

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 SEC  
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.

MAYTE REYES  
 Print or Type Name

*Mayte Reyes*  
 Signature

Production Clerk 11-10-08  
 Title Date

mayte@y.pcnm.com  
 e-mail Address

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

RECEIVED  
2008 NOV 12 PM 3:19  
FORM APPROVED  
Budget Bureau No. 1004-0135  
Expires March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS  
5. Lease Designation and Serial No.  
NM-105211

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.  
Use "APPLICATION FOR PERMIT--" for such proposals  
6. If Indian, Allottee or Tribe Name

SUBMIT IN TRIPLICATE  
7. If Unit or CA, Agreement Designation

1. Type of Well  
Oil Gas  
 Well  Well  Other  
8. Well Name and No.  
Pequeno Mike BLU Federal #1H

2. Name of Operator  
Yates Petroleum Corporation  
9. API Well No.  
30-015-36390

3. Address and Telephone No.  
105 South Fourth Street, Artesia, NM 88210 (575) 7481471  
10. Field and Pool, or Exploratory Area  
County Line Tank Wolfcamp

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)  
200' FSL & 200' FWL Section 2-T16S-R29E SWSW Unit M SHL  
950' FSL & 330' FWL Section 3-T16S-R29E SWSW Unit M BHL  
11. County or Parish, State  
Eddy County, NM

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

| TYPE OF SUBMISSION                                   | TYPE OF ACTION  |  |
|--|---|--|
| <input checked="" type="checkbox"/> Notice of Intent | <input type="checkbox"/> Abandonment                      | <input type="checkbox"/> Change of Plans         |
| <input type="checkbox"/> Subsequent Report           | <input type="checkbox"/> Recompletion                     | <input type="checkbox"/> New Construction        |
| <input type="checkbox"/> Final Abandonment Notice    | <input type="checkbox"/> Plugging Back                    | <input type="checkbox"/> Non-Routine Fracturing- |
|  | <input type="checkbox"/> Casing Repair                    | <input type="checkbox"/> Water Shut-Off          |
|  | <input type="checkbox"/> Altering Casing                  | <input type="checkbox"/> Conversion to Injection |
|  | <input checked="" type="checkbox"/> Other Lease Commingle | <input type="checkbox"/> Dispose Water           |

(Note: Report results of multiple completion on Well completion or Recompletion Report and Log Form)

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)\*

Yates Petroleum Corporation respectfully request administrative approval to Lease Commingle the following wells;

Please see attachment.

The Battery is located at the Big Miguel BKN State Com #1. Please see attached plat and site facility diagram.

Diversified ownership.

Oil measurement.  
The Pequeno Mike BLU Federal #1H shall be equipped with a continuous metering separator located on the Big Miguel BKN State Com #1H prior to oil being commingled for sales. A subtraction method of measurement will be used for the Big Miguel BKN State Com #1H for allocation purposes.

Gas measurement.  
Each of these wells will be equipped with allocation meters for gas prior to commingling located on the Big Miguel BKN State Com #1H. The gas sales point for this commingled production shall be located near the Big Miguel BKN State Com #1H location.

The proposed commingling of production is in the interest of conservation and will not result in reduced royalty or improper measurement of production. Estimated daily gas production for the Big Miguel BKN State Com #1 is 100 mcf, and 60 barrels of oil and the estimated gas production for the Pequeno Mike BLU Federal #1H is 200 mcf per day and 300 barrels per day.

The purpose of the Lease Commingle is to reduce operating costs for storage and treating, thereby extending the economic life of each well. Without approval for utilizing existing batteries on adjacent leases, it will become necessary to built separate facilities for each well. This will greatly increase costs and shorten the economic life of the well.

The proposed commingling is necessary for economic operation of the above referenced leases.  
We understand that the request approval will not constitute the granting of any right-of-way or construction rights not granted by the lease instrument. And, we will submit within 30 days an application for right-of-way approval to the BLM's Realty Section in your office if we have not already done so.

14. I hereby certify that the foregoing is true and correct  
Signed Miguel Regs Title Production Secretary Date November 10, 2008

(This space for Federal or State office use)  
Approved by \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_  
Conditions of approval, if any:

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.

**Federal**

Pequeno Mike BLU Federal #01H  
Sec 2-T16S-R29E  
County Line Tank/Wolfcamp(not yet completed)  
Eddy County, NM  
Federal Lease #NM-105211  
API# 30-015-36390

**State**

Big Miguel BKN State Com #01H  
Sec 2-T16S-R29E  
County Line Tank/Wolfcamp  
Eddy County, NM  
State Lease # B-2885  
API# 30-015-36027

District I  
1625 N. French Drive, Hobbs, NM 88240  
District II  
1301 W. Grand Ave, Artesia, NM 88216  
District III  
1000 Rio Brazos Road, Aztec, NM 87410  
District IV  
1220 S. St Francis Dr, Santa Fe, NM  
87505

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-107-B  
Revised June 10, 2003

**OIL CONSERVATION DIVISION**  
1220 S. St Francis Drive  
Santa Fe, New Mexico 87505

Submit the original application to the Santa Fe office with one copy to the appropriate District Office.

**APPLICATION FOR SURFACE COMMINGLING (DIVERSE OWNERSHIP)**

OPERATOR NAME: YATEJ PETROLEUM CORPORATION  
OPERATOR ADDRESS: 105 SOUTH 4TH STREET ARTESIA NM 88210  
APPLICATION TYPE:

Pool Commingling  Lease Commingling  Pool and Lease Commingling  Off-Lease Storage and Measurement (Only if not Surface Commingled)  
LEASE TYPE:  Fee  State  Federal

Is this an Amendment to existing Order?  Yes  No If "Yes", please include the appropriate Order No. \_\_\_\_\_  
Have the Bureau of Land Management (BLM) and State Land office (SLO) been notified in writing of the proposed commingling  
 Yes  No

**(A) POOL COMMINGLING**

Please attach sheets with the following information

| (1) Pool Names and Codes | Gravities / BTU of Non-Commingled Production | Calculated Gravities / BTU of Commingled Production | Calculated Value of Commingled Production | Volumes |
|--------------------------|--|---|---|---------|
|                          |  |   |   |         |
|                          |  |   |   |         |
|                          |  |   |   |         |
|                          |  |   |   |         |
|                          |  |   |   |         |

