

N. M. State Demonstration for Class II Wells

NEW MEXICO

OIL CONSERVATION DIVISION

FORMS RELATED TO INJECTION

C-101	Application for Permit to Drill, Deepen or Plug Back
C-102	Well Location and Acreage Dedication Plat
C-103	Sundry Notices and Reports on Wells
C-105	Well Completion or Recompletion Report and Log
C-108	Application for Authorization to Inject
C-115	Operator's Monthly Report
C-120-A	Monthly Water Disposal Report
C-131	Monthly Gas Storage Report
	One - Well Plugging Bond
	\$50,000 Blanket Plugging Bond
	Notification of Fire, Breaks, Spills, Leaks, and Blowouts
	Field Trip Reports
	Field Trip Summary
	Bradenhead Test Report Forms

USGS FORMS

9-331 C	Application for Permit to Drill, Deepen, or Plug Back
9-331 a	Sundry Notices and Reports on Wells
9-330	Well Completion or Recompletion Report and Log

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

5A. Indicate Type of Lease
STATE ☐ FEE ☐

5. State Oil & Gas Lease No.

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

a. Type of Work

b. Type of Well
 DRILL ☐ DEEPEN ☐ PLUG BACK ☐
 OIL WELL ☐ GAS WELL ☐ OTHER ☐ SINGLE ZONE ☐ MULTIPLE ZONE ☐

1. Name of Operator

7. Unit Agreement Name

8. Farm or Lease Name

9. Well No.

2. Address of Operator

10. Field and Pool, or Wildcat

3. Location of Well
 UNIT LETTER _____ LOCATED _____ FEET FROM THE _____ LINE

4. _____ FEET FROM THE _____ LINE OF SEC. _____ TWP. _____ RGE. _____ NMPM

12. County

5. Elevations (Show whether DF, RT, etc.)	6. 21A. Kind & Status Plug. Band	7. 21B. Drilling Contractor	8. 19. Proposed Depth	9. 19A. Formation	10. 20. Rotary or C.T.	11. 22. Approx. Date Work will start
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PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP

1. ABOVE SPACE DESCRIBE PROPOSED PROGRAM; IF PROPOSAL IS TO DEEPEN OR PLUG BACK, GIVE DATA ON PRESENT PRODUCTIVE ZONE AND PROPOSED NEW PRODUCTIVE ZONE. GIVE SLOWOUT PREVENTER PROGRAM, IF ANY.

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

signed _____ Title _____ Date _____

(This space for State Use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

All distances must be from the outer boundaries of the Section.

Operator			Lease			Well No.		
Unit Letter	Section	Township	Range	County				
Actual Footage Location of Well:								
feet from the			line and			feet from the		
Ground Level Elev.			Producing Formation			Pool		
						Dedicated Acreage:		
						Acres		

1. Outline the acreage dedicated to the subject well by colored pencil or hachure marks on the plat below.
2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).
3. If more than one lease of different ownership is dedicated to the well, have the interests of all owners been consolidated by communitization, unitization, force-pooling, etc?

☐ Yes ☐ No If answer is "yes," type of consolidation _____

If answer is "no," list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if necessary.) _____

No allowable will be assigned to the well until all interests have been consolidated (by communitization, unitization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interests, has been approved by the Division.

CERTIFICATION

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

Name _____

Position _____

Company _____

Date _____

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 knowledge and belief.

Date Surveyed _____

Registered Professional Engineer
and/or Land Surveyor

Certificate No. _____

0 330 660 990 1320 1660 1990 2310 2640 2000 1500 1000 500 0

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-101
Revised 10-1-73

NO. OF COPIES RECEIVED		
DISTRIBUTION		
SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
OPERATOR		

5a. Indicate Type of Lease	
State <input type="checkbox"/>	Fee <input type="checkbox"/>
5. 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.)

6. Indicate Type of Well OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		7. Unit Agreement Name
Name of Operator		8. Farm or Lease Name
Address of Operator		9. Well No.
Location of Well UNIT LETTER _____ FEET FROM THE _____ LINE AND _____ FEET FROM THE _____ LINE, SECTION _____ TOWNSHIP _____ RANGE _____ NMPM.		10. Field and Pool, or Wildcat
15. Elevation (Show whether DF, RT, CR, etc.)		12. County

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"/>		COMMENCE DRILLING OPS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
KILL OR ALTER CASING <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input type="checkbox"/>	
OTHER <input type="checkbox"/>		OTHER <input type="checkbox"/>	

Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

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

SIGNED _____ TITLE _____ DATE _____

WITNESSED BY _____ TITLE _____ DATE _____

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

5a. Indicate Type of Lease
State ☐ Fee ☐
5. State Oil & Gas Lease No.

1a. TYPE OF WELL OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> DRY <input type="checkbox"/> OTHER _____		7. Unit Agreement Name
b. TYPE OF COMPLETION NEW WELL <input type="checkbox"/> WORK OVER <input type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input type="checkbox"/> DIFF. RESVR. <input type="checkbox"/> OTHER _____		8. Farm or Lease Name
2. Name of Operator		9. Well No.
3. Address of Operator		10. Field and Pool, or Wildcat
4. Location of Well UNIT LETTER _____ LOCATED _____ FEET FROM THE _____ LINE AND _____ FEET FROM _____		12. County
THE _____ LINE OF SEC. _____ TWP. _____ RGE. _____ NMPM _____		
15. Date Spudded	16. Date T.D. Reached	17. Date Compl. (Ready to Prod.)
18. Elevations (DF, RKB, RT, GR, etc.)		19. Elev. Casinghead
20. Total Depth	21. Plug Back T.D.	22. If Multiple Compl., How Many
23. Intervals Drilled By _____ Rotary Tools _____ Cable Tools _____		
24. Producing Interval(s), of this completion — Top, Bottom, Name		25. Was Directional Survey Made
26. Type Electric and Other Logs Run		27. Was Well Cored

28. CASING RECORD (Report all strings set in well)					
CASING SIZE	WEIGHT LB./FT.	DEPTH SET	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED

29. LINER RECORD				30. TUBING RECORD			
SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN	SIZE	DEPTH SET	PACKER SET

31. Perforation Record (Interval, size and number)	32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
	DEPTH INTERVAL	AMOUNT AND KIND MATERIAL USED

33. PRODUCTION							
Date First Production		Production Method (Flowing, gas lift, pumping — Size and type pump)				Well Status (Prod. or Shut-in)	
Date of Test	Hours Tested	Choke Size	Prod'n. For Test Period	Oil — Bbl.	Gas — MCF	Water — Bbl.	Gas — Oil Ratio
Flow Tubing Press.	Casing Pressure	Calculated 24-Hour Rate	Oil — Bbl.	Gas — MCF	Water — Bbl.	Oil Gravity — API (Corr.)	
34. Disposition of Gas (Sold, used for fuel, vented, etc.)						Test Witnessed By	

35. List of Attachments

36. 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.

This form is to be filed with the appropriate District Office of the Division not later than 20 days after the completion of any newly-drilled or deepened well. It shall be accompanied by one copy of all electrical and radioactivity logs run on the well and a summary of all special tests conducted, including drill stem tests. All depths reported shall be measured depths. In the case of directionally drilled wells, true vertical depths shall also be reported. For multiple completions, Items 10 through 34 shall be reported for each zone. The form is to be filed in triplicate except on state land, where six copies are required. See Rule 1355.

