

PNAM 0700449013

C-103 Received 1-4-2007
DHC No. Assigned 1-4-2007

Order Number	API Number	Operator	County			
HOB-0179	30-025-35333	Capataz Operating Inc.	Lea			
Order Date	Well Name	Number	Location			
	Redtag	001	J UL	2 Sec	20S T (+Dir)	38E R (+Dir)
		Oil %	Gas %			
Pool 1	78760	House Tubb	91%	75%		
Pool 2	33250	House Drinkard	9%	25%		
Pool 3						
Pool 4						
<div>Comments: Work completed effective _____ Work cancelled effective _____ Supplement _____</div>						

Posted to
RB DMD
1-4-2007

②

30-025-35333
HOB-0179

DOWNHOLE COMMINGLE CALCULATIONS:

OPERATOR: Capataz Operating Inc.

PROPERTY NAME: Red tag

WNULSTR: 1-U, 2-20-38

78760 SECTION I:
POOL NO. 1 House Tubb

ALLOWABLE AMOUNT
142 284 MCF 2000

33250 POOL NO. 2 House Drinkard

142 284 MCF 2000

POOL NO. 3 _____

_____ MCF

POOL NO. 4 _____

_____ MCF

POOL TOTALS 284 568

SECTION II:
POOL NO. 1 House Tubb

OIL Gas
91% X 284 = 258.44 75%

POOL NO. 2 House Drinkard

9% 25%

POOL NO. 3 _____

POOL NO. 4 _____

OIL

GAS

SECTION III:
 $142 \div 91\% = 156.043 (157)$

SECTION IV:
 $157 \times 91\% = 142.87 (143)$
 $157 \times 9\% = 14.13 (14)$

Submit 3 Copies To Appropriate District Office

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103

May 27, 2004

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

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

WELL API NO.	30-025-35333
5. Indicate Type of Lease	STATE <input checked="" type="checkbox"/> HFE <input type="checkbox"/>
6. State Oil & Gas Lease No.	
7. Lease Name or Unit Agreement Name RED TAG	
8. Well Number	1
9. OGRID Number	33659
10. Pool name or V/i dcat	House; Tubb, H Drinkard,

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

Capataz Operating, Inc.

3. Address of Operator

P.O. Box 10549,
Midland, TX 79702

4. Well Location

Unit Letter J : 2460 feet from the South line and 2310 feet from the East line
Section 2 Township 20S Range 38E NMPM County Lea

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
3566' GR

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ P AND A ☐
CASING/CEMENT JOB ☐

OTHER: ☐OTHER: DHC Tubb, Drinkard ☒

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.

Pool Names:

House; Tubb (78760), House; Drinkard (33250)

TUBB 6746-50,65-67 & 6775-77' 1 jspf

DRINKARD 7003-08 & 7050-56' 1 jspf

The allocation method will be as follows: Test 11 BO x 16 MCF x 110 BW

Oil Alloc% Gas Alloc% Wtr Alloc%

Tubb	10	91	12	75	65	59
Drinkard	1	9	4	25	45	41

11	100	16	100	110	100
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Downhole commingling will not reduce the value of the pools.

Ownership is the same for each of these pools.

DHC Order No. H08-0179

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 NMOC guidelines ☐, a general permit ☐ or an (attached) alternative (CD-a) approved plan ☐.

SIGNATURE

TITLE Agent

DATE 07/6/2006

Type or print name H. Scott Davis
for State Use Only

E-mail address: Capataz1@sbcglobal.net

Telephone No. (432)620-8820

APPROVED BY:

Chris Williams

DISTRICT SUPERVISOR/GENERAL MANAGER

DATE

JAN 04 2007

Conditions of Approval (if any):

DISTRICT I
P. O. Box 1980
Hobbs, NM 88241-1980

State of New Mexico
En . Minerals, and Natural Resources I rtment

Form C-102
Revised 02-10-94
Instructions on back

DISTRICT II
P. O. Drawer DD
Artesia, NM 88211-0719

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

Submit to the Appropriate
District Office
State Lease - 4 copies
Fee Lease - 3 copies

☐ AMENDED REPORT

DISTRICT III
1000 Rio Brazos Rd.
Aztec, NM 87410

DISTRICT IV
P. O. Box 2088
Santa Fe, NM 87507-2088

WELL LOCATION AND ACREAGE DEDICATION PLAT

1 API Number 30-025-35333		2 Pool Code 78760		3 Pool Name House ; Tubb		
4 Property Code 27082		5 Property Name REDTAG			6 Well Number 1	
7 OORID No. 03659		8 Operator Name CAPATAZ OPERATING INCORPORATED			9 Elevation 3586'	