- (2) Are any wells producing at top allowables?  Yes  No  
(3) Has all interest owners been notified by certified mail of the proposed commingling?  Yes  No.  
(4) Measurement type:  Metering  Other (Specify)  
(5) Will commingling decrease the value of production?  Yes  No If "yes", describe why commingling should be approved

**(B) LEASE COMMINGLING**

Please attach sheets with the following information

- (1) Pool Name and Code.  
(2) Is all production from same source of supply?  Yes  No  
(3) Has all interest owners been notified by certified mail of the proposed commingling?  Yes  No  
(4) Measurement type:  Metering  Other (Specify) subtraction method

**(C) POOL and LEASE COMMINGLING**

Please attach sheets with the following information

- (1) Complete Sections A and E.

**(D) OFF-LEASE STORAGE and MEASUREMENT**

Please attached sheets with the following information

- (1) Is all production from same source of supply?  Yes  No  
(2) Include proof of notice to all interest owners.

**(E) ADDITIONAL INFORMATION (for all application types)**

Please attach sheets with the following information

- (1) A schematic diagram of facility, including legal location.  
(2) A plat with lease boundaries showing all well and facility locations. Include lease numbers if Federal or State lands are involved.  
(3) Lease Names, Lease and Well Numbers, and API Numbers.

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

SIGNATURE: Mate Reyes TITLE: PRODUCTION CLERK DATE: 11-10-05



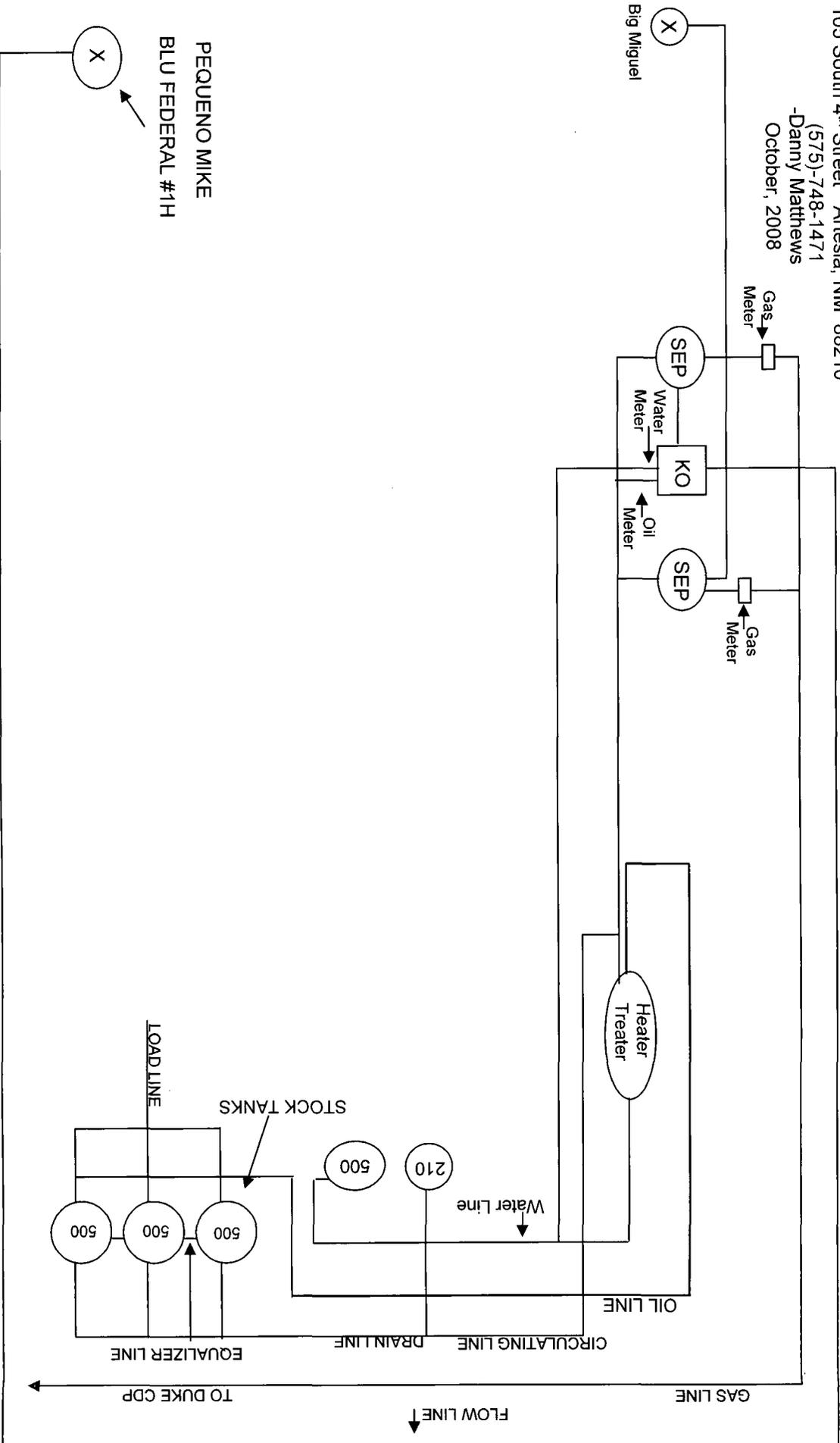
105 South 4th Street \* Artesia, NM 88210

(575)-748-1471

-Danny Matthews

October, 2008

**BIG MIGUEL BKN ST COM #1**  
400' FSL & 220' FWL \* Sec 2 - T 16S - R29E \* Unit M  
Eddy County, NM  
30-015-36027



This diagram is subject to the Yates Petroleum Corporation August 1983 Security Plan which is on file at 105 South 4th Street, Artesia, NM