INDICATE FORMATION TOPS IN CONFORMANCE WITH GEOGRAPHICAL SECTION OF STATE

Southeastern New Mexico

Northwestern New Mexico

T. Anhy _____	T. Canyon _____	T. Ojo Alamo _____	T. Penn. "B" _____
T. Salt _____	T. Strawn _____	T. Kirtland-Fruitland _____	T. Penn. "C" _____
El Salt _____	T. Atoka _____	T. Pictured Cliffs _____	T. Penn. "D" _____
T. Yates _____	T. Miss _____	T. Cliff House _____	T. Leadville _____
T. 7 Rivers _____	T. Devonian _____	T. Menefee _____	T. Madison _____
T. Queen _____	T. Silurian _____	T. Point Lookout _____	T. Elbert _____
T. Grayburg _____	T. Montoya _____	T. Mancos _____	T. McCracken _____
T. San Andres _____	T. Simpson _____	T. Gallup _____	T. Ignacio Qtzite _____
T. Glorieta _____	T. McKee _____	Base Greenhorn _____	T. Granite _____
T. Paddock _____	T. Ellenburger _____	T. Dakota _____	T. _____
T. Blinebry _____	T. Gr. Wash _____	T. Morrison _____	T. _____
T. Tubb _____	T. Granite _____	T. Todilto _____	T. _____
T. Drinkard _____	T. Delaware Sand _____	T. Entrada _____	T. _____
T. Abo _____	T. Bone Springs _____	T. Wingate _____	T. _____
T. Wolfcamp _____	T. _____	T. Chinle _____	T. _____
T. Penn. _____	T. _____	T. Permian _____	T. _____
T. Cisco (Bough C) _____	T. _____	T. Penn. "A" _____	T. _____

OIL OR GAS SANDS OR ZONES

No. 1, from _____ to _____

No. 2, from _____ to _____

No. 3, from _____ to _____

No. 4, from _____ to _____

No. 5, from _____ to _____

No. 6, from _____ to _____

IMPORTANT WATER SANDS

Include data on rate of water inflow and elevation to which water rose in hole.

No. 1, from _____ to _____ feet. _____

No. 2, from _____ to _____ feet. _____

No. 3, from _____ to _____ feet. _____

No. 4, from _____ to _____ feet. _____

FORMATION RECORD (Attach additional sheets if necessary)

From	To	Thickness in Feet	Formation	From	To	Thickness in Feet	Formation

APPLICATION FOR AUTHORIZATION TO INJECT

- I. Purpose: ☐ Secondary Recovery ☐ Pressure Maintenance ☐ Disposal ☐ Storage
Application qualifies for administrative approval? ☐ yes ☐ no
- II. Operator: _____
Address: _____
Contact party: _____ Phone: _____
- III. Well data: Complete the data required on the reverse side of this form for each well proposed for injection. Additional sheets may be attached if necessary.
- IV. Is this an expansion of an existing project? ☐ yes ☐ no
If yes, give the Division order number authorizing the project _____.
- V. Attach a map that identifies all wells and leases within two miles of any proposed injection well with a one-half mile radius circle drawn around each proposed injection well. This circle identifies the well's area of review.
- * VI. Attach a tabulation of data on all wells of public record within the area of review which penetrate the proposed injection zone. Such data shall include a description of each well's type, construction, date drilled, location, depth, record of completion, and a schematic of any plugged well illustrating all plugging detail.
- VII. Attach data on the proposed operation, including:
1. Proposed average and maximum daily rate and volume of fluids to be injected;
 2. Whether the system is open or closed;
 3. Proposed average and maximum injection pressure;
 4. Sources and an appropriate analysis of injection fluid and compatibility with the receiving formation if other than reinjected produced water; and
 5. If injection is for disposal purposes into a zone not productive of oil or gas at or within one mile of the proposed well, attach a chemical analysis of the disposal zone formation water (may be measured or inferred from existing literature, studies, nearby wells, etc.).
- *VIII. Attach appropriate geological data on the injection zone including appropriate lithologic detail, geological name, thickness, and depth. Give the geologic name, and depth to bottom of all underground sources of drinking water (aquifers containing waters with total dissolved solids concentrations of 10,000 mg/l or less) overlying the proposed injection zone as well as any such source known to be immediately underlying the injection interval.
- IX. Describe the proposed stimulation program, if any.
- * X. Attach appropriate logging and test data on the well. (If well logs have been filed with the Division they need not be resubmitted.)
- * XI. Attach a chemical analysis of fresh water from two or more fresh water wells (if available and producing) within one mile of any injection or disposal well showing location of wells and dates samples were taken.
- XII. Applicants for disposal wells must make an affirmative statement that they have examined available geologic and engineering data and find no evidence of open faults or any other hydrologic connection between the disposal zone and any underground source of drinking water.
- XIII. Applicants must complete the "Proof of Notice" section on the reverse side of this form.
- XIV. Certification
- I hereby certify that the information submitted with this application is true and correct to the best of my knowledge and belief.
- Name: _____ Title: _____
- Signature: _____ Date: _____
- * If the information required under Sections VI, VIII, X, and XI above has been previously submitted, it need not be duplicated and resubmitted. Please show the date and circumstance of the earlier submittal. _____

III. WELL DATA

A. The following well data must be submitted for each injection well covered by this application. The data must be both in tabular and schematic form and shall include:

- (1) Lease name; Well No.; location by Section, Township, and Range; and footage location within the section.
- (2) Each casing string used with its size, setting depth, sacks of cement used, hole size, top of cement, and how such top was determined.
- (3) A description of the tubing to be used including its size, lining material, and setting depth.
- (4) The name, model, and setting depth of the packer used or a description of any other seal system or assembly used.

Division District offices have supplies of Well Data Sheets which may be used or which may be used as models for this purpose. Applicants for several identical wells may submit a "typical data sheet" rather than submitting the data for each well.

B. The following must be submitted for each injection well covered by this application. All items must be addressed for the initial well. Responses for additional wells need be shown only when different. Information shown on schematics need not be repeated.

- (1) The name of the injection formation and, if applicable, the field or pool name.
- (2) The injection interval and whether it is perforated or open-hole.
- (3) State if the well was drilled for injection or, if not, the original purpose of the well.
- (4) Give the depths of any other perforated intervals and detail on the sacks of cement or bridge plugs used to seal off such perforations.
- (5) Give the depth to and name of the next higher and next lower oil or gas zone in the area of the well, if any.

XIV. PROOF OF NOTICE

All applicants must furnish proof that a copy of the application has been furnished, by certified or registered mail, to the owner of the surface of the land on which the well is to be located and to each leasehold operator within one-half mile of the well location.

Where an application is subject to administrative approval, a proof of publication must be submitted. Such proof shall consist of a copy of the legal advertisement which was published in the county in which the well is located. The contents of such advertisement must include:

- (1) The name, address, phone number, and contact party for the applicant;
- (2) the intended purpose of the injection well; with the exact location of single wells or the section, township, and range location of multiple wells;
- (3) the formation name and depth with expected maximum injection rates and pressures; and
- (4) a notation that interested parties must file objections or requests for hearing with the Oil Conservation Division, P. O. Box 2088, Santa Fe, New Mexico 87501 within 15 days.

NO ACTION WILL BE TAKEN ON THE APPLICATION UNTIL PROPER PROOF OF NOTICE HAS BEEN SUBMITTED.

NOTICE: Surface owners or offset operators must file any objections or requests for hearing of administrative applications within 15 days from the date this application was mailed to them.

