

PNRM 0506934733

C-103 Received 3-7-05

DHC No. Assigned 3-11-2005

Order Number

H08-0109

API Number

30-025-06696

Operator

J.R. Cone

County

Lea

Order Date

Well Name

Anderson

Number

001

I

UL

21

Sec

Location

21S

T (+Dir)

37E

R (+Dir)

Pool 1

86440

Tubb Oil+Gas (Pro Gas)

Oil %

0%

Gas %

8%

Pool 2

19190

Drinkard

100%

92%

Pool 3

Pool 4

Comments:

Work completed effective \_\_\_\_\_  
Work cancelled effective \_\_\_\_\_  
Supplement \_\_\_\_\_

Posted to  
RBDM &  
3-11-2005

B

CMD :  
OG6IPRD

ONGARD  
INQUIRE PRODUCTION BY POOL/WELL

07/01/05 15:35:46  
OGONM -TQWZ  
Page No: 1

OGRID Identifier : 11384 J R CONE  
Pool Identifier : 86440 TUBB OIL & GAS (PRO GAS)  
API Well No : 30 25 6696 Report Period - From : 01 1940 To : 06 2005

API Well No	Property Name	Prodn. MM/YY	Days Prod	Production Volumes Gas	Oil	Water	Well Stat
30 25 6696	ANDERSON	02 94		2279			F
30 25 6696	ANDERSON	04 94	30	2232			F
30 25 6696	ANDERSON	05 94	31	2449			F
30 25 6696	ANDERSON	06 94	30	2252			F
30 25 6696	ANDERSON	07 94	31	2793			F
30 25 6696	ANDERSON	08 94	31	2735			F
30 25 6696	ANDERSON	09 94	30	2721			F

Reporting Period Total (Gas, Oil) :

M0002: This is the first page

PF01 HELP    PF02            PF03 EXIT    PF04 GoTo    PF05            PF06 CONFIRM  
PF07 BKWD    PF08 FWD        PF09            PF10 NXTPOOL PF11 NXTOGD    PF12

DOWNHOLE COMMINGLE CALCULATIONS:

30-025-06696  
HOB-0109

OPERATOR: J. R. Cone

PROPERTY NAME: Anderson

WNULSTR: 1-I, 21-21-37

	SECTION I:		ALLOWABLE AMOUNT	
86440	POOL NO. 1	<u>Tubb Oil + Gas (Pro Gas)</u>	<u>999</u>	<u>99999</u> MCF <u>9999</u>
19190	POOL NO. 2	<u>Drinkard</u>	<u>142</u>	<u>852</u> MCF <u>6000</u>
	POOL NO. 3	_____	_____	_____ MCF
	POOL NO. 4	_____	_____	_____ MCF
		POOL TOTALS	<u>142</u>	<u>852</u>

	SECTION II:		Oil	Gas
	POOL NO. 1	<u>Tubb Oil + Gas (Pro Gas)</u>	0%	8%
	POOL NO. 2	<u>Drinkard</u>	100% X 142 = 142	92%
	POOL NO. 3	_____		
	POOL NO. 4	_____		

	<u>OIL</u>	<u>GAS</u>
SECTION III:	<u>142 ÷ 100% = 142</u>	_____
SECTION IV:	<u>142 X 0% = 0</u>	_____
	<u>142 X 100% = 142</u>	_____
	_____	_____
	_____	_____

Submit 3 Copies To Appropriate District Office  
District I  
1625 N. French Dr., Hobbs, NM 88240  
District II  
1301 W. Grand Ave., 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

Form C-103  
May 27, 2004

OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

WELL API NO. 30-025-06696

5. Indicate Type of Lease  
STATE  FEE

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name  
ANDERSON

8. Well Number 1

9. OGRID Number  
011384

10. Pool name or Wildcat  
TUBB OIL & GAS & DRINKARD OIL

SUNDRY NOTICES AND REPORTS ON WELLS  
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well: Oil Well  Gas Well  Other

2. Name of Operator  
J. R. CONE

3. Address of Operator  
P. O. BOX 10217 LUBBOCK, TX 79408

4. Well Location  
Unit Letter I : 1980 feet from the SOUTH line and 660 feet from the EAST line  
Section 21 Township 21-S Range 37-E NMPM County LEA

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

Pit or Below-grade Tank Application  or Closure

Pit type \_\_\_\_\_ Depth to Groundwater \_\_\_\_\_ Distance from nearest fresh water well \_\_\_\_\_ Distance from nearest surface water \_\_\_\_\_