DISTRICT I  
1425 N. French Dr., Hobbs, NM 88240

DISTRICT II  
1301 W. Grand Avenue, Artesia, NM 88210

DISTRICT III  
1000 Elm Branch Rd., Aztec, NM 87410

DISTRICT IV  
1220 S. H. Francisco Dr., Santa Fe, NM 87505

State of New Mexico  
Energy, Minerals and Natural Resources Department

**OIL CONSERVATION DIVISION**  
1220 South St. Francis Dr.  
Santa Fe, New Mexico 87505

JAN - 9 2008  
OCD ARTESIA C-102  
ESTABLISHED 12, 2005

Submit to Appropriate District Office  
State Lease - 4 Copies  
Fee Lease - 3 Copies



AMENDED REPORT

**WELL LOCATION AND ACREAGE DEDICATION PLAT**

|                            |   |                               |
|----------------------------|---|-------------------------------|
| API Number<br>30-015-66400 | Pool Code<br>96084                          | Pool Name<br>Wildcat Wolfcamp |
| Property Code              | Property Name<br>BIG MIGUEL "BKN" STATE COM | Well Number<br>1H             |
| OGRES No.<br>025575        | Operator Name<br>YATES PETROLEUM CORP.      | Elevation<br>3721'            |

**Surface Location**

| UL or lot No. | Section | Township | Range | Lot Ida | Feet from the | North/South line | Feet from the | East/West line | County |
|---------------|---------|----------|-------|---------|---------------|------------------|---------------|----------------|--------|
| M             | 2       | 16 S     | 29 E  |         | 785           | SOUTH            | 150           | WEST           | EDDY   |

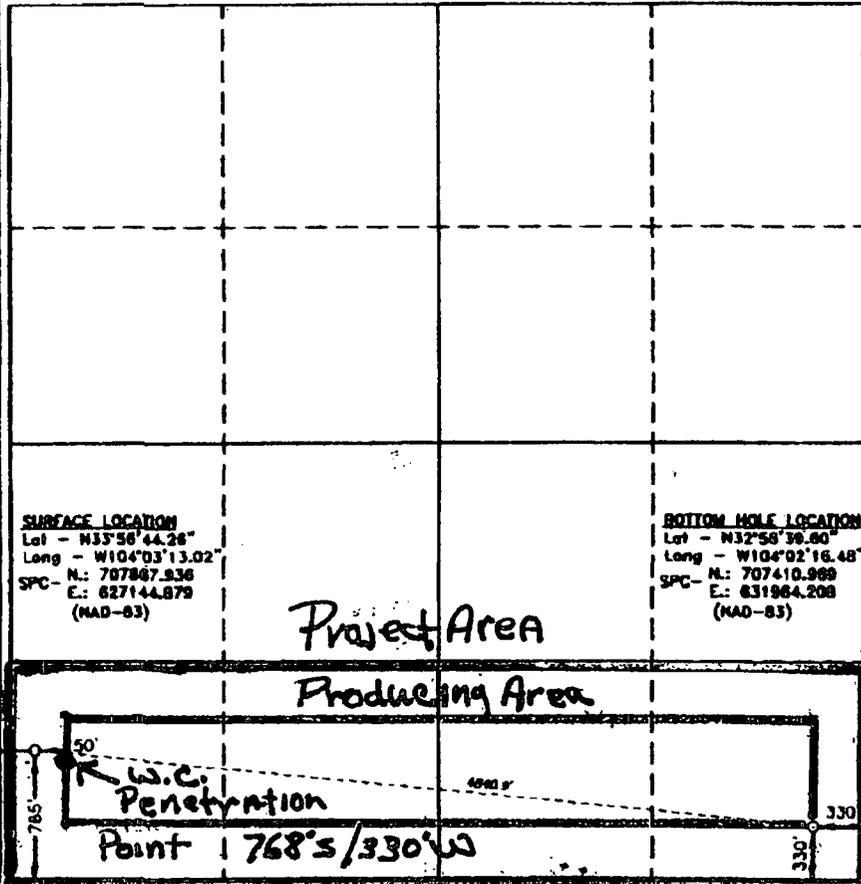
**Bottom Hole Location if Different From Surface**

| UL or lot No. | Section | Township | Range | Lot Ida | Feet from the | North/South line | Feet from the | East/West line | County |
|---------------|---------|----------|-------|---------|---------------|------------------|---------------|----------------|--------|
| P             | 2       | 16 S     | 29 E  |         | 330           | SOUTH            | 330           | EAST           | EDDY   |

|                        |                 |                    |           |
|------------------------|-----------------|--------------------|-----------|
| Dedicated Acres<br>160 | Joint or Infill | Consolidation Code | Order No. |
|------------------------|-----------------|--------------------|-----------|

**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><b>SURFACE LOCATION</b><br/>Lat - N33°56'44.28"<br/>Long - W104°03'13.02"<br/>SPC - N.: 707967.936<br/>E.: 627144.879<br/>(MAD-83)</p> | <p><b>BOTTOM HOLE LOCATION</b><br/>Lat - N32°58'39.60"<br/>Long - W104°02'16.48"<br/>SPC - N.: 707410.989<br/>E.: 631964.208<br/>(MAD-83)</p> | <p><b>OPERATOR CERTIFICATION</b></p> <p>I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief, and that this organization either owns a working interest or undivided mineral interest in the land including the proposed bottom hole location pursuant to a contract with an owner of such a mineral or working interest, or in a voluntary pooling agreement or a compulsory pooling after approval entered by the Division.</p> <p><i>Cy Cowan</i><br/>Signature _____ Date _____</p> <p>Cy Cowan, Regulatory<br/>Printed Name Agent</p> |
|   |   | <p><b>SURVEYOR CERTIFICATION</b></p> <p>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.</p> <p>DECEMBER 1 2007</p> <p>Bald Stone<br/>Signature _____<br/>Professional _____</p> <p>Certificate No. Gary L. Jones 7977</p> <p>BASH SURVEYS</p>   |



DISTRICT I  
1626 N. French Dr., Hobbs, NM 88240

DISTRICT II  
1301 W. Grand Avenue, Artesia, NM 88210

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

DISTRICT IV  
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-102  
Revised October 12, 2005