OPERATOR'S MONTHLY REPORT

DATE OF REPORT _____ (Month) _____ (Day) _____ (Year) Page _____ of _____

WELL NAME (Underline)		INJECTION		TOTAL LIQUIDS PRODUCED			GAS PRODUCED (MCF)	DAYS PROD.	DISPOSITION OF GAS			DISPOSITION OF OIL			
WELL NO	WELL NAME	VOLUME	PRESS.	MONTHLY OIL ALLOWABLE	ACTUAL BARRELS OF WATER PRODUCED	ACTUAL BARRELS OF OIL PRODUCED			SOLD	TRANS-PORTER	OTHER	OIL ON HAND AT BEG. OF MONTH	BARRELS TO TRANS-PORTER	OTHER	OIL ON HAND AT END OF MONTH
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100	100														

DISTRIBUTION ORIGINAL TO OCC SANTA FE ONE COPY TO OCC DIST. OFFICE ONE COPY TO TRANSPORTER(S)	STATUS CODE F.....FLOWING P.....PUMPING C.....CUT OFF S.....SHUT IN T.....TEMP ABANDONED I.....INJECTION D.....DISCONTINUED	OTHER- GAS DISPOSITION CODE X.....USED OFF LEASE D.....USED FOR DRILLING/REPAIR C.....GAS LIFT L.....LIFT (MCF ESTIMATED) E.....EXPLANATION ATTACHED R.....REPRESSURING OR V.....VENTED U.....USED ON LEASE	OTHER- OIL DISPOSITION CODE C.....CIRCULATING OIL L.....LIFT S.....SEDIMENTATION (SSW) E.....EXPLANATION ATTACHED	I HEREBY CERTIFY THAT THE INFORMATION GIVEN IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE
Form C-115 Revised 10-1-76				
(NAME)				
(POSITION)				

Submit this report in triplicate to the appropriate District Office, Oil Conservation Division

erger

Disposal System

nty

Month

19

[illegible]

Thereby certify that the above is true and complete to the best of my knowledge and belief.

Marks: _____ Name: _____

_____ Company _____

_____ Title _____

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-131
Revised 10-1-78STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

MONTHLY GAS STORAGE REPORT

(COMPANY)

(ADDRESS)

NAME OF STORAGE PROJECT: _____ COUNTY _____ REPORT MONTH _____

WELL NAME AND NUMBER	LOCATION				INJECTION (MCF)	WITH- DRAWAL (MCF)
	UNIT	SEC.	TWP.	RANGE		
TOTALS						

TOTAL CAPACITY (MMCF) _____

CALCULATED RESERVOIR
PRESSURE @ END OF MONTH _____

BEGINNING STORAGE (MMCF) _____

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

NET CHANGE (MMCF) _____

By _____

ENDING STORAGE (MMCF) _____

Title _____

Date _____

STATE OF NEW MEXICO
ONE-WELL PLUGGING BOND

FOR CHAVES, EDDY, LEA, MCKINLEY, RIO ARRIBA, ROOSEVELT,
SANDOVAL, AND SAN JUAN COUNTIES ONLY

BOND NO. _____
(For Use of Surety Company)

AMOUNT OF BOND _____

COUNTY _____

NOTE: For wells less than 5,000 feet deep, the minimum bond is \$5,000.00*
For wells 5,000 feet to 10,000 feet deep, the minimum bond is \$7,500.00*
For wells more than 10,000 feet deep, the minimum bond is \$10,000.00

* Under certain conditions, a well being drilled under a \$5,000.00 or \$7,500.00 bond may be permitted to be drilled as much as 500 feet deeper than the normal maximum depth, i.e., a well being drilled under a \$5,000.00 bond may be permitted to go to 5,499 feet, and a well being drilled under a \$7,500.00 bond may be permitted to go to 10,500 feet. (See Rule 101)

File with Oil Conservation Division, P.O. Box 2088, Santa Fe 87501

KNOW ALL MEN BY THESE PRESENTS:

That _____, (An individual) (a partnership)
(a corporation organized in the State of _____, with its principal office in the city of _____, State of _____, and authorized to do business
in the State of New Mexico), as PRINCIPAL, and _____, a
corporation organized and existing under the laws of the State of _____,
and authorized to do business in the State of New Mexico, as SURETY, are held firmly bound unto the State of New
Mexico, for the use and benefit of the Oil Conservation Division of New Mexico pursuant to Section 65-3-11, New
Mexico Statutes Annotated, 1953 Compilation, as amended, in the sum of _____
Dollars lawful money of the United States, for the payment of which, well and truly to be made, said PRINCIPAL and
SURETY hereby bind themselves, their successors and assigns, jointly and severally, firmly by these presents.

The conditions of this obligation are such that:

WHEREAS, The above principal has heretofore or may hereafter enter into oil and gas leases, or carbon dioxide (CO₂) gas leases, or
helium gas leases with the State of New Mexico; and

WHEREAS, The above principal has heretofore or may hereafter enter into oil and gas leases, or carbon dioxide (CO₂) gas leases, or
helium gas leases on lands patented by the United States of America to private individuals, and on lands otherwise owned by private
individuals; and

WHEREAS, The above principal, individually, or in association with one or more other parties, has commenced or
may commence the drilling of one well not to exceed a depth of _____ feet, to prospect for and produce oil
or gas, or carbon dioxide (CO₂) gas or helium gas, or does own or may acquire, own or operate such well, or such well
started by others on land embraced in said State oil and gas leases, or carbon dioxide (CO₂) leases, or helium gas leases,
and on land patented by the United States of America to private individuals, and on land otherwise owned by private
individuals, the identification and location of said well being _____

(Here state exact legal subdivision by 40-acre tract or lot)

_____ Section _____, Township _____ (North) (South), Range _____ (East) (West), N.M.P.M.
_____ County, New Mexico.

NOW, THEREFORE, If the above bounden principal and surety or either of them or their successors or assigns, or any of them, shall
plug said well when dry or when abandoned in accordance with the rules, regulations, and orders of the Oil Conservation Division of New
Mexico in such way as to confine the oil, gas, and water in the strata in which they are found, and to prevent them from escaping into other
strata;

THEN, THEREFORE, This obligation shall be null and void; otherwise and in default of complete compliance with any and all of said
obligations, the same shall remain in full force and effect.

PRINCIPAL

Address
By _____
Signature

Title

(Note: Principal, if corporation, affix corporate seal here.)

SURETY

Address
By _____
Attorney-in-Fact

(Note: Corporate surety affix corporate seal here.)

ACKNOWLEDGEMENT FORM FOR NATURAL PERSONS

STATE OF _____)
COUNTY OF _____) ss.

On this _____ day of _____, 19_____, before me personally appeared _____, to me known to be the person (persons) described in and who executed the foregoing instrument and acknowledged that he (they) executed the same as his (their) free act and deed.

IN WITNESS WHEREOF, I have hereunto set my hand and seal on the day and year in this certificate first above written.

My Commission expires

Notary Public

ACKNOWLEDGEMENT FORM FOR CORPORATION

STATE OF _____)
COUNTY OF _____) ss.

On this _____ day of _____, 19_____, before me personally appeared _____, to me personally known who, being by me duly sworn, did say that he is _____ and that the foregoing instrument was signed and sealed on behalf of said corporation by authority of its board of directors, and acknowledged said instrument to be the free act and deed of said corporation.

IN WITNESS WHEREOF, I have hereunto set my hand and seal on the day and year in this certificate first above written.

My Commission expires

Notary Public

ACKNOWLEDGEMENT FORM FOR CORPORATE SURETY

STATE OF _____)
COUNTY OF _____) ss.

On this _____ day of _____, 19_____, before me appeared _____, to me personally known, who, being by me duly sworn, did say that he is _____ and that the foregoing instrument was signed and sealed on behalf of said corporation by authority of its board of directors, and acknowledged said instrument to be the free act and deed of said corporation.

IN WITNESS WHEREOF, I have hereunto set my hand and seal on the day and year in this certificate first above written.

My Commission expires

(Note: Corporate surety attach power of attorney.)

