35768

10. Field and Pool, or Exploratory Area
Hobbs: Upper Blinbery

11. County or Parish, State
Lea
New Mexico

SUBMIT IN TRIPLICATE - Other Instructions on reverse side

1. Type of Well
 Oil Well Gas Well Other

2. Name of Operator
Texland Petroleum-Hobbs, L.L.C.

3a. Address
777 Main Street, Ste. 3200, Fort Worth, Tx. 76102

3b. Phone No. (include area code)
(817)336-2751

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
1290' FSL & 170' FWL
29-1&S-38E M

12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/ Resume)	<input type="checkbox"/> Water Shut-Off
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input type="checkbox"/> Other <u>Set & cement surface casing</u>
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

13. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recomplete horizontally, give subsurface locations measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

SPUD: 9/8/02 15:00 hrs. Drilled to 1523' CSG REPORT: Ran 35 jts. 8 5/8" 24# J55 STC csg set at 1523' CMT. REPORT: Cmt w/550 sx. Howco light premium plus 3% salt, 1/4# flocele, mixed at 12.6 ppg yield & 250 sx premium plus w/2% CaCl 1/4# flocele mixed at 14.8 ppg 1.35 yield. Displace csg w/95 BFW. PD at 2:15 hrs. on 9/8/02. Float failed to hold. Circ. 42 bbls. cmt to pit. WOC. Notified BLM & NMOC before spudding.

ACCEPTED FOR RECORD
SEP 16 2002
[Signature]
GARY GOURLEY
PETROLEUM ENGINEER

RECEIVED
Hobbs
OCD

14. I hereby certify that the foregoing is true and correct
Name (Printed/Typed)
Ann Burdette

Title
Regulatory Analyst

Signature
[Signature]

Date
09/13/2002

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

ORIGINAL SIGNED BY
[Signature]
STAFF MANAGER

Title
STAFF MANAGER

Date
SEP 20 2002

Conditions of approval, if any, are attached. Approval of this work does not constitute a certification that the applicant holds legal or equitable title to those rights or interests which would entitle the applicant to conduct operations thereon.

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

(Instructions on reverse)

JAN-27-03 11:24 AM

UNIT STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB No. 1004-0133
Expires November 30, 2000

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.

5. Lease Serial No.
LC-032233-A

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.

8. Well Name and No.
Bowers Federal A #42

9. API Well No.
30-025-35758

10. Field and Pool, or Exploratory Area
Hobbs: Upper Blinbery

11. County or Parish, State
**Lea
New Mexico**

SUBMIT IN TRIPLICATE - Other instructions on reverse side

1. Type of Well
 Oil Well Gas Well Other

2. Name of Operator
Textland Petroleum-Hobbs, L.L.C.

3a. Address
777 Main Street, Ste. 3200, Fort Worth, Tx. 76102

3b. Phone No. (Include area code)
(817)338-2751

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
1290' FSL & 170' FWL

29-185-386

12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/ Resume)	<input type="checkbox"/> Water Shut-Off
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input type="checkbox"/> Other <u>Set & cement</u>
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	<u>production</u>
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	<u>casing</u>

13. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recomplete horizontally, give subsurface locations measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-3 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

TD 9/20/02 @8063' CSG REPORT: Ran 125 jts 5 1/2 16.5# LTC & 16 jts 5 1/2 17# J65 LTC csg set at 8063'. Hit tight spots from 2450'-2700'. Had wash down last 10 jts to btm. Rig Up Halliburton. CMT. REPORT: Cmt 1st stage w/375 sx. Super H 2 1/2# salt, 4/10% LAP-1, 3/10% CFR-3 1/4# sk D-air 3000. Mixed at 13.2 ppg 1.82 yield. Displace csg w/60 BFW & 83 bbls. pit mud. PD at 23:00 on 9/19/02. Float held. Drop bomb. Open stage tool. Circ. 83 sx cmt off tool. Circ & WOC. BLM notified but not present.

RECEIVED

ACCEPTED FOR RECORD

SEP 24 2002

**GARY GOURLEY
PETROLEUM ENGINEER**

(ORIG. SGD.) GARY GOURLEY

14. I hereby certify that the foregoing is true and correct
Name (Printed/Typed)

Ann Burdette

Signature

Ann Burdette

Title
Regulatory Analyst

Date
09/20/2002

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by *Gary W. Gourley* Title _____ Date _____

Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon. Office _____

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

(Instructions on reverse)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUNDRY NOTICES AND REPORTS ON WELLS
Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.

1525 N. ...
Hobbs, NM

FORM APPROVED
OMB No. 1004-0135
Expires November 30, 2000

5. Lease Serial No.
LC-032233-A

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.

8. Well Name and No.
Bowers Federal A #42

9. API Well No.
30-025-35758

10. Field and Pool, or Exploratory Area
Hobbs; Upper Blinbery

11. County or Parish, State
Lea
New Mexico

SUBMIT IN TRIPLICATE - Other instructions on reverse side

1. Type of Well
 Oil Well Gas Well Other

2. Name of Operator
Texland Petroleum-Hobbs, L.L.C.

3a. Address
777 Main Street, Ste. 3200, Fort Worth, Tx. 76102

3b. Phone No. (include area code)
(817)336-2751

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
1290' FSL & 170' FWL *Sec. 29, T. 18S., R. 38E.*

12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input type="checkbox"/> Other <u>Set & cement</u>
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	<u>production</u>
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	<u>casing</u>

13. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recomplete horizontally, give subsurface locations measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

9/21/02 CMT 2nd stage w/100 sx. interfill C. Mix sx/bbl for scavenger cmt, 300 sx. Premium plus 5/10% LAP-1 2/10% CFR-3, 1/4# D-air mixed at 15 PPG 1.29 yield, 1450 sx. interfill C 1/4# floccle mixed at 11.9 ppg, 2.45 yeild, 50 sx Premium plus mixed at 14.8 ppg 1.32 yield. Displace csg w/93 BFW. PD @ 9:45 hrs Close stage tool w/2645#. Rel pressure. Tool held ok. Circ. 100 sx cmt to pit, ND cut jt. Rel rig BLM notified put not present.