Submit to Appropriate District Office  
State Lease - 4 Copies  
Fee Lease - 3 Copies

**OIL CONSERVATION DIVISION**  
1220 South St. Francis Dr.  
Santa Fe, New Mexico 87505

*County Line*  AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

|                     |   |                               |
|---------------------|---|-------------------------------|
| API Number          | Pool Code<br><b>97489</b>                   | Pool Name<br>Wildcat Wolfcamp |
| Property Code       | Property Name<br>PEQUENO MIKE "BLU" FEDERAL | Well Number<br>1H             |
| OGRID No.<br>025575 | Operator Name<br>YATES PETROLEUM CORP.      | Elevation<br>3718'            |

Surface Location

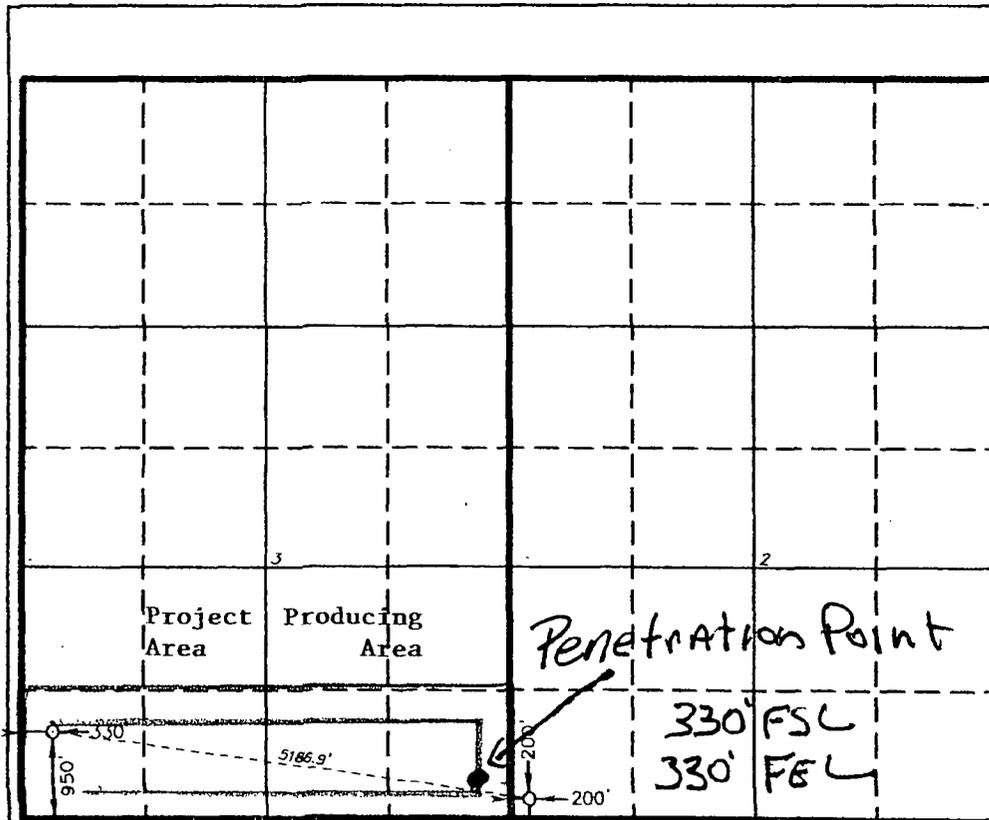
| UL or lot No. | Section | Township | Range | Lot Idn | Feet from the | North/South line | Feet from the | East/West line | County |
|---------------|---------|----------|-------|---------|---------------|------------------|---------------|----------------|--------|
| M             | 2       | 16 S     | 29 E  |         | 200           | SOUTH            | 200           | WEST           | EDDY   |

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 |
|---------------|---------|----------|-------|---------|---------------|------------------|---------------|----------------|--------|
| M             | 3       | 16 S     | 29 E  |         | 950           | SOUTH            | 330           | WEST           | EDDY   |

|                        |                 |                    |           |
|------------------------|-----------------|--------------------|-----------|
| Dedicated Acres<br>160 | Joint or Infill | Consolidation Code | Order No. |
|------------------------|-----------------|--------------------|-----------|

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



**BOTTOM HOLE LOCATION**  
Lat - N32°56'45.87"  
Long - W104°04'12.61"  
SPC- N.: 708017.706  
E.: 622066.909  
(NAD-83)

**SURFACE LOCATION**  
Lat - N32°56'38.45"  
Long - W104°03'12.37"  
SPC- N.: 707281.487  
E.: 627201.362  
(NAD-83)

OPERATOR CERTIFICATION

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief, and that this organization either owns a working interest or unleased mineral interest in the land including the proposed bottom hole location pursuant to a contract with an owner of such a mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling order heretofore entered by the division.

*Cy Cowan* 5/15/08  
Signature Date

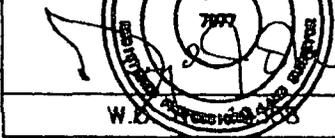
Cy Cowan

Printed Name

SURVEYOR CERTIFICATION

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.