Notary Public

APPROVED BY:

OIL CONSERVATION DIVISION OF NEW MEXICO

By _____

D : _____

STATE OF NEW MEXICO
\$50,000.00 BLANKET PLUGGING BOND

BOND NO. _____

(For Use of Surety Company)

File with Oil Conservation Division, P.O.Box 2088, Santa Fe 87501

KNOW ALL MEN BY THESE PRESENTS:

That _____, (An individual) (a partnership) (a corporation organized in the State of _____, with its principal office in the city of _____, State of _____, and authorized to do business in the State of New Mexico), as PRINCIPAL, and _____, a corporation organized and existing under the laws of the State of _____, and authorized to do business in the State of New Mexico, as SURETY, are held firmly bound unto the State of New Mexico, for the use and benefit of the Oil Conservation Division of New Mexico pursuant to Section 65-3-11, New Mexico Statutes Annotated, 1953 Compilation, as amended, in the sum of Fifty Thousand Dollars (\$50,000.00) lawful money of the United States, for the payment of which, well and truly to be made, said PRINCIPAL and SURETY hereby bind themselves, their successors and assigns, jointly and severally, firmly by these presents.

The conditions of this obligation are such that:

WHEREAS, The above principal has heretofore or may hereafter enter into oil and gas leases, or carbon dioxide (CO₂) gas leases, or helium gas leases with the State of New Mexico; and

WHEREAS, The above principal has heretofore or may hereafter enter into oil and gas leases, or carbon dioxide (CO₂) gas leases, or helium gas leases on lands patented by the United States of America to private individuals, and on lands otherwise owned by private individuals; and

WHEREAS, The above principal, individually, or in association with one or more other parties, has commenced or may commence the drilling of wells to prospect for and produce oil or gas, or carbon dioxide (CO₂) gas or helium gas, or does own or may acquire, own or operate such well, or such wells started by others on land embraced in said State oil and gas leases, or carbon dioxide (CO₂) gas leases, or helium gas leases, and on land patented by the United States of America to private individuals, and on land otherwise owned by private individuals, the identification and location of said well being expressly waived by both principal and surety hereto.

NOW, THEREFORE, If the above bounden principal and surety or either of them or their successors or assigns, or any of them, shall plug all of said wells when dry or when abandoned in accordance with the rules, regulations, and orders of the Oil Conservation Division of New Mexico in such way as to confine the oil, gas, and water in the strata in which they are found, and to prevent them from escaping into other strata:

THEN, THEREFORE, This obligation shall be null and void; otherwise and in default of complete compliance with any and all of said obligations, the same shall remain in full force and effect.

PROVIDED, HOWEVER, That thirty (30) days after receipt by the Oil Conservation Division of New Mexico of written notice of cancellation from the surety, the obligation of the surety hereunder shall terminate as to property or wells acquired, drilled, or started after said thirty (30) day period but shall continue in effect, notwithstanding said notice, as to property or wells theretofore acquired, drilled or started.

PRINCIPAL

Address
By _____
Signature

Title

(Place Principal, if corporation, affix corporate seal here.)

SURETY

Address
By _____
Attorney-in-Fact

(Place Corporate surety affix corporate seal here.)

ACKNOWLEDGMENT FORM FOR NATURAL PERSONS

STATE OF _____)
COUNTY OF _____) ss.

On this _____ day of _____, 19_____, before me personally appeared _____, to me known to be the person (persons) described in and who executed the foregoing instrument and acknowledged that he (they) executed the same as his (their) free act and deed.

IN WITNESS WHEREOF, I have hereunto set my hand and seal on the day and year in this certificate first above written.

Notary Public
My Commission expires _____

ACKNOWLEDGMENT FORM FOR CORPORATION

STATE OF _____)
COUNTY OF _____) ss.

On this _____ day of _____, 19_____, before me personally appeared _____, to me personally known who, being by me duly sworn, did say that he is _____ of _____ and that the foregoing instrument was signed and sealed on behalf of said corporation by authority of its board of directors, and acknowledged said instrument to be the free act and deed of said corporation.

IN WITNESS WHEREOF, I have hereunto set my hand and seal on the day and year in this certificate first above written.

Notary Public
My Commission expires _____

ACKNOWLEDGMENT FORM FOR CORPORATE SURETY

STATE OF _____)
COUNTY OF _____) ss.

On this _____ day of _____, 19_____, before me appeared _____, to me personally known, who, being by me duly sworn, did say that he is _____ of _____ and that the foregoing instrument was signed and sealed on behalf of said corporation by authority of its board of directors, and acknowledged said instrument to be the free act and deed of said corporation.

IN WITNESS WHEREOF, I have hereunto set my hand and seal on the day and year in this certificate first above written.

Notary Public
My Commission expires _____
(Note: Corporate surety attach power of attorney.)

APPROVED BY:

OIL CONSERVATION DIVISION OF NEW MEXICO

By _____

Date _____

OIL CONSERVATION DIVISION

P. O. BOX 2068

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

SANTA FE, NEW MEXICO 87501

NOTIFICATION OF FIRE, BREAKS, SPILLS, LEAKS, AND BLOWOUTS

NAME OF OPERATOR					ADDRESS		
REPORT OF	FIRE	BREAK	SPILL	LEAK	BLOWOUT	OTHER*	
TYPE OF FACILITY	DRLG WELL	PROD WELL	TANK BTTY	PIPE LINE	GASO PLNT	OIL RFY	OTHER*
NAME OF FACILITY							
LOCATION OF FACILITY (QUARTER/QUARTER SECTION OR FOOTAGE DESCRIPTION)					SEC.	TWP.	RGE.
DISTANCE AND DIRECTION FROM NEAREST TOWN OR PROMINENT LANDMARK							
DATE AND HOUR OF OCCURENCE				DATE AND HOUR OF DISCOVERY			
WAS IMMEDIATE NOTICE GIVEN?	YES	NO	NOT REQUIRED	IF YES, TO WHOM			
BY WHOM				DATE AND HOUR			
TYPE OF FLUID LOST				QUANTITY OF LOSS		VOLUME RECOVERED	
DID ANY FLUIDS REACH A WATERCOURSE?	YES	NO	QUANTITY				
IF YES, DESCRIBE FULLY**							

DESCRIBE CAUSE OF PROBLEM AND REMEDIAL ACTION TAKEN**

DESCRIBE AREA AFFECTED AND CLEANUP ACTION TAKEN**

DESCRIPTION OF AREA	FARMING	GRAZING	URBAN	OTHER*			
SURFACE CONDITIONS	SANDY	SANDY LOAM	CLAY	ROCKY	WET	DRY	SNOW
DESCRIBE GENERAL CONDITIONS PREVAILING (TEMPERATURE, PRECIPITATION, ETC.)**							

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

SIGNED

TITLE

DATE

*SPECIFY

**ATTACH ADDITIONAL SHEETS IF NECESSARY

CLASSIFICATION	FACILITY	HOURS	QUARTER	HOURS	Name <u>B. W. Weaver</u>	Date <u>5-13-81</u>	Miles <u>136</u>	District <u>II</u>
					Time of Departure <u>8:00 a.m.</u>	Time of Return <u>5:00 p.m.</u>	Car No. <u>0F659</u>	
In the space below indicate the purpose of the trip and the duties performed, listing wells or leases visited and any action taken. Signature <u>B. W. Weaver</u>								

-	U	I	2	-	4 Wells	Sec. 18-18-31, Frostman Oil Corp. Shugart 18 Queen Unit Braden head survey, OK
-	U	I	2	-	3 Wells	Sec. 22-18-31, Gulf Oil Corp. Littlefield AB Fed. Braden head survey, OK
-	U	I	2	-	6 Wells	Sec. 36, 31, 1-T18 & T19-R30 & 31E, Clifford Cone Culwin Queen Unit, Braden head survey, OK
-	U	I	2	-	6 Wells	Sec. 10, 11, 15-T18S-R31E, Hudson & Hudson Shugart A, Shugart B, Braden head survey, OK

RECEIVED
JUN 05 1981
OIL CONSERVATION DIVISION
SANTA FE

<u>Mileage</u>	<u>Per Diem</u>	<u>Hours</u>
UIC <u>136</u>	UIC <u>9.00</u>	UIC <u>8</u>
RFA _____	RFA _____	RFA _____
Other _____	Other _____	Other _____