" SURFACE LOCATION

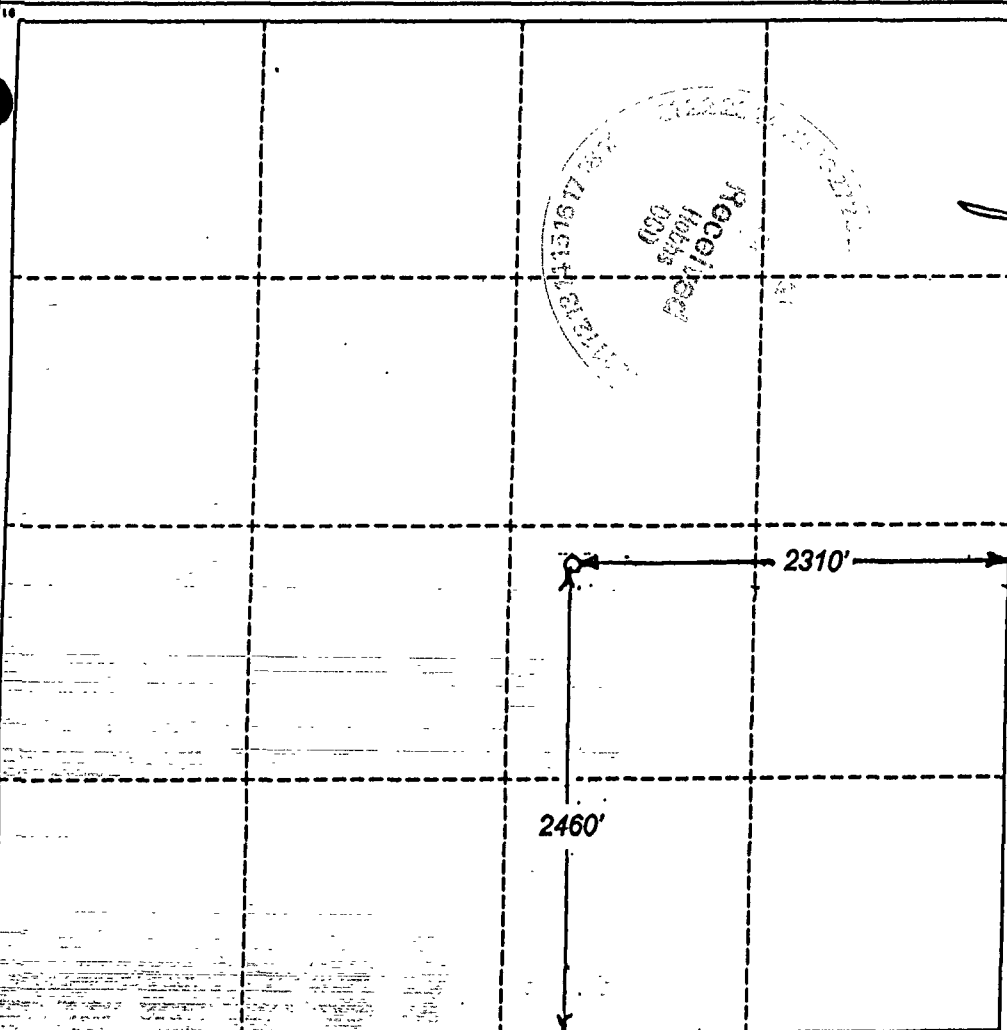
UL or lot no. J	Section 2	Township 20 SOUTH	Range 38 EAST, N.M.P.M.	Lot Ida	Feet from the 2460'	North/South line SOUTH	Feet from the 2310'	East/West line EAST	County LEA
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"BOTTOM HOLE LOCATION IF DIFFERENT FROM SURFACE

UL or lot no.	Section	Township	Range	Lot Ida	Feet from the	North/South line	Feet from the	East/West line	County
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12 Dedicated Acres	13 Joint or Infill	14 Consolidation Code	15 Order No.
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NO ALLOWABLE WELL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN
CONSOLIDATED OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION

			
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OPERATOR CERTIFICATION

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

Signature

Printed Name

H Scott Davis

Title

Agent

Date

12-04-00

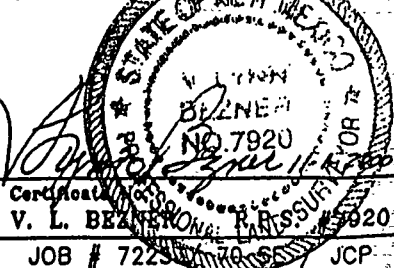
SURVEYOR CERTIFICATION

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.