ACCEPTED FOR RECORD
(ORIG. SGD.) DAVID R. GLASS
OCT 7 2002
DAVID R. GLASS
PETROLEUM ENGINEER

14. I hereby certify that the foregoing is true and correct
Name (Printed/Typed)

Ann Burdette

Signature

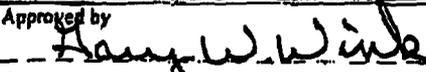


Title
Regulatory Analyst

Date
10/02/2002

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by



Title

Date

Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.

Office

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

GWN

DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

FORM APPROVED
OMB NO. 1004-0137
Expires: November 30, 2000

1a. Type of Well Oil Well Gas Well Dry Other Injection
b. Type of Completion New Well Work Over Deepen Plug Back Diff. Resrv.,
Other _____

5. Lease Serial No.
LC-032233-A

6. If Indian, Allottee or Tribe Name

7. Unit or CA Agreement Name and no.

2. Name of Operator
Texland Petroleum - Hobbs LLC

8. Lease Name and Well No.
Bowers A Federal 42

3. Address 777 Main Street, Ste. 3200 Fort Worth, Tx 76102
3.a. Phone No. (Include area code) (817)336-2751

9. API Well No.
30-025-35756

4. Location of Well (Report location clearly and in accordance with Federal requirements)*

10. Field and Pool, or Exploratory
Hobbs: Upper Blinebry

At Surface 1290 FSL & 170' FWL Sec29 T18S R38E

At top prod. interval reported below

At total depth 1290 FWL & 170 FWL Sec 29 T18S R38E

11. Sec., T., R., M., on Block and Survey or Area

12. County or Parish Lea 13. State New Mexico

14. Date Spudded 09/06/2002
15. Date T.D. Reached 09/20/2002
16. Date Completed D & A Ready to Prod.

17. Elevations (DF, RKB, RT, GL)*
3644

18. Total Depth: MD 6063 TVD 6063
19. Plug Back T.D.: MD 6063 TVD 6063
20. Depth Bridge Plug Set: MD TVD

21. Type of Electric & Other Mechanical Logs Run (Submit copy of each)
GR-CCFL-CNL
22. Was well cored? No Yes (Submit analysis)
Was DST run? No Yes (Submit analysis)
Directional Survey? No Yes (Submit copy)

23. Casing and Liner Record (Report all strings set in well)

Hole Size	Size/Grade	Wl. (#/ft.)	Top (MD)	Bottom (MD)	Stage Cementer Depth	No. of Sk. & Type of Cement	Slurry Vol. (BBL)	Cement Top*	Amount Pulled
12 1/4	8 5/8	24	Surface	1523	1523	800 LitePrem		Surface	Circ
7 7/8	5 1/2	15.5	Surface	6063		2275 LTC		Surface	Circ

24. Tubing Record

Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)
2 3/8	5704	5704						

25. Producing Intervals

26. Perforation Record

Formation	Top	Bottom	Perforated Interval	Size	No. Holes	Perf. Status
A) Blinebry	5739	5900	5748-5899	2SPF	42	Open
B)						
C)						
D)						

27. Acid Fracture Treatment, Cement Squeeze, Etc.

Depth Interval	Amount and Type of Material
5748-5899	Acidized w/3500 gal 15% HCL

ACCEPTED FOR RECORD
DEC - 9 2002
GARY GOURLEY
PETROLEUM ENGINEER

28. Production - Interval A

Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
			→						
Choke Size	Tbg. Press. Plwg. SI	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas : Oil Ratio	Well Status	
			→						

Production - Interval B

Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
			→						
Choke Size	Tbg. Press. Plwg. SI	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas : Oil Ratio	Well Status	
			→						

Requested
logs 1-6-03 D.M.
11 25 AM

(See instructions and spaces for additional data on reverse side)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB No. 1004-0135
Expires November 30, 2000

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.

Ho 665

SUBMIT IN TRIPLICATE - Other instructions on reverse side

1. Type of Well
 Oil Well Gas Well Other

2. Name of Operator
 Taxland Petroleum - Hobbs L.L.C

3a. Address
 777 Main Street, Ste. 3200 Fort Worth, Tx. 76102

3b. Phone No. (include area code)
 (817)336-2751

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
 1243 FSL & 1015 FWL Sec.29, T18S, R38E NMPM

5. Lease Serial No.
 LC-032233-A

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.

8. Well Name and No.
 Bowers A Federal #43

9. API Well No.
 30-025-35852

10. Field and Pool, or Exploratory Area
 Hobbs: Upper Blinbry

11. County or Parish, State
 Lea
 New Mexico

12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/ Resume)	<input type="checkbox"/> Water Shut-Off
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other <u>Set & Cement</u>
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	<u>Surface Casing</u>
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

13. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recomplete horizontally, give subsurface locations measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

SPUD: 09/20/2002. 18:00 hrs. 12 1/4" bit drill to 1530'. CSG REPORT: Ran 35 jts 8 5/8" 24# J55 STC csg. set @ 1530'. CENTRALIZERS: 12 every 3rd joint. CMT REPORT: Cmt w/550 sx Howco Light Premium plus 3% salt 1/4# floccle mixed at 12.9 ppg 1.97 yield & 250 sx premium plus 1/4# floccle mixed at 14.8 ppg 1.32 yield. Displace csg w/95 BFW. PD at 12:20 hrs. on 9/22/02. Float held & circ 140 sx cmt to pit. WOC 12 hrs. BLM on location. NMOCDC notified but not present.