TYPE INSPECTION PERFORMED	INSPECTION CLASSIFICATION	NATURE OF SPECIFIC WELL OR FACILITY INSPECTED
H = Housekeeping P = Plugging C = Plugging Cleanup T = Well Test R = Repair/Workover F = Waterflow M = Mishap or Spill W = Water Contamination O = Other	U = Underground Injection Control - Any inspection of or related to injection project, facility, or well or resulting from injection into any well. (SND, 2ndry injection and production wells, water flows or pressure tests, surface injection equipment, plugging, etc.) R = Inspections relating to Reclamation Fund Activity O = Other - Inspections not related to injection or The Reclamation Fund	D = Drilling P = Production I = Injection C = Combined prod. inj. operations S = SND U = Underground Storage G = General Operation F = Facility or location M = Mishap

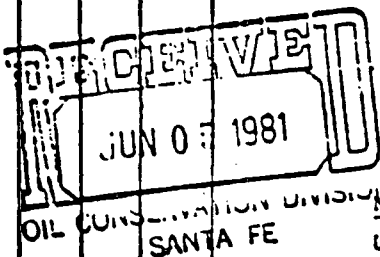
**NEW MEXICO OIL CONSERVATION COMMISSION
FIELD TRIP REPORT**

Name B. W. Weaver Date 5/26/81 Miles 162 District II
Time of Departure 9:00 a.m. Time of Return 5:30 p.m. Car No OF6598

In the space below indicate the purpose of the trip and the duties performed, listing wells or leases visited and any action taken.

Signature B. W. Weaver

CLASSIFICATION	FACILITY	HOURS	QUARTER HOURS		
0	P	2	-	14 Wells	Sec. 24,25,26-T18S-R30E, Hanson Oil Co. Benson, Ginsberg Fed. checked for leaks & spills, OK
0	P	-	2	2 Wells	Sec. 36-18S-R30E, Getty Oil Co. State BJ, State BK checked for signs, leaks & spills, OK
0	P	-	2	3 Wells	Sec. 31-18-31, Union Oil of Calif. Federal E, Federal F, checked for signs, leaks & spills, OK
U E	C	2	-	13 Wells	Sec. 25, 30-18S-30E, R. Q. Silverthorne, Keinath, Kenwood & Lanning, checked for leaks & spills. Lanning #3-I, 25-18-30, salt water running out cellar to pit. Lanning #4-P, 25-18-30, salt water running out cellar to pit water tank was running over to pit. Contacted company man, he will take care of it.
0	P	1	-	3 Wells	Sec. 31-18-30, Union Oil of Calif. Federal lease checked for leaks & spills, OK
0	P	-	2	2 Wells	Sec. 36-18-30, Getty Oil Co. State BJ, State BK Checked for signs, leaks & spills. OK
U	I	1	-	1 Well	J, 23-17-31, Getty Oil Co. Skelly Unit #71 Will move pulling unit on and start repairs.



Mileage	Per Diem	Hours
UIC <u>81</u>	UIC <u>4.50</u>	UIC <u>3</u>
RFA <u> </u>	RFA <u> </u>	RFA <u> </u>
Other <u>81</u>	Other <u>4.50</u>	Other <u>4 1/2</u>

TYPE INSPECTION PERFORMED	INSPECTION CLASSIFICATION	NATURE OF SPECIFIC WELL OR FACILITY INSPECTED
H = Housekeeping	U = Underground Injection Control - Any inspection of or related to injection project, facility, or well or resulting from injection into any well. (See 2nd dry injection and production wells, water flows or pressure tests, surface injection equipment, plugging, etc.)	D = Drilling
P = Plugging	R = Inspections relating to Reclamation Fund Activity	P = Production
C = Plugging Cleanup	O = Other - Inspections not related to injection or The Reclamation Fund	I = Injection
T = Well Test		C = Combined prod. inj. operations
M = Repair/Workover		S = SWU
F = Waterflow		U = Underground Storage
N = Mishap or Spill		G = General Operation
W = Water Contamination		F = Facility or location
O = Other		

FIELD TRIP SUMMARY REPORT

DECEMBER 1980

ENF - NUMBER OF ENFORCEMENT ACTIONS TAKEN IN THE FIELD

DISTRICT	NO. OF MEN IN FIELD	NO. OF FIELD DAYS	MILEAGE	HOURS	NO. OF INSPECTIONS		
					WELLS	OTHER	ENF
DISTRICT I							
UIC	4	50	4,113	367	435	37	5
RFA	0	0	0	0	0	0	0
OTHER	4	31	4,041	219	171	51	0
TOTAL	5	73	8,154	586	606	88	5
DISTRICT II							
UIC	4	31	1,950	125	110	1	4
RFA	0	0	0	0	0	0	0
OTHER	4	54	4,160	318 1/2	168	15	9
TOTAL	4	61	6,110	443 1/2	278	16	13
DISTRICT III							
UIC	1	3	204	11	14	0	0
RFA	1	2	102	6	4	0	0
OTHER	2	11	1,151	56	104	7	2
TOTAL	2	11	1,457	73	122	7	2
DISTRICT IV							
UIC	0	0	0	0	0	0	0
RFA	0	0	0	0	0	0	0
OTHER	1	6	1,287	70	16	0	0
DPF DUTY	1	6	0	51	0	0	0
TOTAL	1	6	1,287	121	16	0	0
STATE TOTAL							
UIC	9	84	6,267	503	559	38	9
RFA	1	2	102	6	4	0	0
OTHER	11	102	10,639	663 1/2	459	73	11
DPF DUTY	1	6	0	51	0	0	0
TOTAL	12	151	17,008	1,223 1/2	1,022	111	20

OIL CONSERVATION DIVISION

FIELD TRIP SUMMARY REPORT JANUARY THRU

DECEMBER 1980

ENF - NUMBER OF ENFORCEMENT ACTIONS TAKEN IN THE FIELD

DISTRICT	UIC	RFA	OTHER	TOTAL	NO. OF MEN IN FIELD	NO. OF FIELD DAYS	MILEAGE	HOURS	NO. OF INSPECTIONS			
									WELLS	OTHER	ENF	
DISTRICT I	7	0	7	7	7	719	62,170	5525	8441	156	23	
UIC	0	0	0	0	0	0	0	0	0	0	0	
RFA	357	357	357	357	357	39,016	2498	3325	373	59	59	
OTHER	996	996	996	996	996	101,186	8023	11766	529	82	82	
TOTAL	7	357	996	1360	1360	142,172	10521	15114	156	141	141	
DISTRICT II	5	0	5	5	5	366	31,105	1990	3330	122	45	
UIC	0	0	0	0	0	0	0	0	0	0	0	
RFA	508	508	508	508	508	44,742	3043	374	2314	127	55	
OTHER	729	729	729	729	729	75,847	5034	5644	249	100	100	
TOTAL	5	508	729	1237	1237	120,694	8077	8374	2553	227	155	
DISTRICT III	3	2	3	3	3	26	2,938	140	164	20	3	
UIC	45	45	45	45	45	1,391	243	152	49	15	0	
RFA	173	173	173	173	173	19,666	1098	172	2431	192	19	
OTHER	213	213	213	213	213	23,995	1482	2644	227	22	22	
TOTAL	3	26	45	74	74	26,934	140	164	20	3	3	
DISTRICT IV	2	0	2	2	2	30	1,852	223	0	26	0	
UIC	0	0	0	0	0	0	0	0	0	0	0	
RFA	134	134	134	134	134	29,520	1431	374	269	52	9	
OTHER	59	59	59	59	59	0	473	172	0	1	0	
TOTAL	3	154	193	347	347	31,372	2128	289	79	9	9	
STATE TOTAL	17	2	18	17	17	1163	98,065	7879	174	11935	324	71
UIC	2	2	2	2	2	45	1,391	243	172	49	15	0
RFA	1172	1172	1172	1172	1172	132,944	8072	8359	744	142	142	
OTHER	59	59	59	59	59	0	473	172	0	1	0	
TOTAL	18	2092	232,400	16668	174	20343	18044	213	213	213	213	