Date of Survey

OCTOBER 20, 2000

Signature and Seal
Professional Surveyor

	
Certification	Professional Surveyor
V. L. BEAZNER	NO 7920
JOB # 7225-1-70-507 JCP	

DISTRICT I
P. O. Box 1980
Hobbs, NM 88241-1980

State of New Mexico
En , Minerals, and Natural Resources I rtment

Form C-102
Revised 02-10-94
Instructions on back

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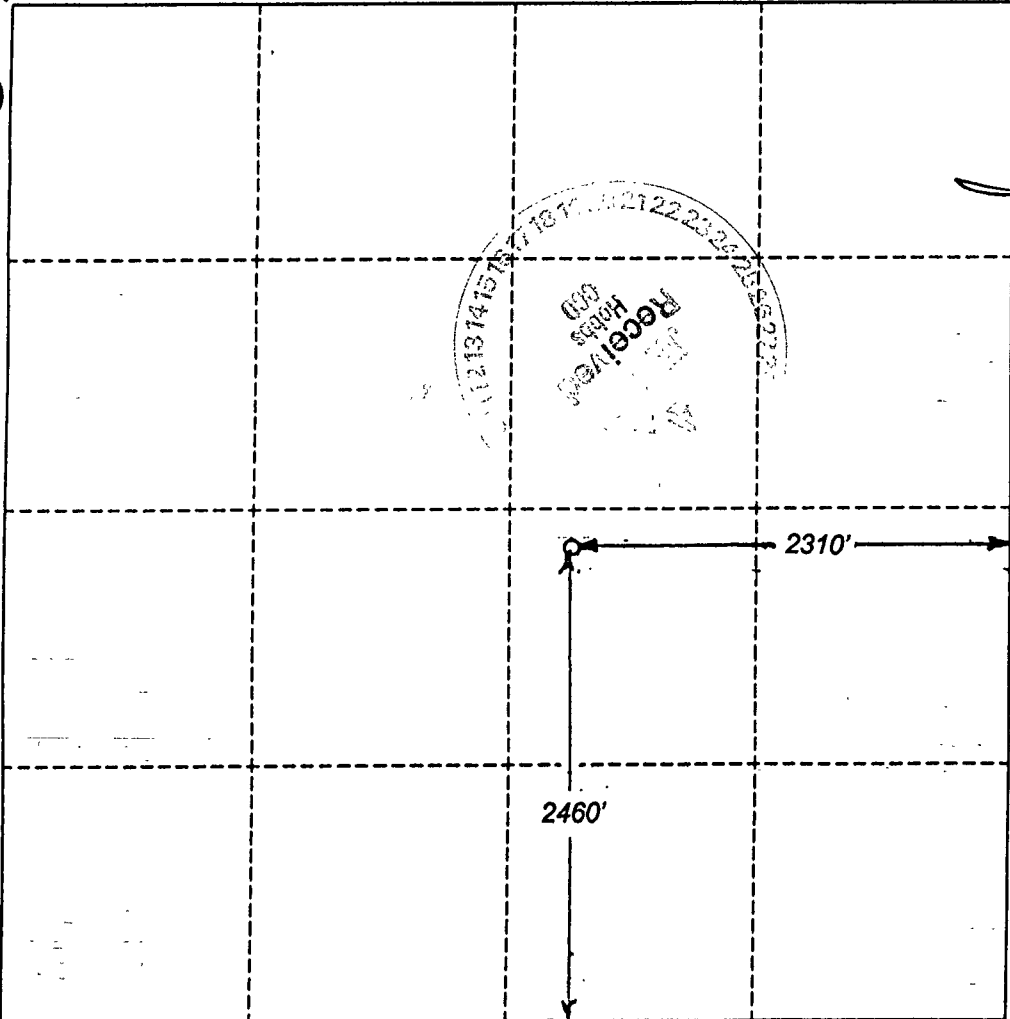
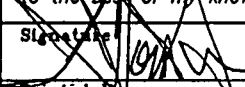
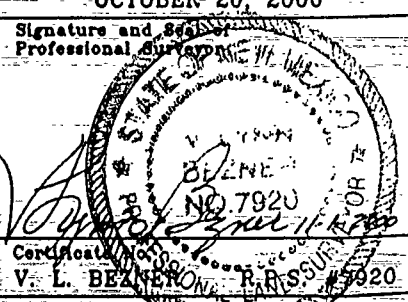
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DISTRICT III
000 Rio Brazos Rd.
Aztec, NM 87410

☐ AMENDED REPORT

DISTRICT IV
P. O. Box 2088
Santa Fe, NM 87507-2088

WELL LOCATION AND ACREAGE DEDICATION PLAT

1 API Number 30-025-35333		2 Pool Code 33250		3 Pool Name House Drinkard					
4 Property Code 27082		5 Property Name REDTAG						6 Well Number 1	
7 OGRID No. 03659		8 Operator Name CAPATAZ OPERATING INCORPORATED						9 Elevation 3566'	
10 SURFACE LOCATION									
UL or lot no. J	Section 2	Township 20 SOUTH	Range 38 EAST, N.M.P.M.	Lot Ida	Feet from the 2460'	North/South line SOUTH	Feet from the 2310'	East/West line EAST	County LEA
11 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
12 Dedicated Acres		13 Joint or Infill		14 Consolidation Code		15 Order No.			
NO ALLOWABLE WELL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION									
						OPERATOR CERTIFICATION I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief. Signature:  Printed Name: H Scott Davis Title: Agent Date: 12-04-00			
						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.			
						Date of Survey OCTOBER 20, 2000			
						Signature and Seal of Professional Surveyor 			
						Certificate No. 7920 JOB # 7225 70-SS JCP			