14. I hereby certify that the foregoing is true and correct

Name (Printed/Typed)

Ann Burdette

Title

Regulatory Analyst

Signature

Date

09/27/2002

ACCEPTED FOR RECORD THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

(ORIG. SGD.) DAVID H. GLASS

Title

Date

Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.

Office

Title 18 U.S.C. Section 1001 makes it a crime for any person knowingly and willfully to make to any department or agency of the United States a false statement.

JAN-27-03 11:21 AM

**UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT**

FORM APPROVED
OMB No. 1004-0115
Expires November 30, 2000

SUNDRY NOTICES AND REPORTS ON WELLS
Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.

SUBMIT IN TRIPLICATE - Other Instructions on reverse side

1. Type of Well <input type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other		5. Lease Serial No. LC-032233-A
2. Name of Operator Texland Petroleum - Hobbs L.L.C		6. If Indian, Allottee or Tribe Name
3a. Address 777 Main Street, Ste. 3200 Fort Worth, Tx. 76102	3b. Phone No. (Include area code) (817)336-2751	7. If Unit or CA/Agreement, Name and/or No.
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 1243 FSL & 1015 FWL Sec.29, T18S, R38E NMPM		8. Well Name and No. Bowers A Federal #43
		9. API Well No. 30-025-35852
		10. Field and Pool, or Exploratory Area Hobbs; Upper Blinbry
		11. County or Parish, State Lea New Mexico

12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/ Resume)	<input type="checkbox"/> Water Shut-Off
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other <u>Set & Cement</u>
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	<u>Produccio</u>
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	<u>Casing</u>

13. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recomplete horizontally, give subsurface locations measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

TD 09/30/02 @ 8060' CSG REPORT: 126 Jts. 5 1/2" 15.5# J55 LTC & 16 Jts. 5 1/2" 17# J55 LTC csg set at 8060'. CMT REPORT: 1st Stage w/375 sx Super H & 2 1/2% salt, 4/10% LAD-1 3/10% CFR-3, 1/4# sk/D-air 3000. Mixed at 13.2 ppg 1.62 yield. Displace csg w/60 BFW & 83 bbls. pit mud. Float held PD 20:45 hrs on 9/30/02. Drop bomb. Open stage tool & circ 95 sx cmt off tool. Circ & WOC. 10/01/02: Cmt 2nd stage w/100 sx interfill C 1/4# flocele mixed at SK/bbl for scavenger cmt, 300 sx premium plus 5/10% LAP-1, 2/10% CFR-3 1/4# SK/D-air mixed at 15 ppg 1.29 yield, 700 sx Interfill C 1/4# flocele mixed at 11.9 ppg 2:45 yield, 50 sx premium plus mixed at 14.8 ppg 1.32 yield. Displace csg w/93 BFW. PD at 6:45 hrs 10/01/02. Stage tool failed to close & circ 122 sx cmt to pit. Rig Released 11:00 hrs on 10/01/02.

ACCEPTED FOR RECORD
(ORIG. SGD.) DAVID R. GLASS
OCT 7 2002
DAVID R. GLASS
PETROLEUM ENGINEER

14. I hereby certify that the foregoing is true and correct
Name (Printed/Typed)
Ann Burdette
Signature
Ann Burdette
Title
Regulatory Analyst
Date
10/02/2002

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by
Henry W. Wink
Title
Date
Office

Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.

DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

FORM APPROVED
OMB NO. 1004-0137
Expires: November 30, 2000

1a. Type of Well Oil Well Gas Well Dry Other Injection
b. Type of Completion New Well Work Over Deepen Plug Back Diff. Reavr.
Other _____

5. Lease Serial No.
LC-032233-A

6. If Indian, Allottee or Tribe Name

7. Unit or CA Agreement Name and no.

2. Name of Operator
Texland Petroleum - Hobbs LLC

8. Lease Name and Well No.

3. Address
777 Main Street, Ste. 3200 Fort Worth, Tx. 76102

3.a Phone No. (Include area code)
(817)336-2751

Bowers A Federal 43

9. API Well No.

30-025-35852

4. Location of Well (Report location clearly and in accordance with Federal requirements)*

At Surface 1243 FSL & 1015 FWL Sec.29 T18S R38E

At top prod. interval reported below

10. Field and Pool, or Exploratory

Hobbs: Upper Blinebry

11. Sec., T., R., M., on Block and Survey or Area

12. County or Parish
Lea
13. State
New Mexico

At total depth 1243 FSL & 1015 FWL Sec.29 T18S R38E

14. Date Spudded

09/20/2002

15. Date T.D. Reached

09/30/2002

16. Date Completed

D & A Ready to Prod.

17. Elevations (DF, RKB, RT, GL)*

3644

18. Total Depth: MD 6060
TVD 6060

19. Plug Back T.D.: MD 6060
TVD 6060

20. Depth Bridge Plug Set: MD r/a
TVD r/a

21. Type of Electric & Other Mechanical Logs Run (Submit copy of each)
OR-CNL-CCL

22. Was well cored? No Yes (Submit analysis)
Was DST run? No Yes (Submit analysis)
Directional Survey? No Yes (Submit copy)

23. Casing and Liner Record (Report all strings set in well)

Hole Size	Size/Grade	Wt. (#/ft.)	Top (MD)	Bottom (MD)	Stage Cementer Depth	No. of Sks. & Type of Cement	Slurry Vol. (BBL)	Cement Top*	Amount Pulled
12 1/4	8 5/8	24	Surface	1530		800 Lite Prem		Surface	Circ
7 7/8	5 1/2	17	Surface	6060		1525 H&C		Surface	Circ

24. Tubing Record

Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)
2 3/8	5727	5727						

25. Producing Intervals

Formation	Top	Bottom	Perforated Interval	Size	No. Holes	Perf. Status
A) Blinebry	5742	5900	5746-5899	2 SPF	50	Open
B)						
C)						
D)						

27. Acid Fracture Treatment, Cement Squeeze, Etc.

Depth Interval	Amount and Type of Material
5749-5899	Acidize w/3500 gal 15% HCL

28. Production - Interval A

Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
			→						
Choke Size	Tbg. Press. PIwg. SI	Cap. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas : Oil Ratio	Well Status	
			→						

Production - Interval B

Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
			→						
Choke Size	Tbg. Press. PIwg. SI	Cap. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas : Oil Ratio	Well Status	
			→						

(See Instructions and spaces for additional data on reverse side)

NEW MEXICO OIL CONSERVATION DIVISION, DISTRICT 1
1625 N. French Drive
Hobbs, NM 88240

Form 3160-5
(August 1999)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB No. 1004-0135
Expires November 30, 2000

SUNDRY NOTICES AND REPORTS ON WELLS
Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.