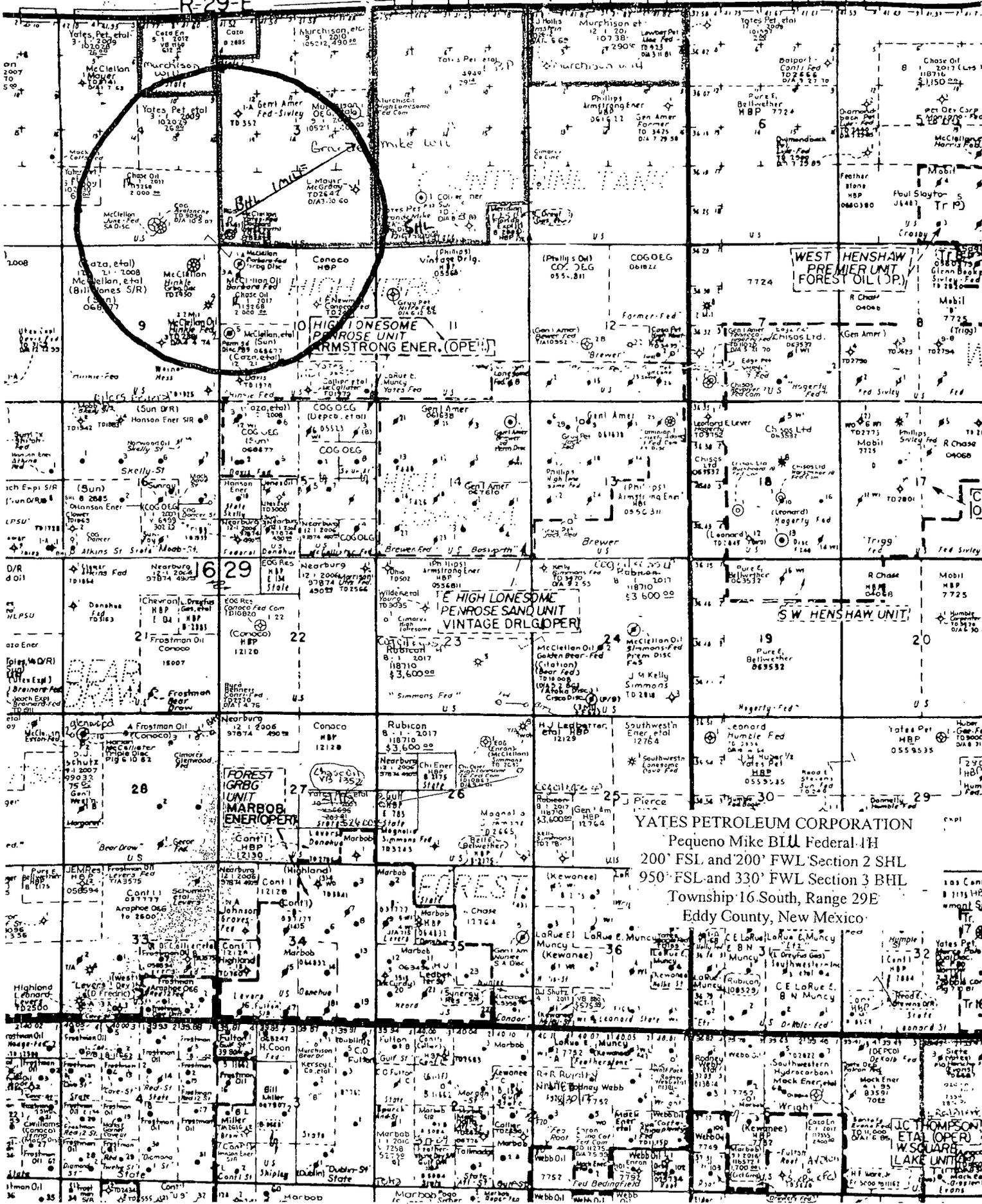
MAY 1 2008  
Date Surveyed  
Signature & Seal  
Professional Surveyor



Certificate No. Gary L. Jones 7977

BASIN SURVEYS

R-29-E



YATES PETROLEUM CORPORATION  
 Pequeno Mike BU Federal-1H  
 200' FSL and 200' FWL Section 2 SHL  
 950' FSL and 330' FWL Section 3 BHL  
 Township 16 South, Range 29E  
 Eddy County, New Mexico

HIGH LONESOME  
 PENROSE UNIT  
 ARMSTRONG ENER. (OPER)

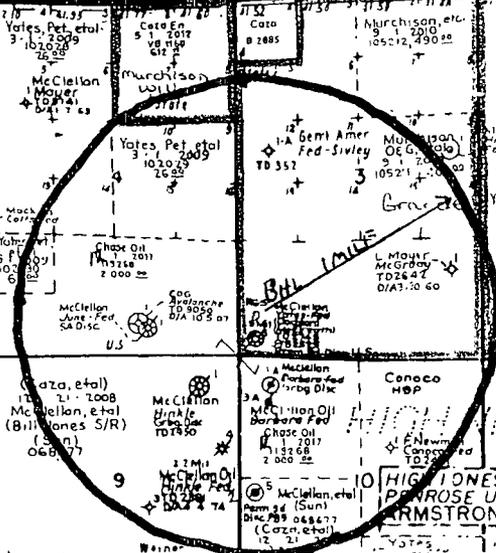
HIGH LONESOME  
 PENROSE SAND UNIT  
 VINTAGE DRILLING (OPER)

FOREST  
 UNIT  
 MARBOB  
 ENER (OPER)

FOREST  
 UNIT

WEST HENSHAW  
 PREMIER UNIT  
 FOREST OIL (OP)

S W HENSHAW UNIT



BEAR  
 DRAW

BEAR  
 DRAW

BEAR  
 DRAW

BEAR  
 DRAW

MARTIN YATES, III  
1912-1985

FRANK W. YATES  
1936-1986



105 SOUTH FOURTH STREET  
ARTESIA, NEW MEXICO 88210-2118  
TELEPHONE (575) 748-1471

S.P. YATES  
CHAIRMAN EMERITUS  
JOHN A. YATES  
CHAIRMAN OF THE BOARD  
FRANK YATES, JR.  
PRESIDENT  
PEYTON YATES  
DIRECTOR  
JOHN A. YATES, JR.  
DIRECTOR

November 10, 2008

Re: Lease Commingle  
County Line Tank Wolfcamp  
Eddy County, New Mexico

Dear Interest Owner:

Yates Petroleum Corporation respectfully request administrative approval to Lease Commingle the following wells;

**Federal**

Pequeno Mike BLU Federal #01H  
Sec 2-T16S-R29E  
County Line Tank/Wolfcamp(not yet completed)  
Eddy County, NM  
Federal Lease #NM-105211  
API# 30-015-36390

**Federal**

Big Miguel BKN State Com #01H  
Sec 2-T16S-R29E  
County Line Tank/Wolfcamp  
Eddy County, NM  
State Lease # B-2885  
API# 30-015-36027

Oil measurement.

The Pequeno Mike BLU Federal #1H shall be equipped with a continuous metering separator located on the Big Miguel BKN State Com #1H prior to oil being commingled for sales. A subtraction method of measurement will be used for the Big Miguel BKN State Com #1H for allocation purposes.