**NEW MEXICO OIL CONSERVATION DIVISION
CASING--BIWELLHEAD TEST --SHD OR INJ.**

OPERATOR: _____ Pool _____
 Lease _____ Well _____ Unit _____
 No. _____ Letter _____ Sec. _____ T _____ R _____

OBSERVED DATA

Test Date: _____ Injection Pressure Limited to: _____ psi

CASING STRING	Size	Set At	Cemented	Pressure	REMARKS
SURFACE	_____	_____	_____	_____	_____
INTERMEDIATE	_____	_____	_____	_____	_____
PRODUCTION	_____	_____	_____	_____	_____
TUBING	_____	_____	_____	_____	_____

IF WELL IS ON VACUUM:

Shut well in _____ minutes Tubing pressure _____ Casing: Pressure _____
 Vacuum _____
 Static _____

IF WELL IS INJECTING
UNDER PRESSURE:

Intermittently _____ Continuously _____
 Est.Hrs. per day
 running _____

Shut pump down _____ minutes Tubing Pressure _____ Casing Pressure _____

TEST OK _____ RECOMMEND RETEST _____ TEST INDICATES COMMUNICATIONS _____ REVIEWED BY _____

REMARKS: _____

OBSERVED DATA

Test Date: _____ Injection Pressure Limited to: _____ psi

CASING STRING	Size	Set At	Cemented	Pressure	REMARKS
SURFACE	_____	_____	_____	_____	_____
INTERMEDIATE	_____	_____	_____	_____	_____
PRODUCTION	_____	_____	_____	_____	_____
TUBING	_____	_____	_____	_____	_____

IF WELL IS ON VACUUM:

Shut well in _____ minutes Tubing pressure _____ Casing: Pressure _____
 Vacuum _____
 Static _____

IF WELL IS INJECTING
UNDER PRESSURE:

Intermittently _____ Continuously _____
 Est.Hrs. per day
 running _____

Shut pump down _____ minutes Tubing Pressure _____ Casing Pressure _____

TEST OK _____ RECOMMEND RETEST _____ TEST INDICATES COMMUNICATIONS _____ REVIEWED BY _____

REMARKS: _____

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION
AZTEC DISTRICT OFFICE

BRUCE KING
GOVERNOR

LARRY KEHOE
SECRETARY

BRADENHEAD & PACKER TEST REPORT FOR INJECTION & SWD WELLS

1000 RIO BRAZOS ROAD
AZTEC, NEW MEXICO 87410
(505) 334-6178

BRADENHEAD TEST

Date of Test _____ Operator _____

Lease Name & Well NO _____ Location U _____ Sec _____ Twp _____ Rng _____

Tbg Inj. Pressure _____ Tbg SI Pressure _____ Csg. Pressure _____

Intermediate Pres _____ Bradenhead Pres _____ Maximum Inj Pressure _____

If Bradenhead has pressure, flow to atmosphere for 30 minutes and record casing pressure at 5 minute intervals.

CASING PRESSURE

BRADENHEAD FLOWED

5 MIN _____

Steady Flow _____

10 MIN _____

Surges _____

15 MIN _____

Down to Nothing _____

20 MIN _____

Nothing _____

25 MIN _____

Gas _____

30 MIN _____

Gas & Water _____

REMARKS: _____

PACKER TEST

If casing has pressure, flow to atmosphere for 30 minutes and record tubing pressure at 5 minute intervals.

TUBING PRESSURE

REMARKS: _____

5 MIN _____

10 MIN _____

15 MIN _____

BY: _____

20 MIN _____

POSITION _____

25 MIN _____

NMOCD

30 MIN _____

WITNESS _____

**UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY**

(Other instructions on reverse side)

Budget Bureau No. 42-R1423.

30-015-21341**APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK**

5. LEASE DESIGNATION AND SERIAL NO.

NM 01159

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

FAF - Federal

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Morrow Wildcat

11. SEC., T., R., M., OR R.L.
AND SURVEY OR AREA

Sec. 4, T-18-S, R-30-E

12. COUNTY OR PARISH

Eddy

13. STATE

New Mexico

1. TYPE OF WORK

DRILL ☒DEEPEN ☐PLUG BACK ☐

2. TYPE OF WELL

OIL
WELL ☐CAR
WELL ☒

OTHER

SINGLE
ZONE ☐MULTIPLE
ZONE ☐

3. NAME OF OPERATOR

Belco Petroleum Corporation

4. ADDRESS OF OPERATOR

2000 Wilco Building, Midland, Texas 79701

AUG 23 1974

5. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.)

At surface

1980' FSL & 660' FWL, Section 4, T-18-S, R-30-E C. C.

At proposed prod. zone

ARTEZIA, OFFICE

SAME

6. DISTANCE IN MILES AND DIRECTION FROM NEAREST TOWN OR POST OFFICE*

2-1/2 mi. South of Loco Hills, New Mexico

7. DISTANCE FROM PROPOSED*

LOCATION TO NEAREST
PROPERTY OR LEASE LINE, FT.
(Also to nearest drilg. unit line, if any)

18. NO. OF ACRES IN LEASE

320

17. NO. OF ACRES ASSIGNED
TO THIS WELL

320

8. DISTANCE FROM PROPOSED LOCATION*
TO NEAREST WELL, DRILLING, COMPLETED,
OR APPLIED FOR, ON THIS LEASE, FT.

19. PROPOSED DEPTH

11,700'

20. ROTARY OR CABLE TOOLS

Rotary

9. ELEVATIONS (Show whether DF, RT, GR, etc.)

3555' GL

22. APPROX. DATE WORK WILL START*

8/23/74

PROPOSED CASING AND CEMENTING PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	QUANTITY OF CEMENT
17-1/4"	13-3/8"	54.5#	350'	Circulate
12-1/4"	9-5/8"	40#	2000'	To Surface
8-1/2"	5-1/2"	17#	11,700'	300 sx.

It is proposed to drill straight hole to a TD of 11,700' and test as a Morrow gas well.

Mud Program: 0-350' spud mud, 350-2000' brine water, 2000-8000' fresh water, 8000'-TD KCl water with chemicals and weighting material as needed.

BOP Program: Hydril will be installed on 13-3/8" casing and tested to 2000 psi. Pipe and blind rams will be added to Hydril on 9-5/8" casing and tested to 5000 psi.

ABOVE SPACE DESCRIBE PROPOSED PROGRAM: If proposal is to deepen or plug back, give data on present productive zone and proposed new productive zone. If proposal is to drill or deepen directionally, give pertinent data on subsurface locations and measured and true vertical depths. Give blowout tester program, if any.

SIGNED Allen J. Owens TITLE District EngineerDATE August 9, 1974

(This space for use of State office use)

SUBJECT TO ATTACHED DEEP WELL CONTROL

REQUIREMENTS DATED JUN 22 1973

APPROVED AUG 22 1974
H. L. BEEKMANN
ACTING DISTRICT ENGINEER

DATE

THIS APPROVAL IS RESCINDED IF OPERATIONS
ARE NOT COMMENCED WITHIN 3 MONTHS.
NOV 22 1974

*See Instructions On Reverse Side

RECEIVED
AUG 12 1974
U.S. GEOLOGICAL SURVEY
ARTEZIA, NEW MEXICO

All distances must be from the outer boundaries of the Section

CO PETROLEUM CORPORATION			FAF FEDERAL		Well No. 1
Section 4	Township 18 SOUTH	Range 30 EAST	County EDDY		
Well Location of well:					
1980	feet from the SOUTH	Line and 660	feet from the WEST	Line	
Producing Formation	Prod.		Deduction - Acres: 320		

1. Outline the acreage dedicated to the subject well by colored pencil or hatchure marks on the plat below.
2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).
3. If more than one lease of different ownership is dedicated to the well, have the interests of all owners been consolidated by communitization, unitization, force-pooling, etc?