5. Lease Serial No. LC-032233-A
6. If Indian, Allottee or Tribe Name
7. If Unit or CA/Agreement, Name and/or No.
8. Well Name and No. Bowers "A" Federal
9. API Well No. 30-025-35914
10. Field and Pool, or Exploratory Area Hobbs: Upper Blinetry
11. County or Parish, State Lea Mexico

SUBMIT IN TRIPLICATE - Other instructions on reverse side

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other	
2. Name of Operator Texland Petroleum - Hobbs L.L.C.	
3a. Address 777 Main Street, Ste. 3200, Fort Worth, Tx. 76102	3b. Phone No. (include area code) (817)336-2751
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 719-FSL & 800 FWL Sec. 29, T18S, R38E <i>Unit M</i>	

12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/ Resume)	<input type="checkbox"/> Water Shut-Off
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other <u>Set surface casing</u>
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

13. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recompleat horizontally, give subsurface locations measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompleat in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

SPUD:6/6/02 Drill to 1529' CSG REPORT: Ran 34 jts. 8 5/8" 24# J55 STC csg. Set at 1529'
CENTRALIZERS: 10, CMT REPORT: Cmt w/550 sx. Howco Light mixed at 12.60# 1.95 yield &
250 sx. CI C mixed at 14.8# yield. Displace w/95 BBW. PD 2:30 6/8/02. Float did not hold.
Circ. 72 sx cmt to pit. BLM notified and present.



14. I hereby certify that the foregoing is true and correct Name (Printed/Typed) Ann Burdette		Title Regulatory Analyst
Signature <i>Ann Burdette</i>		Date 06/12/2002

ACCEPTED FOR RECORD THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by (ORIG. SGD.) DAVID F. GLASS JUL 15 2002	Title DAVID F. GLASS REGULATORY ENGINEER	Date
Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.		Office

Title 18 U.S.C. Section 1001 makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

(Instructions on reverse)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

1625 N. French Dr.
Hobbs, NM 88240

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.

SUBMIT IN TRIPLICATE - Other instructions on reverse side

1. Type of Well
 Oil Well Gas Well Other

2. Name of Operator
 Texland Petroleum - Hobbs L.L.C.

3a. Address
 777 Main Street, Ste. 3200, Fort Worth, Tx. 76102

3b. Phone No. (include area code)
 (817)336-2751

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
 719 FSL & 800 FWL
 Sec. 29, T18S, R38E **M**

5. Lease Serial No.
 LC-032233-A

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.

8. Well Name and No.
 Bowers "A" Federal #44

9. API Well No.
 30-025-35914

10. Field and Pool, or Exploratory Area
 Hobbs: Upper Blinebry

11. County or Parish, State
 Lea
 Mexico

12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION				
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/ Resume)	<input type="checkbox"/> Water Shut-Off	
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity	
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other <u>Set production casing</u>	
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon		
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal		

13. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recomplete horizontally, give subsurface locations measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

Rig Released: 6/15/02. CSG REPORT: Ran 137 jts. 5 1/2" 15.5# & 17# J55 LTC csg. Set @ 6020'. Stage tool @ 3880' 17# wrap pipe 3880-4590, short jt. of 5 1/2 csg 5604-5617. CENTRALIZERS: 1 @ 1192', 16 @ 3795'-6020'. CMT REPORT: Cmt 1st stage w/375 sx. Super H w/2.5# salt, 0.4% LAP I, 0.3% 3 mixed at 13.2# 1.62 yield. Circ 85 sx. Interfill C 0.25# flocele, 300sx. class C .5% LAP I .2% CFR 3 15# 1.29 yield, 550 sx Interfill C .25# flocele 11.9# 2.45 yield, 50 sx C class C 14.8# 1.32 yield. Close stage tool 3 Am 6/15/02. Circ 238 sx cmt to pit. BLM notified but not present.

ACCEPTED FOR RECORD

JUL 2 2002

[Signature]
GARY GOURLEY
 PETROLEUM ENGINEER

14. I hereby certify that the foregoing is true and correct

Name (Printed/Typed)
 Ann Burdette

Signature
[Signature]

Title
 Regulatory Analyst

Date
 06/28/2002

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by _____ Title _____ Date _____

Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon. Office _____

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

MINERAL RIGHTS DIVISION
1625 N. French Dr.
Hobbs, NM 88240

FORM APPROVED
OMB NO. 1004-0137
Expires: November 30, 2000

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

1a. Type of Well Oil Well Gas Well Dry Other
b. Type of Completion New Well Work Over Deepen Plug Back Diff. Resvr.,
Other _____