Gas measurement.

Each of these wells will be equipped with allocation meters for gas prior to commingling located on the Big Miguel BKN State Com #1H. The gas sales point for this commingled production shall be located near the Big Miguel BKN State Com #1H location.

The proposed commingling of production is in the interest of conservation and will not result in reduced royalty or improper measurement of production.

The purpose of the Commingling, is to reduce operating costs for storage and treating, thereby extending the economic life of each well. Without approval for utilizing existing batteries on adjacent leases, it will become necessary to built separate facilities for each well. This will greatly increase costs and shorten the economic life of the well.

The proposed commingling is necessary for economic operation of the above referenced leases.

Any objection must be filed in writing with District Office within 20 days from the date the division received the application.

If you should have any questions, please give me a call at (505) 748-4213 (direct line).

Sincerely,

Mayte Reyes  
Production Clerk

I hereby approve this application

Company: Yates Drilling Company.

MARTIN YATES, III  
1912-1985

FRANK W. YATES  
1936-1986



105 SOUTH FOURTH STREET  
ARTESIA, NEW MEXICO 88210-2118  
TELEPHONE (575) 748-1471

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JOHN A. YATES  
CHAIRMAN OF THE BOARD  
FRANK YATES, JR.  
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PEYTON YATES  
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JOHN A. YATES, JR.  
DIRECTOR

November 10, 2008

Re: Lease Commingle  
County Line Tank Wolfcamp  
Eddy County, New Mexico

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Eddy County, NM  
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If you should have any questions, please give me a call at (505) 748-4213 (direct line).

Sincerely,

Mayte Reyes  
Production Clerk

I hereby approve this application

Company: MYCO Industries, Inc.

RANDY G. PATTERSON  
SECRETARY

DAVID LANNING  
CHIEF OPERATING OFFICER

DENNIS G. KINSEY  
TREASURER

MARTIN YATES, III  
1912-1985

FRANK W. YATES  
1936-1986



105 SOUTH FOURTH STREET  
ARTESIA, NEW MEXICO 88210-2118  
TELEPHONE (575) 748-1471

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DIRECTOR

November 10, 2008

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County Line Tank Wolfcamp  
Eddy County, New Mexico

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The proposed commingling is necessary for economic operation of the above referenced leases.

Any objection must be filed in writing with District Office within 20 days from the date the division received the application.

If you should have any questions, please give me a call at (505) 748-4213 (direct line).

Sincerely,

Mayte Reyes  
Production Clerk

I hereby approve this application

Company: ABO Petroleum Corporation.

MARTIN YATES, III  
1912-1985

FRANK W. YATES  
1936-1986



105 SOUTH FOURTH STREET  
ARTESIA, NEW MEXICO 88210-2118  
TELEPHONE (575) 748-1471

S.P. YATES  
CHAIRMAN EMERITUS  
JOHN A. YATES  
CHAIRMAN OF THE BOARD  
FRANK YATES, JR.  
PRESIDENT  
PEYTON YATES  
DIRECTOR  
JOHN A. YATES, JR.  
DIRECTOR

November 10, 2008

Re: Lease Commingle  
County Line Tank Wolfcamp  
Eddy County, New Mexico

Dear Interest Owner:

Yates Petroleum Corporation respectfully request administrative approval to Lease Commingle the following wells;

**Federal**

Pequeno Mike BLU Federal #01H  
Sec 2-T16S-R29E  
County Line Tank/Wolfcamp(not yet completed)  
Eddy County, NM  
Federal Lease #NM-105211  
API# 30-015-36390

**Federal**

Big Miguel BKN State Com #01H  
Sec 2-T16S-R29E  
County Line Tank/Wolfcamp  
Eddy County, NM  
State Lease # B-2885  
API# 30-015-36027

Oil measurement.

The Pequeno Mike BLU Federal #1H shall be equipped with a continuous metering separator located on the Big Miguel BKN State Com #1H prior to oil being commingled for sales. A subtraction method of measurement will be used for the Big Miguel BKN State Com #1H for allocation purposes.

Gas measurement.

Each of these wells will be equipped with allocation meters for gas prior to commingling located on the Big Miguel BKN State Com #1H. The gas sales point for this commingled production shall be located near the Big Miguel BKN State Com #1H location.

The proposed commingling of production is in the interest of conservation and will not result in reduced royalty or improper measurement of production.

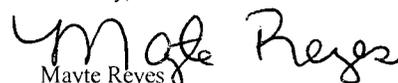
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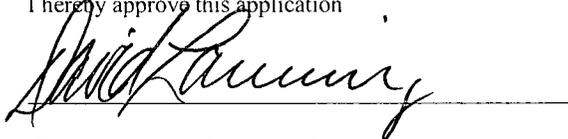
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If you should have any questions, please give me a call at (505) 748-4213 (direct line).

Sincerely,

  
Mayte Reyes  
Production Clerk

I hereby approve this application



Company: Yates Petroleum Corporation.

RANDY G. PATTERSON  
SECRETARY

DAVID LANNING  
CHIEF OPERATING OFFICER

DENNIS G. KINSEY  
TREASURER

November 10, 2008

Re: Lease Commingle  
County Line Tank Wolfcamp  
Eddy County, New Mexico

Dear Interest Owner:

Yates Petroleum Corporation respectfully request administrative approval to Lease Commingle the following wells;

**Federal**

Pequeno Mike BLU Federal #01H  
Sec 2-T16S-R29E  
County Line Tank/Wolfcamp(not yet completed)  
Eddy County, NM  
Federal Lease #NM-105211  
API# 30-015-36390

**Federal**

Big Miguel BKN State Com #01H  
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Production Clerk

November 10, 2008

Re: Lease Commingle  
County Line Tank Wolfcamp  
Eddy County, New Mexico

Dear Interest Owner:

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Sec 2-T16S-R29E  
County Line Tank/Wolfcamp  
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*Mayte Reyes*  
Mayte Reyes  
Production Clerk