☒ Yes ☐ No If answer is "yes," type of consolidation Farmout

If answer is "no," list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if necessary.)

No allowable will be assigned to the well until all interests have been consolidated (by communitization, unitization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interests, has been approved by the Commission.

Franklin, Aston & Fair et al

CERTIFICATION

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

Allen J. Owings

Name
Allen J. Owings

Position
District Engineer

Company
Belco Petroleum Corporation

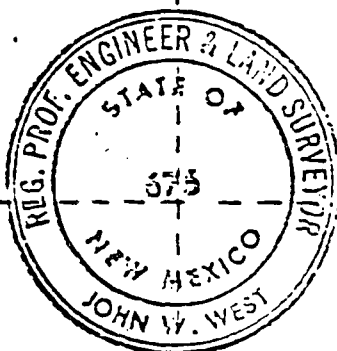
Date
August 8, 1974

RECEIVED
AUG 12 1974
U.S. GEOLOGICAL SURVEY
ARTESIA
NEW MEXICO
I hereby certify that the well location shown on this plat was obtained from field notes of a geological survey made by me or under my direct supervision, and that the same is true and correct to the best of my knowledge and belief.

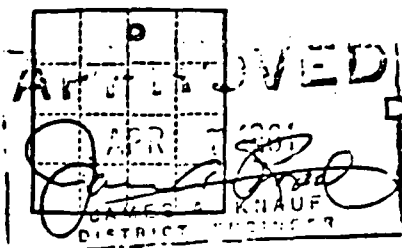
Date Surveyed
AUGUST 8, 1974

Registered Professional Engineer and/or Land Surveyor

John W. West
Certificate No. 676



660'
1980'



(SUBMIT IN TRIPLICATE)

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYLand Office Las CrucesLease No. 067343Unit D

APR 10 1961

M. O. C. C.
ARTESIA, OFFICE

SUNDRY NOTICES AND REPORTS ON WELLS

NOTICE OF INTENTION TO DRILL.....	<input checked="" type="checkbox"/>	SUBSEQUENT REPORT OF WATER SHUT-OFF.....	
NOTICE OF INTENTION TO CHANGE PLANS.....		SUBSEQUENT REPORT OF SHOOTING OR ACIDIZING.....	
NOTICE OF INTENTION TO TEST WATER SHUT-OFF.....		SUBSEQUENT REPORT OF ALTERING CASING.....	
NOTICE OF INTENTION TO RE-DRILL OR REPAIR WELL.....		SUBSEQUENT REPORT OF RE-DRILLING OR REPAIR.....	
NOTICE OF INTENTION TO SHOOT OR ACIDIZE.....		SUBSEQUENT REPORT OF ABANDONMENT.....	
NOTICE OF INTENTION TO PULL OR ALTER CASING.....		SUPPLEMENTARY WELL HISTORY.....	
NOTICE OF INTENTION TO ABANDON WELL.....			

(INDICATE ABOVE BY CHECK MARK NATURE OF REPORT, NOTICE, OR OTHER DATA)

April 6, 1961Well No. 3 is located 660 ft. from N line and 1930 ft. from E line of sec. 23N2 23

(1/4 Sec. and Sec. No.)

12S

(Twp.)

29E

(Range)

TRIPM

(Meridian)

Turkey Track

(Field)

Eddy

(County or Subdivision)

New Mexico

(State or Territory)

The elevation of the derrick floor above sea level is 3464 ft.

DETAILS OF WORK

(State names of and expected depths to objective sands; show sizes, weights, and lengths of proposed casings; indicate mudlogging jobs, cementing points, and all other important proposed work.)

Propose to drill with rotary tool to approximately 2100 feet to test the Queen formation. Intend to drill 9" hole and set 7" OD 17# or 20# SH seamless casing at approximately 350 feet, and cement with 50 sax regular cement with 2% gel. Drill 6 1/4" hole/total depth and run 4 1/4" OD 9.6# new ~~seamless~~ casing on oil string and cement with 100 sax regular cement or enough cement to cover all zones of interest. Intend to abide by the rules and regulations of the department.

APR 6 1961

U. S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO

I understand that this plan of work must receive approval in writing by the Geological Survey before operations may be commenced.

Company Yates Drilling CompanyAddress 309 Carper BuildingArtesia, New MexicoBy Hugh W. GarryTitle Secretary

NEW MEXICO OIL CONSERVATION COMMISSION
WELL LOCATION AND ACREAGE DEDICATION PLAT

FORM C-128
 Revised 10/57

SEE INSTRUCTIONS FOR COMPLETING THIS FORM ON THE REVERSE SIDE

APR 10 1961

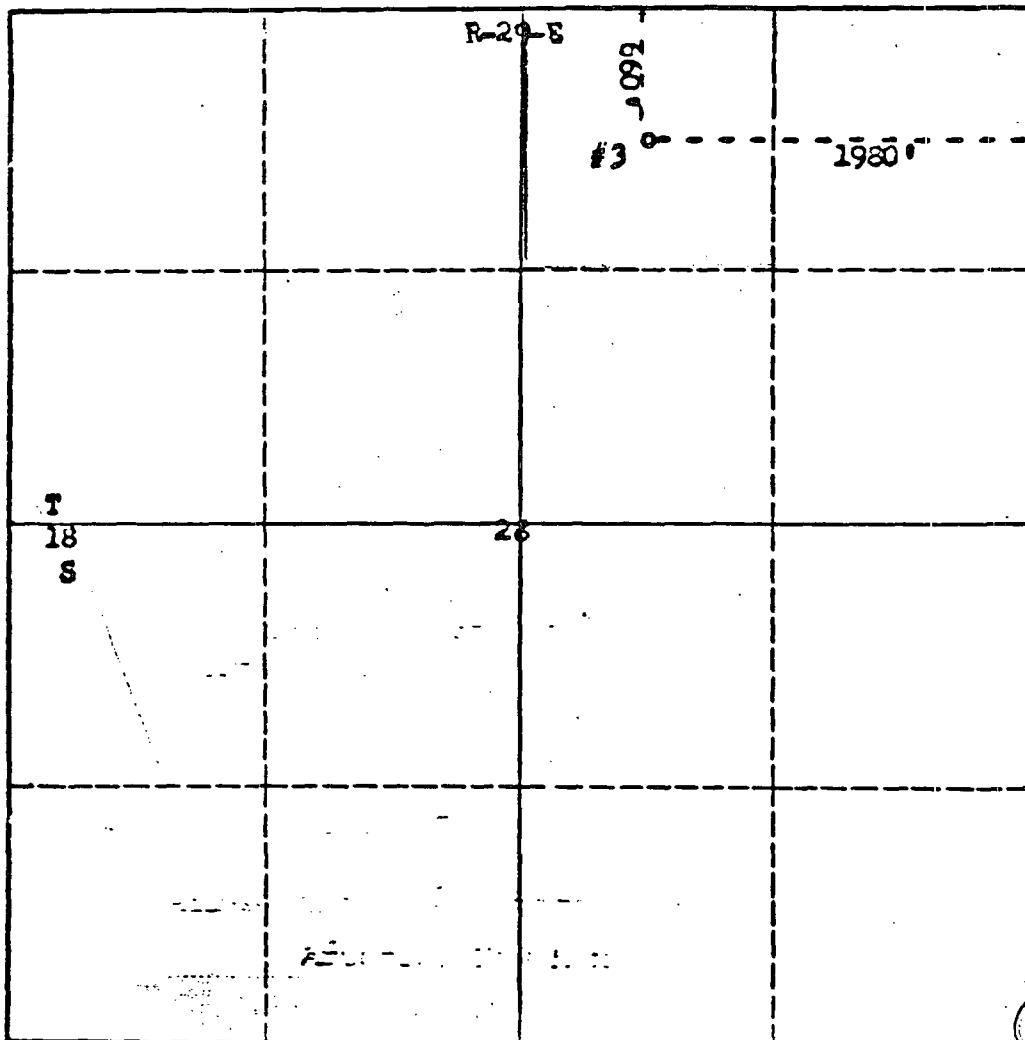
SECTION A

Operator Yates Drilling Co.			Lease Federal DY		Well No. O. C. 5
Unit Letter B	Section 28	Township T-19-S	Range R-20-E	County Early	ARTESIA, OFFICE
Actual Footage Location of Well: 660 feet from the North line and 1940 feet from the East line					
Ground Level Elev. 3452	Producing Formation Queen	Pool Turkey Track	Dedicated Acreage: 40 Acres		