2. Name of Operator
Texland Petroleum - Hobbs, L.L.C

3. Address 777 Main Street, Ste. 3200, Fort Worth, Tx. 76102
3.a Phone No. (Include area code) (817)336-2751

4. Location of Well (Report location clearly and in accordance with Federal requirements)*

At Surface 719 FSL & 800 FWL Sec. 29 T18S, R38E

At top prod. interval reported below

At total depth

14. Date Spudded 06/06/2002
15. Date T.D. Reached 06/15/2002
16. Date Completed D & A Ready to Prod.

18. Total Depth: MD 6020 TVD 6020
19. Plug Back T.D.: MD TVD
20. Depth Bridge Plug Set: MD TVD

21. Type of Electric & Other Mechanical Logs Run (Submit copy of each) GR-CNL-CCL
22. Was well cored? No Yes (Submit analysis)
Was DST run? No Yes (Submit analysis)
Directional Survey? No Yes (Submit copy)

23. Casing and Liner Record (Report all strings set in well)

Hole Size	Size/Grade	Wt. (#/ft.)	Top (MD)	Bottom (MD)	Stage Cementer Depth	No. of Sk. & Type of Cement	Slurry Vol. (BBL)	Cement Top*	Amount Pulled
12 1/4	8 5/8	24	Surface	1529	1529	800 sx C		Surface	
7 7/8	5 1/2	15.5	Surface	6020	3880	975 sx C		Surface	

24. Tubing Record

Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)
2 7/8	5736							

25. Producing Intervals

Formation	Top	Bottom	Perforated Interval	Size	No. Holes	Perf. Status
A) Upper Blinbry	5749	5978	5749-5978	1SPF	25	
B)						
C)						
D)						

27. Acid, Fracture, Treatment, Cement Squeeze, Etc.

Depth Interval	Amount and Type of Material
5749 - 5978	Acidize w/5000 gals of 15% HCL & 40 ball sealers

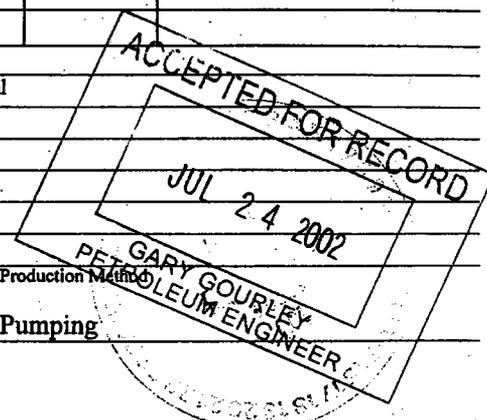
28. Production - Interval A

Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
06/27/2002	07/12/2002		→	18	3	339	36.8	.7	Pumping
Choice Size	Tbg. Press. Flwg.	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas : Oil Ratio	Well Status	
Open	SI 35	35	→	18	3	339	167	Pumping	

Production - Interval B

Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
			→						
Choke Size	Tbg. Press. Flwg.	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas : Oil Ratio	Well Status	
	SI		→						

(See instructions and spaces for additional data on reverse side)



Submit 3 Copies To Appropriate District Office
 District I
 1625 N. French Dr., Hobbs, NM 87240
 District II
 811 South First, Artesia, NM 87210
 District III
 1000 Rio Brazos Rd., Aztec, NM 87410
 District IV
 2040 South Pacheco, Santa Fe, NM 87505

State of New Mexico
 Energy, Minerals and Natural Resources

Form C-103
 Revised March 25, 1999

OIL CONSERVATION DIVISION
 2040 South Pacheco
 Santa Fe, NM 87505

WELL API NO.	30-025-35866
5. Indicate Type of Lease	STATE <input type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.	
7. Lease Name or Unit Agreement Name	W.D. Grimes (NCT-A)
8. Well No.	26
9. Pool name or Wildcat	Hobbs: Upper Blinebry
10. Elevation (Show whether DR, RKB, RT, GR, etc.)	3638

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

2. Name of Operator: Texland Petroleum - Hobbs, L.L.C

3. Address of Operator: 777 Main Street, Ste. 3200 Fort Worth, Tx. 76102

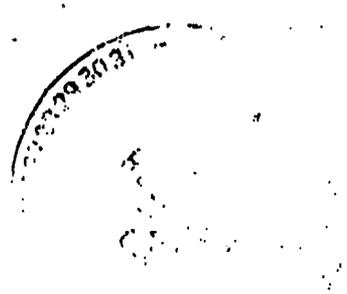
4. Well Location
 Unit Letter D : 518 feet from the North line and 910 feet from the West line
 Section 32 Township 18S Range 38E NMPM County Lea

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"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPLETION <input type="checkbox"/>
OTHER: <input type="checkbox"/>	OTHER: <input type="checkbox"/>
	REMEDIAL WORK <input type="checkbox"/>
	ALTERING CASING <input type="checkbox"/>
	COMMENCE DRILLING OPNS. <input type="checkbox"/>
	PLUG AND ABANDONMENT <input type="checkbox"/>
	CASING TEST AND CEMENT JOBS <input checked="" type="checkbox"/>

12. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting and proposed work). SEE RULE 1103. For Multiple Completions: Attach diagram of proposed completion or recompletion.

SPUD: 5/24/02. CSG REPORT: 35 jts 8 5/8" 24# J55 STC csg. Set @ 1527.55. CENTRALIZERS: every 3rd jt CMT. REPORT: Cmt w/550 sx. Howco light premium plus w/3% salt, 1/4# floccle mixed at 12.6 ppg & 1.95 yield & 250 sx premium plus, 2% CaCl mixed at 14.8 ppg 1.34 yield. Displace csg w/94 BFW PD at 19.30 hrs. on 5/25/02. Float held & circ 75 sx cmt to pit. NMOCD notified but not present.