Pit Liner Thickness: \_\_\_\_\_ mil Below-Grade Tank: Volume \_\_\_\_\_ bbls; Construction Material \_\_\_\_\_

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

<b>NOTICE OF INTENTION TO:</b> PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/>	<b>SUBSEQUENT REPORT OF:</b> REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/>
OTHER: DOWNHOLE COMMINGLE <input type="checkbox"/>	OTHER: <input type="checkbox"/>

13. 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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

R-11363  
Propose to pull tubing and baker model R packer @6030. Run retrievable BP and test casing. Run bit with collars and drill CIBP @6480. Push model DA packer @6599 to bottom or attempt to remove and clean out to bottom. Run production tubing, rods, pump and return to production.

SEE ATTACHED C-107A

Allocation determined using subtraction method.

Commingling will not decrease the value of production.



DHC Order No. HOB-0109

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines , a general permit  or an (attached) alternative OCD-approved plan .

SIGNATURE James R Cone Jr TITLE \_\_\_\_\_ DATE 3/07/05

Type or print name  
For State Use Only

E-mail address: cone@nts-online.net Telephone No. 806/763-8211

APPROVED BY: [Signature] TITLE PETROLEUM ENGINEER DATE \_\_\_\_\_

MAR 11 2005

District I  
1625 N. French Drive, Hobbs, NM 88240

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-107A  
Revised June 10, 2003

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

Oil Conservation Division  
1220 South St. Francis Dr.  
Santa Fe, New Mexico 87505

APPLICATION TYPE  
Single Well

District III  
1000 Rio Brazos Road, Aztec, NM 87410

Establish Pre-Approved Pools  
EXISTING WELLBORE

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

APPLICATION FOR DOWNHOLE COMMINGLING

Yes  No

Operator J.R. CONE Address P.O. BOX 10217 LUBBOCK, TX 79408

Lease ANDERSON Well No. 121-21S-37E Unit Letter-Section-Township-Range LEA County

OGRID No. 011384 Property Code            API No. 30-025-06696 Lease Type:  Federal  State  Fee

DATA ELEMENT	UPPER ZONE	INTERMEDIATE ZONE	LOWER ZONE
Pool Name		<u>&lt;85440&gt;</u> TUBB GAS	<u>&lt;19100&gt;</u> DRINKARD
Pool Code			
Top and Bottom of Pay Section (Perforated or Open-Hole Interval)		6087-6190	6510-6628
Method of Production (Flowing or Artificial Lift)			
Bottomhole Pressure (Note: Pressure data will not be required if the bottom perforation in the lower zone is within 150% of the depth of the top perforation in the upper zone)			
Oil Gravity or Gas BTU (Degree API or Gas BTU)			
Producing, Shut-In or New Zone			
Date and Oil/Gas/Water Rates of Last Production. (Note: For new zones with no production history, applicant shall be required to attach production estimates and supporting data.)	Date: <u>          </u> Rates: <u>          </u>	Date: <u>1-10-05</u> Rates: <u>14 MCF</u>	Date: <u>6-04-74</u> Rates: <u>4 bbls oil</u> <u>172 MCF .5 water</u>
Fixed Allocation Percentage (Note: If allocation is based upon something other than current or past production, supporting data or explanation will be required.)	Oil <u>          </u> % Gas <u>          </u> %	Oil <u>          </u> % Gas <u>          </u> %	Oil <u>          </u> % Gas <u>          </u> %

ADDITIONAL DATA

Are all working, royalty and overriding royalty interests identical in all commingled zones? Yes  No   
If not, have all working, royalty and overriding royalty interest owners been notified by certified mail? Yes  No

Are all produced fluids from all commingled zones compatible with each other? Yes  No

Will commingling decrease the value of production? Yes  No

If this well is on, or communitized with, state or federal lands, has either the Commissioner of Public Lands or the United States Bureau of Land Management been notified in writing of this application? Yes  No

NMOCD Reference Case No. applicable to this well: DH437 & DHC 350

Attachments:

- C-102 for each zone to be commingled showing its spacing unit and acreage dedication.
- Production curve for each zone for at least one year. (If not available, attach explanation.)
- For zones with no production history, estimated production rates and supporting data.
- Data to support allocation method or formula.
- Notification list of working, royalty and overriding royalty interests for uncommon interest cases.
- Any additional statements, data or documents required to support commingling.

PRE-APPROVED POOLS

If application is to establish Pre-Approved Pools, the following additional information will be required:

- List of other orders approving downhole commingling within the proposed Pre-Approved Pools
- List of all operators within the proposed Pre-Approved Pools
- Proof that all operators within the proposed Pre-Approved Pools were provided notice of this application.
- Bottomhole pressure data.