November 10, 2008

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Eddy County, New Mexico

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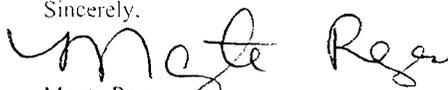
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November 10, 2008

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Production Clerk

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Production Clerk

**U.S. Postal Service™**  
**CERTIFIED MAIL™ RECEIPT**  
*(Domestic Mail Only; No Insurance Coverage Provided)*

For delivery information visit our website at [www.usps.com](http://www.usps.com)

7007 0710 0000 3415 9929  
 7007 0710 0000 3415 9929

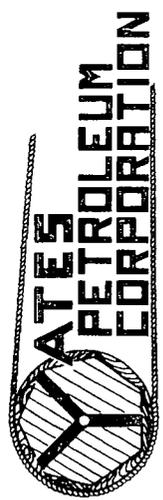
**REQUEST OFFICIAL USE**

|   |    |  |
|---|----|--|
| Postage   | \$ | MAYE-PDD<br>11-10-08<br>Postmark<br>Here |
| Certified Fee                                     |    |  |
| Return Receipt Fee<br>(Endorsement Required)      |    |  |
| Restricted Delivery Fee<br>(Endorsement Required) |    |  |

Tot: Chase Oil Corporation  
 P.O. Box #1767  
 Artesia, NM 88211-1767

|              |  |
|--------------|--|
| Sent         |  |
| Street or PO |  |
| City         |  |

PS Form 3800, August 2006 See Reverse for Instructions



YATES BUILDING - 105 SOUTH FOURTH ST.  
 ARTESIA, NEW MEXICO 88210-2118

ADDRESS SERVICE REQUESTED

- 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:

Chase Oil Corporation  
 P.O. Box #1767  
 Artesia, NM 88211-1767

A. Signature

Agent  
 Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? If YES, enter delivery address below:

Yes  
 No

3. Service Type

- Certified Mail
- Registered
- Insured Mail
- Express Mail
- Return Receipt for Merchandise
- C.O.D.

4. Restricted Delivery? (Extra Fee)  Yes

2. Article Number **7007 0710 0000 3415 9929**  
*(Transfer from serv)*

PS Form 3811, February 2004 Domestic Return Receipt

102595-02-M-1540

**Certified Mail**

- A mailing receipt
- A unique identifier
- A record of delivery

**Important Reminders**

- Certified Mail must be placed in a Certified Mail envelope.
- NO INSURANCE coverage for valuables, please.
- For an additional delivery, To obtain a Return Receipt (PS Form 3811), a duplicate return receipt is required.
- For an additional addressee's authorized endorsement "F".
- If a postmark or cancellation receipt is not needed, a return receipt is not needed.

**IMPORTANT: Save**  
 PS Form 3800, August 2003



YATES BUILDING - 105 SOUTH FOURTH ST.  
 ARTESIA, NEW MEXICO 88210-2118

ADDRESS SERVICE REQUESTED

7007 0720 0000 3425 9936  
 7007 0720 0000 3425 9936

|   |                        |
|---|------------------------|
| U.S. Postal Service™  |                        |
| CERTIFIED MAIL™ RECEIPT                                     |                        |
| (Domestic Mail Only; No Insurance Coverage Provided)        |                        |
| For delivery information visit our website at www.usps.com® |                        |
| Return Mile & BioMetric                                     |                        |
| Postage \$  | 170-08                 |
| Certified Fee   | MMVIR-PRO              |
| Return Receipt Fee (Endorsement Required)                   |                        |
| Restricted Delivery Fee (Endorsement Required)              |                        |
| Total   |                        |
| Sent To: Robert C. Chase, whose wife is Deb E. Chase        |                        |
| Street, P.O. Box #297                                       |                        |
| City, St  | Artesia, NM 88211-0297 |
| PS Form 3800 August 2006 See Reverse for Instructions       |                        |

PLACE STICKER ON TOP OF ENVELOPE TO THE RIGHT

**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:

Robert C. Chase, whose wife is Deb E. Chase  
P.O. Box #297  
Artesia, NM 88211-0297

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  Agent  
**X**  Addressee

B. Received by (Printed Name)  Date of Delivery

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

2. Article Number  
(Transfer from service label)

7007 0710 0000 3415 9936

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

**Certified Mail**

■ A mailing receipt

■ A unique identifier

■ A record of delivery

■ Certified Mail

■ Certified Mail

■ NO INSURANCE

■ For an additional fee, Endorsement (PS Receipt) is required.

■ For an addressee's return receipt, a duplicate is required.

■ For an addressee's return receipt, a duplicate is required.

■ If a postmaster is not available at the time of delivery, a return receipt is not required.

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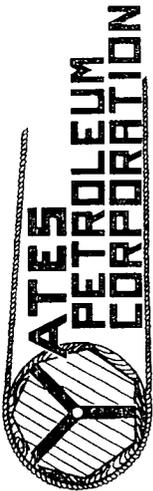
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YATES BUILDING - 105 SOUTH FOURTH ST.  
ARTESIA, NEW MEXICO 88210-2118

ADDRESS SERVICE REQUESTED

7007 0710 0000 3415 9905  
7007 0710 0000 3415 9905

| U.S. Postal Service™   |  |
|--|--|
| CERTIFIED MAIL™ RECEIPT  |  |
| (Domestic Mail Only; No Insurance Coverage Provided)   |  |
| For delivery information, visit our website at <a href="http://www.usps.com">www.usps.com</a>      |  |
| RECEIVED BY: <i>Mike &amp; Bilo Mize</i>   |  |
| Postage \$   | MAYTE-PROO<br>17-10-08<br>Postmark<br>Here |
| Certified Fee  |  |
| Return Receipt Fee<br>(Endorsement Required)   |  |
| Restricted Delivery Fee<br>(Endorsement Required)  |  |
| Total Post:  |  |
| Sent To: Richard L. Chase, whose wife is Karla<br>Chase<br>P.O. Box #359<br>Artesia, NM 88211-0359 |  |
| PS Form 3800, August 2006 See Reverse for Instructions   |  |

UNITED STATES POSTAL SERVICE  
 FIRST CLASS PERMIT NO. 8227 WASHINGTON, DC 20541

**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:

Richard L. Chase, whose wife is Karla Chase  
 P.O. Box #359  
 Artesia, NM 88211-0359

**COMPLETE THIS SECTION ON DELIVERY**

- A. Signature  Agent  
 Addressee
- B. Received by (Printed Name)  Date of Delivery

D. Is delivery address different from item 1?  Yes  
 If YES, enter delivery address below:  No

3. Service Type
- Certified Mail
  - Registered
  - Insured Mail
  - Express Mail
  - Return Receipt for Merchandise
  - C.O.D.