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

SIGNATURE [Signature] TITLE Regulatory Analyst DATE 06/03/2002

Type or print name Ann Burdette Telephone No. (817)336-2751
 (This space for State use)

APPROVED BY _____ TITLE ORIGINAL SIGNED BY
PAUL F. KAUTZ
 Conditions of approval, if any: _____ PETROLEUM ENGINEER DATE 06 2002

S
e
S

Submit 3 Copies To Appropriate District Office
 District I
 1625 N. French Dr., Hobbs, NM 87240
 District II
 811 South First, Artesia, NM 87210
 District III
 1000 Rio Brazos Rd., Aztec, NM 87410
 District IV
 2040 South Pacheco, Santa Fe, NM 87505

State of New Mexico
 Energy, Minerals and Natural Resources

Form C-103
 Revised March 25, 1999

OIL CONSERVATION DIVISION
 2040 South Pacheco
 Santa Fe, NM 87505

WELL API NO. 30-025-35866

5. Indicate Type of Lease
 STATE FEE

6. State Oil & Gas Lease No.

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

2. Name of Operator Texland Petroleum - Hobbs, L.L.C

3. Address of Operator 777 Main Street, Ste. 3200
 Fort Worth, Tx. 76102

4. Well Location
 Unit Letter D 518 feet from the North line and 910 feet from the West line
 Section 32 Township 18S Range 38E NMPM County Lea

7. Lease Name or Unti Agreement Name
W.D. Grimes (NCT-A)

8. Well No. 26

9. Pool name or Wildcat
Hobbs: Upper Blinebry

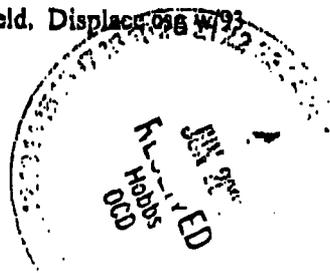
10. Elevation (Show whether DR, RKB, RT, GR, etc.)
3638

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 JOBS <input checked="" type="checkbox"/>	OTHER: <input type="checkbox"/>
OTHER: <input type="checkbox"/>		OTHER: <input type="checkbox"/>	

12. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting and proposed work). SEE RULE 1103. For Multiple Completions: Attach diagram of proposed completion or recompletion.

TD 6/5/02 @ 6050'. CSG REPORT: Finish TIH w/ 135 jts. 5 1/2 15.5# & 17# J55 LTC csg. set @ 6050. CMT REPORT: Cmt 1st stage w/375 sx. super # 2 1/2 salt, 4/10% CAD, 3/10% CFR 3, 1/4# D-air mix 13.2 ppg 1.62 yield. Displace csg w/60 BFW & 83 bbla. pit mud. PD 9 AM 6/5/02. Float held, drop bomb open DV tool. Circ. 75 sx cmt off tool. Circ 7 hrs. Cmt 2nd stage w/240 sx. interfill 1/4# Flocele, mixed at 11.9 PPG 2.45 yield, 300 sx. Premium plus 5/10% LAP 1, 2/10% CFR 2, 1/4# D-air mixed 15 ppg 1.29 yield. 545 sx interfill C 1/4# flocele mixed 11.9 ppg, tail in 50 sx Premium plus mix 14.8 ppg, 1.32 yeld. Displace csg w/93 BFW. PD 19:00 hrs. on 6/5/02. Close tool. Circ 240 sx cmt to pit. ND - cut jt. release rig.



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

SIGNATURE [Signature] TITLE Regulatory Analyst DATE 06/21/2002

Type or print name Ann Burdette ORIGINAL SIGNED BY PAUL F. KAUTZ Telephone No. (817)336-2751
 (This space for State use)

APPROVED BY _____ TITLE _____ DATE JUN 27 2002
 Conditions of approval, if any: _____

500

Submit to Appropriate District Office
 State Lease - 6 copies
 Fee Lease - 3 copies
DISTRICT I
 P.O. Box 1980, Hobbs, NM 88240

State of New Mexico
 Energy, Minerals and Natural Resources Department

Form C-103
 Revised 1-1-89

OIL CONSERVATION DIVISION
 P.O. Box 2088
 Santa Fe, New Mexico 87504-2088

DISTRICT II
 P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
 1000 Rio Brazos Rd., Aztec, NM 87410

WELL API NO.
30-025-35868

5. Indicate Type of Lease
 STATE FEE

6. State Oil & Gas Lease No.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

1a. Type of Well:
 OIL WELL GAS WELL DRY OTHER _____

b. Type of Completion:
 NEW WELL WORK OVER DEEPEN PLUG BACK DIFF RESVR OTHER _____

7. Lease Name or Unit Agreement Name
W.D. Grimes (NCT-A)

2. Name of Operator
Texland Petroleum - Hobbs, L.L.C

8. Well No.
26

3. Address of Operator
777 Main Street, Ste. 3200, Fort Worth, Tx. 76102

9. Pool name or Wildcat
Hobbs: Upper Blinbery

4. Well Location
 Unit Letter **D**: **518** Feet From The **North** Line and **910** Feet From The **West** Line
 Section **32** Township **18S** Range **38E** NMPM County

10. Date Spudded **05/24/2002** 11. Date T.D. Reached **06/05/2002** 12. Date Compl. (Ready to Prod.) **06/19/2002** 13. Elevations (DF & RKB, RT, GR, etc.) **3638'** 14. Elev. Casinghead

15. Total Depth **6050'** 16. Plug Back T.D. 17. If Multiple Compl. How Many Zones? 18. Intervals Drilled By Rotary Tools **X** Cable Tools

19. Producing Interval(s), of this completion - Top, Bottom, Name **5830 - 5981** 20. Was Directional Survey Made **No**

21. Type Electric and Other Logs Run **GR-CCL-CNL** 22. Was Well Cored **No**

23. CASING RECORD (Report all strings set in well)

CASING SIZE	WEIGHT LB./FT.	DEPTH SET	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
8 5/8	24#	1527.5	12 1/4	800 sx Howco light +	
5 1/2	15.5 & 17#	6050'	7 7/8	1510 sx Super, Interill Premium +	

24. LINER RECORD **25. TUBING RECORD**

SIZE	TOP	BOTTOM	SACKS CEMENT	SCRIBEN	SIZE	DEPTH SET	PACKER SET
					2 7/8	5829	

26. Perforation record (interval, size, and number)
 Perf 1 SPF @: 5830, 5838, 5844, 5848, 5851, 5857, 5865, 5872, 5906', 5919, 5921, 5927, 5930, 5932, 5934, 5942, 5945, 5948, 5953, 5965, 5969, 5971, 5979, 5981 Total 25 holes.