1. Is the Operator the only owner in the dedicated acreage outlined on the plat below? YES ☒ NO ____ . ("Owner" means the person who has the right to drill into and to produce from any pool and to appropriate the production either for himself or for himself and another. (65-3-29 (e) NMSA 1935 Comp.)
2. If the answer to question one is "no," have the interests of all the owners been consolidated by communitization agreement or otherwise? YES ____ NO ____ . If answer is "yes," Type of Consolidation ____
3. If the answer to question two is "no," list all the owners and their respective interests below:

Owner	Land Description
	RECEIVED APR 6 1961

SECTION B



CERTIFICATION

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

Name <i>Donald Barry</i>
Position Secretary
Company Yates Drilling Co.
Date April 6, 1961

I hereby certify that the well location shown on the plat in SECTION B 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 knowledge and belief.

Date Surveyed 4-5-61
Registered Professional Engineer and/or Land Surveyor <i>James A. Brown</i>
Certificate No.

0 330 660 990 1320 1650 1980 2310 2640 2970 3300 3600

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other in-
structions on
reverse side)C-105
Form approved
Budget Bureau No. 42-R355.1

WELL COMPLETION OR RECOMPLETION REPORT AND LOG*

1A. TYPE OF WELL: OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> DRY <input type="checkbox"/> Other _____				5. LEASE DESIGNATION AND SERIAL NO. NM 020498 - Dakota	
1B. TYPE OF COMPLETION: NEW WELL <input checked="" type="checkbox"/> WORK OVER <input type="checkbox"/> DEEP-EN <input type="checkbox"/> PLUG BACK <input type="checkbox"/> DIFF. CESS. <input type="checkbox"/> Other _____				6. IF INDIAN, ALLOTTEE OR TRIBE NAME _____	
2. NAME OF OPERATOR Marathon Oil Company				7. UNIT AGREEMENT NAME _____	
3. ADDRESS OF OPERATOR P. O. Box 2659; Casper, WY 82602				8. FARM OR LEASE NAME Ohio Gov't	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 1,685' FSL & 955' FWL 1,610' 880' At top prod. interval reported below At total depth				9. WELL NO. 2E	
14. PERMIT NO. 30-045-24334				DATE ISSUED 7-15-80	
15. DATE SPUDDED 8-7-80		16. DATE T.D. REACHED 8-25-80		17. DATE COMPL. (Ready to prod.) 5-14-81	
18. ELEVATIONS (DF, REB, ET, GR, ETC.)* 5,625' GL, 5,635' KB		19. ELEV. CASINGHEAD -		20. FIELD AND POOL, OR WILDCAT Basin Dakota	
21. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA Sec. 15, T28N, R11W		22. COUNTY OR PARISH San Juan		23. STATE New Mexico	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* Graneros - Dakota		25. WAS DIRECTIONAL SURVEY MADE NO		26. TYPE ELECTRIC AND OTHER LOGS RUN CDL/CN/GR, DIFL, CBL/GR	
27. CASING RECORD (Report all strings set in well)					
CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	AMOUNT PULLED	
9-5/8"	36#	562.50'	12-1/4"	NONE	
7"	20#	1,958.14'	8-3/4"	NONE	
4-1/2"	11.6#, 10.5#	6,405.92'	6-1/4"	NONE	
28. LINER RECORD					
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	
		NONE			
29. TUBING RECORD					
SIZE	DEPTH SET (MD)	PACKER SET (MD)			
2-3/8"	6,041'	-			
30. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.					
DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED			
Dakota 6,260'-6,268' Isolated		SWF - Emission			
Graneros 6,070'-6,076'		See Reverse Side			
All 2 spf, .34" dia.					
31. PERFORATION RECORD (Interval, size and number)					
Dakota 6,260'-6,268' Isolated					
Graneros 6,070'-6,076'					
All 2 spf, .34" dia.					
32. DATE FIRST PRODUCTION 5-14-81					
PRODUCTION METHOD Flowing SANTA FE					
WELL STATUS (Producing or shut-in)					
DATE OF TEST 5-14-81					
HOURS TESTED 24		CHOKE SIZE 1/2"		PROD'N. FOR TEST PERIOD	
FLOW. TUBING PRESS. 205 psi		CASING PRESSURE 365 psi		CALCULATED 24-HOUR RATE	
OIL—BSL. 1		GAS—MCF. 161		WATER—BSL. 2	
OIL GRAVITY-API (CORR.) Oil 56.6°		GAS C			
33. LIST OF ATTACHMENTS None					
34. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records					
SIGNED <u>E. Nelson</u> TITLE District Operations Manager DATE May 19, 1981					

*(See Instructions and Spaces for Additional Data on Reverse Side)

or both, pursuant to applicable Federal and/or State laws and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State office. See instructions on items 22 and 24, and 33, below regarding separate reports for separate completions. If not filed prior to the time this summary record is submitted, copies of all currently available logs (drillers, geologists, sample and core analysis, all types electric, etc.), formation and pressure tests, and directional surveys, should be attached hereto, to the extent required by applicable Federal and/or State laws and regulations. All attachments should be listed on this form, see item 35.

Item 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

Item 18: Indicate which elevation is used as reference (where not otherwise shown) for depth measurements given in other spaces on this form and in any attachments. Items 22 and 24: If this well is completed for separate production from more than one interval zone (multiple completion), so state in item 22, and in item 24 show the producing interval, or intervals, top(s), bottom(s) and name(s) (if any) for only the interval reported in item 33. Submit a separate report (page) on this form, adequately identified, for each additional interval to be separately produced, showing the additional data pertinent to such interval.

Item 29: "Kicks Cement": Attached supplemental records for this well should show the details of any multiple stage cementing and the location of the cementing tool.

Item 33: Submit a separate completion report on this form for each interval to be separately produced. (See instruction for items 22 and 24 above.)

37. SUMMARY OF POROUS ZONES: SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF; CORED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL, TESTED, CUSHION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES				38. GEOLOGIC MARKERS		
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH	TRUE VERT. DEPTH
Lewis Shale	surface			Lewis Shale	surface	
Cliffhouse	casing	3,060'		Cliffhouse	casing	
Menefee	3,060'	3,202'		Menefee	3,060'	
Point Lookout	3,202'	3,904'		Point Lookout	3,202'	
Mancos	3,904'	4,206'		Mancos	3,904'	
Gallup	4,206'	5,117'		Gallup	4,206'	
Basal Niobrara	5,117'	5,399'		Basal Niobrara	5,117'	
Sanastee	5,399'	5,550'		Sanastee	5,399'	
Greenhorn	5,550'	5,854'		Greenhorn	5,550'	
Graneros	5,854'	5,958'		Graneros	5,854'	
Dakota	5,958'	6,081'		Dakota	5,958'	
Morrison	6,081'	6,274'		Morrison	6,081'	
	6,274'	TD			6,274'	