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

SIGNATURE James R Cone Jr TITLE            DATE 2-25-05

TYPE OR PRINT NAME JAMES R CONE JR TELEPHONE NO. (806) 763 8211

E-MAIL ADDRESS cone@nts-online.net

Submit 3 Copies To Appropriate District Office  
District I  
1625 N. French Dr., Hobbs, NM 88240  
District II  
11 W. Grand Ave., 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

OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

WELL API NO. 30-025-06696
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name ANDERSON
8. Well Number 1
9. OGRID Number 011384
10. Pool name or Wildcat TUBB OIL&GAS & DRINKARD OIL

**SUNDRY NOTICES AND REPORTS ON WELLS**  
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well: Oil Well  Gas Well  Other

2. Name of Operator  
J. R. CONE

3. Address of Operator  
P. O. BOX 10217 LUBBOCK, TEXAS 79408

4. Well Location  
Unit Letter I : 1980 feet from the SOUTH line and 660 feet from the EAST line  
Section 21 Township 21-S Range 37-E NMPM County LEA

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

Pit or Below-grade Tank Application  or Closure

Pit type \_\_\_\_\_ Depth to Groundwater \_\_\_\_\_ Distance from nearest fresh water well \_\_\_\_\_ Distance from nearest surface water \_\_\_\_\_

Pit Liner Thickness: \_\_\_\_\_ mil Below-Grade Tank: Volume \_\_\_\_\_ bbls; Construction Material \_\_\_\_\_

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

<b>NOTICE OF INTENTION TO:</b>		<b>SUBSEQUENT REPORT OF:</b>	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
OTHER: DOWNHOLE COMMINGLE <input type="checkbox"/>		OTHER: <input type="checkbox"/>	

13. 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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

Allocation formula for downhole commingled production

	<u>OIL</u>	<u>GAS</u>
TUBB OIL & GAS	0%	08%
DRINKARD OIL	100%	92%

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCDC guidelines , a general permit  or an (attached) alternative OCD-approved plan .

SIGNATURE James R. Cone, Jr. TITLE \_\_\_\_\_ DATE 3-9-05

Type or print name James R. Cone, Jr. E-mail address: cone@nts-online.net Telephone No. 806-763-8211  
**For State Use Only**