27. ACID, SHOT, FRACTURE, CEMENT, SQUEEZE, ETC.
 DEPTH INTERVAL: **5830-5981**
 AMOUNT AND KIND MATERIAL USED: **Acidize: w/5000 gal 15% HCL & Ball sealers**

28. PRODUCTION

Date First Production **06/19/2002** Production Method (Flowing, gas lift, pumping - Size and type pump) **Pump 2 1/2 x 1 3/4 x 25 HF RHBC** Well Status (Prod. or Shut-in) **Prod. water**

Date of Test **07/03/2002** Hours Tested **24** Choke Size **N/A** Prod'n For Test Period **0** Oil - Bbl. **0** Gas - MCF **0** Water - Bbl. **261** Gas - Oil Ratio **N/A**

Flow Tubing Press. Casing Pressure Calculated 24-Hour Rate **0** Oil - Bbl. **0** Gas - MCF **0** Water - Bbl. **281** Oil Gravity - API - (Curr.)

29. Disposition of Gas (Sold, used for fuel, vented, etc.) **N/A** Test Witnessed By **Texland**

30. List Attachments
Log, Inclination Survey, C-104

31. I hereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief

Signature  Printed Name **Ann Burdette** Title **Regulatory Analyst** Date **07/05/2002**

District I

1625 N. French Dr., Hobbs, NM 88240

District II

811 South First, Artesia, NM 88210

District III

1000 Rio Brazos Road, Aztec, NM 87410

District IV

2040 South Pacheco, Santa Fe, NM 87505

State of New Mexico
Energy Minerals and Natural Resources

Oil Conservation Division
2040 South Pacheco
Santa Fe, NM 87505

Form C-101
Revised March 17, 1999

Submit to appropriate District Office
State Lease - 6 Copies
Fee Lease - 5 Copies

AMENDED REPORT

APPLICATION FOR PERMIT TO DRILL, RE-ENTER, DEEPEN, PLUGBACK, OR ADD A ZONE

¹ Operator Name and Address Texland Petroleum - Hobbs, L.L.C 777 Main Street, Ste. 3200 Fort Worth Tx 76102		² OGRID Number 113315
		³ API Number 30-025-35669
⁴ Property Code 25697	⁵ Property Name W.D. Grimes (NCT-A)	⁶ Well No. 24

⁷ Surface Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
D	32	18S	38E		150	North	290	West	Lea

⁸ Proposed Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County

⁹ Proposed Pool 1

¹⁰ Proposed Pool 2

¹¹ Work Type Code N	¹² Well Type Code I	¹³ Cable/Rotary R	¹⁴ Lease Type Code P	¹⁵ Ground Level Elevation 3640'
¹⁶ Multiple N	¹⁷ Proposed Depth 7100	¹⁸ Formation Blinebry	¹⁹ Contractor Capstar Drilling	²⁰ Spud Date 10/25/2001

²¹ Proposed Casing and Cement Program

Hole Size	Casing Size	Casing weight/foot	Setting Depth	Sacks of Cement	Estimated TOC
12 1/4	8 5/8	24	1500	800	Surface
7 7/8	5 1/2	15.5	6200	1100	Surface

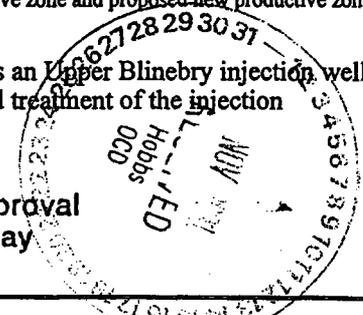
²² Describe the proposed program. If this application is to DEEPEN or PLUG BACK, give the data on the present productive zone and proposed new productive zone.

Describe the blowout prevention program, if any. Use additional sheets if necessary.

Texland plans to drill well to a total of 7100' test the Drinkard, come back up hole and complete as an Upper Blinebry injection well. Perf. from 5700' - 6100', set 2 2/3 tubing with a Tension Packer @ 5600. Will stimulate with acid treatment of the injection perforations. BOP Schematic attached.

INJECTION AUTHORITY ORDER NO. R-11638

Permit Expires 1 Year From Approval
Date Unless Drilling Underway



²³ I hereby certify that the information given above is true and complete to the best of my knowledge and belief.		OIL CONSERVATION DIVISION	
Signature: <i>Ann Burdette</i>		Approved by: <i>[Signature]</i>	
Printed Name: Ann Burdette		Title: PETROLEUM ENGINEER	
Title: Regulatory Analyst		Approval Date: NOV 20 2001	Expiration Date:
Date: 11/6/01	Phone: (817)336-2751	Conditions of Approval: Attached <input type="checkbox"/>	

LIST OF OFFSET OPERATORS & SURFACE OWNERS

North Hobbs (Grayburg/San Andres) Unit
Well No. 442
Letter P, Section 30, T-18-S, R-38-E
Lea County, New Mexico