4. Restricted Delivery? (Extra Fee)  Yes

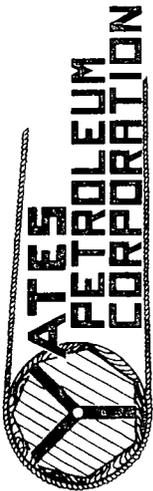
2. Article Number 7007 0710 0000 3415 9905  
 (Transfer from service)

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

**Certified Mail**  
 ■ A mailing receipt  
 ■ A unique identifier  
 ■ A record of delivery  
**Important Return Receipt**  
 ■ Certified Mail  
 ■ Certified Mail  
 ■ NO INSURANCE  
 ■ For an addition of values, please  
 ■ For an addition of delivery (PS Form 3811) fee, Enclosure fee, Endorsement fee, duplicate return required.  
 ■ For an addition of addressee's address and endorsement "A"  
 ■ If a postmark on receipt is not net  
**IMPORTANT: Save**  
 PS Form 3900, August



YATES BUILDING - 105 SOUTH FOURTH ST.  
ARTESIA, NEW MEXICO 88210-2118

ADDRESS SERVICE REQUESTED

7007 0710 0000 3415 9899  
7007 0710 0000 3415 9899

| U.S. Postal Service™   |                                   |
|--|-----------------------------------|
| <b>CERTIFIED MAIL™ RECEIPT</b><br>(Domestic Mail Only; No Insurance Coverage Provided)       |                                   |
| For delivery information visit our website at <a href="http://www.usps.com">www.usps.com</a> |                                   |
| PEQUENO MIKE & BIG MIKE  |                                   |
| Postage \$   | MAY 11 - 10 - 08<br>Postmark Here |
| Certified Fee  |                                   |
| Return Receipt Fee<br>(Endorsement Required)   |                                   |
| Restricted Delivery Fee<br>(Endorsement Required)  |                                   |
| To: <input type="text"/>   |                                   |
| Se: Gerene Dianne Chase Ferguson   |                                   |
| Str: P.O. Box #693   |                                   |
| City: Artesia, NM 88211-0693   |                                   |
| PSI: See Reverse for Instructions  |                                   |

ENVELOPE MUST BE OPENED FROM THE TOP. DO NOT OPEN FROM THE BOTTOM. DO NOT OPEN FROM THE SIDE.

**SENDER - COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
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- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Gerene Dianne Chase Ferguson  
 P.O. Box #693  
 Artesia, NM 88211-0693

**COMPLETE THIS SECTION ON DELIVERY**

- A. Signature  Agent  
 Addressee
- B. Received by (Printed Name) C. Date of Delivery
- 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

2. Article Number 7007 07J0 0000 34J5 9899  
 (transfer from service label)

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

**Certified Mail**

- A mailing receipt
- A unique identifier
- A record of delivery

**Important Reminder**

- Certified Mail is
- Certified Mail is
- NO INSURANCE
- For an additional value, please
- For an additional fee, Endorsement Receipt (PS Form 3811) is required.
- For an additional fee, Endorsement Receipt (PS Form 3811) is required.
- If a postmark or receipt is not included at the post office at the time of mailing, an endorsement is required.

**IMPORTANT: See PS Form 3800, August**



YATES BUILDING - 105 SOUTH FOURTH ST.  
 ARTESIA, NEW MEXICO 88210-2118

ADDRESS SERVICE REQUESTED

7007 0710 0000 3415 9882  
 7007 0710 0000 3415 9882

|  |   |
|--|---|
| <b>U.S. Postal Service<sup>TM</sup></b><br><b>CERTIFIED MAIL<sup>TM</sup> RECEIPT</b><br><i>(Domestic Mail Only, No Insurance Coverage Provided)</i> |   |
| For delivery information visit our website at <a href="http://www.usps.com">www.usps.com</a>   |   |
| <b>REQUIRED MAIL &amp; BUSINESS</b>  |   |
| Postage \$   | MAY 15 - PROD<br>11-10-08<br>Postmark<br>Here |
| Certified Fee  |   |
| Return Receipt Fee<br>(Endorsement Required)   |   |
| Restricted Delivery Fee<br>(Endorsement Required)  |   |
| To   |   |
| Sen  | Murchison Oil & Gas, Inc                      |
| Street or P.O. Box   | P.O. Box #841670                              |
| City   | Dallas, TX 75284-1670                         |
| PS Form 3800, August 2006 See Reverse for Instructions   |   |

M  
P.C  
D

**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:

Murchison Oil & Gas, Inc  
 P.O. Box #841670  
 Dallas, TX 75284-1670

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  Agent  
 Addressee

B. Received by (Printed Name) C. Date of Delivery

D. Is delivery address different from item 1?  Yes  
 If YES, enter delivery address below:  No

3. Service Type  Express Mail  
 Certified Mail  Return Receipt for Merchandise  
 Registered  Insured Mail  
 G.O.D.

4. Restricted Delivery? (Extra Fee)  Yes

2. Article Number (Transfer from service label) **7007 0710 0000 3415 9882**

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

**Certified Mail**

- A mailing receipt
- A unique identifier
- A record of delivery

**Important Reminders**

- Certified Mail is
- Certified Mail is
- NO INSURANCE
- For additional values, please
- For an additional fee, Endorsement fee, To obtain Receipt (PS Form 3800), a duplicate return required.
- For an additional addressee's authentication "If a postmark on receipt is not needed, save receipt is not needed."

**IMPORTANT: Save**

PS Form 3800, August