APPROVED BY: \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

NEW MEXICO  
OIL CONSERVATION COMMISSION

1 Plat

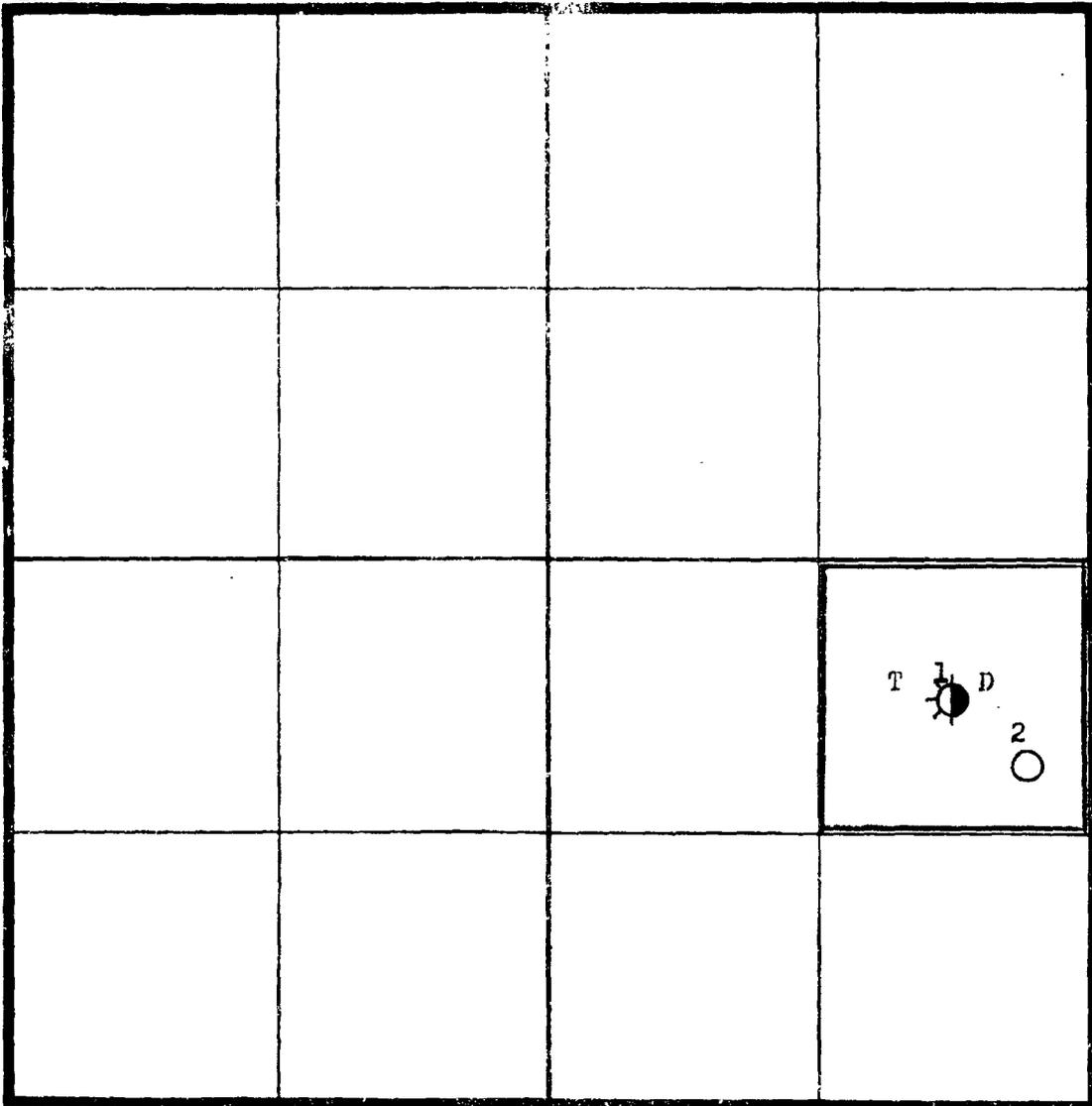
Date October 17, 1953

S. E. Cone Andersen 1  
Operator Lease Well No.

Name of Producing Formation Tubb Pool Tubb Gas

No. Acres Dedicated to the Well 40 NSP-499

SECTION 21 TOWNSHIP - 21 - S RANGE - 37 - E



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

Name W. Storm W. Storm  
Position Engineer  
Representing S. E. Cone  
Address First National Building  
Lubbock, Texas

(over)

FACSIMILE TRANSMISSION COVER SHEET

DATE 3-9-05 TIME \_\_\_\_\_

TO P11 Conservation Division

FAX# 505-393-0720 ATTN Nelda

\_\_\_\_\_ FAX# (806) 763-8917

NUMBER OF PAGES (including this sheet) 2

Please call us immediately if the transmission is not received complete or anything is not clearly legible.

MESSAGE Nelda - I hope this is correct, Thank you for all your help.

Jane Cone  
(signature) 806-763-8211

District I  
1625 N. French Dr., Hobbs, NM 88240  
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District IV  
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
Energy, Minerals & Natural Resources Department  
OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

Form C-102  
Revised June 10, 2003  
Submit to Appropriate District Office  
State Lease - 4 Copies  
Fee Lease - 3 Copies

AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

<sup>1</sup> API Number 30-025-06696		<sup>2</sup> Pool Code 19190		<sup>3</sup> Pool Name <del>Tabb Oil &amp; Gas</del> and Drinkard Oil	
<sup>4</sup> Property Code 02988		Anderson		<sup>5</sup> Property Name	
<sup>7</sup> OGRID No. 011384		J.R. Cone		<sup>8</sup> Operator Name	
				<sup>6</sup> Well Number 1	
				<sup>9</sup> Elevation 3430 gr	

<sup>10</sup> Surface Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
I	21	21S	37E		1980	South	660	East	Lea

<sup>11</sup> 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

<sup>12</sup> Dedicated Acres 40	<sup>13</sup> Joint or Infill Y	<sup>14</sup> Consolidation Code	<sup>15</sup> 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

16				<p><sup>17</sup> OPERATOR CERTIFICATION</p> <p><i>I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.</i></p> <p><i>Jim Cone</i> Signature</p> <p>Jim Cone Printed Name</p> <p>Title and E-mail Address</p> <p>Date 3-21-05</p>	
				<p><sup>18</sup> SURVEYOR CERTIFICATION</p> <p><i>I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief.</i></p> <p>Date of Survey</p> <p>Signature and Seal of Professional Surveyor</p>	
				<p>660</p>	
				<p>RBO</p> <p>Certificate Number</p>	