Offset Operators

Occidental Permian Limited Partnership
P.O. Box 4294
Houston, TX 77210-4294

Lewis B. Burleson, Inc.
P.O. Box 2479
Midland, TX 79702

Texland Petroleum-Hobbs, LLC
777 Main, Suite 3200
Ft. Worth, TX 76102

Saga Petroleum, LLC
415 W. Wall, Suite 835
Midland, TX 79701

Charles E. Seed
Huston Ranch
Lovington Hwy.
Hobbs, NM 88240

HRC, Inc.
P.O. Box 5102
Hobbs, NM 88241

ExxonMobil Production Company
U.S. West
P.O. Box 4358
Houston, TX 77210-4358

ChevronTexaco
Attn: NOJV Manager
15 Smith Road
Midland, TX 79705

Surface Owners

Grimes Land Company
P.O. Box 5102
Hobbs, NM 88241

James R. Serviss
10222 Arroyo Crest Dr. NW
Albuquerque, NM 87114-5802

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> ■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. 		A. Received by (Please Print Clearly)	B. Date of Delivery
1. Article Addressed to:		C. Signature	
Saga Petroleum, LLC 415 W. Wall, Suite 835 Midland, TX 79701		<input type="checkbox"/> Agent <input type="checkbox"/> Addressee	
2. Article Number (Transfer from service label)		D. Is delivery address different from item 1? If YES, enter delivery address below:	
7001 0320 0002 0354 8636		<input type="checkbox"/> Yes <input type="checkbox"/> No	
PS Form 3811, March 2001		Domestic Return Receipt	
		102595-01-M-1424	

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> ■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. 		A. Received by (Please Print Clearly)	B. Date of Delivery
1. Article Addressed to:		C. Signature	
HRC, Inc. P.O. Box 5102 Hobbs, NM 88241		<input type="checkbox"/> Agent <input type="checkbox"/> Addressee	
2. Article Number (Transfer from service la		D. Is delivery address different from item 1? If YES, enter delivery address below:	
7001 0320 0002 0354 8629		<input type="checkbox"/> Yes <input type="checkbox"/> No	
PS Form 3811, March 2001		Domestic Return Receipt	
		102595-01-M-1424	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> ■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. 	A. Received by <i>(Please Print Clearly)</i>	B. Date of Delivery
	C. Signature X <input type="checkbox"/> Agent <input type="checkbox"/> Addressee	
1. Article Addressed to: Texland Petroleum-Hobbs, LLC 777 Main, Suite 3200 Ft. Worth, TX 76102	D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
	3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.	
4. Restricted Delivery? <i>(Extra Fee)</i> <input type="checkbox"/> Yes		
2. Article Number 7001 0320 0002 0354 8674 <i>(Transfer from service la</i>		
PS Form 3811, March 2001	Domestic Return Receipt	102595-01-M-1424

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> ■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. 	A. Received by <i>(Please Print Clearly)</i>	B. Date of Delivery
	C. Signature X <input type="checkbox"/> Agent <input type="checkbox"/> Addressee	
1. Article Addressed to: Chrles E. Seed Huston Ranch Lovington Hwy. Hobbs, NM 88240	D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
	3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.	
4. Restricted Delivery? <i>(Extra Fee)</i> <input type="checkbox"/> Yes		
2. Article Number 7001 0320 0002 0354 8667 <i>(Transfer from service label)</i>		
PS Form 3811, March 2001	Domestic Return Receipt	102595-01-M-1424

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

ExxonMobil Production Company
 U.S. West
 P.O. Box 4358
 Houston, TX 77210-4358

2. Article Number

(Transfer from service label)

7001 0320 0002 0354 8650

PS Form 3811, March 2001

Domestic Return Receipt

102595-01-M-1424

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly)

B. Date of Delivery

C. Signature

X

Agent

Addressee

D. Is delivery address different from item 1? Yes

If YES, enter delivery address below: No

3. Service Type

Certified Mail Express Mail

Registered Return Receipt for Merchandise

Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee)

Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Lewis B. Burleson, Inc.
 P.O. Box 2479
 Midland, TX 79702

2. Article Number

(Transfer from service label)

7001 0320 0002 0354 8643

PS Form 3811, March 2001

Domestic Return Receipt

102595-01-M-1424

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly)

B. Date of Delivery

C. Signature

X

Agent

Addressee

D. Is delivery address different from item 1? Yes

If YES, enter delivery address below: No

3. Service Type

Certified Mail Express Mail

Registered Return Receipt for Merchandise

Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee)

Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Grimes Land Company
P.O. Box 5102
Hobbs, NM 88241

2. Article Number

(Transfer from service label)

7001 0320 0002 0354 8605

PS Form 3811, March 2001

Domestic Return Receipt

102595-01-M-1424

COMPLETE THIS SECTION ON DELIVERYA. Received by *(Please Print Clearly)* B. Date of Delivery

C. Signature

X

 Agent AddresseeD. Is delivery address different from item 1? YesIf YES, enter delivery address below: No

3. Service Type

 Certified Mail Express Mail Registered Return Receipt for Merchandise Insured Mail C.O.D.4. Restricted Delivery? *(Extra Fee)* Yes**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

James R. Serviss
10222 Arroyo Crest Drive NW
Albuquerque, NM 87114-5802

2. Article Number

(Transfer from service label)

7001 0320 0002 0354 8599

PS Form 3811, March 2001

Domestic Return Receipt

102595-01-M-1424

COMPLETE THIS SECTION ON DELIVERYA. Received by *(Please Print Clearly)* B. Date of Delivery

C. Signature

X

 Agent AddresseeD. Is delivery address different from item 1? YesIf YES, enter delivery address below: No

3. Service Type

 Certified Mail Express Mail Registered Return Receipt for Merchandise Insured Mail C.O.D.4. Restricted Delivery? *(Extra Fee)* Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

ChevronTexaco
 Attn: NOJV Manager
 15 Smith Road
 Midland, TX 79705

2. Article Number

(Transfer from service label)

7001 0320 0002 0354 8612

PS Form 3811, March 2001

Domestic Return Receipt

102595-01-M-1424

COMPLETE THIS SECTION ON DELIVERYA. Received by *(Please Print Clearly)* B. Date of Delivery

C. Signature

X Agent AddresseeD. Is delivery address different from item 1? YesIf YES, enter delivery address below: No

3. Service Type

 Certified Mail Express Mail Registered Return Receipt for Merchandise Insured Mail C.O.D.4. Restricted Delivery? *(Extra Fee)* Yes

