

TAHOE ENERGY, INC.



3909 W. INDUSTRIAL AVE. • MIDLAND, TEXAS 79703
PHONE (915) 697-4173 • FAX (915) 697-4213

February 12, 1996

Bureau of Land Management
P. O. Box 27115
Santa Fe, New Mexico 87502

Re: Lease No. NM-19450
Federal Lease
Lea County, New Mexico

Dear Sir,

Tahoe Energy, Inc. assigned the referenced lease to Adams Oil & Gas Producers effective October 1, 1992. Mr. Stanley Adams, president of Adams Oil & Gas Producers, was given the necessary paperwork to file with the BLM to change the operator and owner of the referenced lease signed by both companies representatives at the time of the sale.

Tahoe Energy tried several times to contact Mr. Adams about filing the documents with the BLM. The few times we were able to talk with Mr. Adams he assured me that he had filed all the necessary documents with BLM.

At the present time we are unable to locate Mr. Adams to obtain his signature on the enclosed Assignment of Record Title Interest, BLM form 3000-3. Tahoe Energy is submitting the enclosed form 3000-3 signed by Mr. Kenneth A. Freeman, president of Tahoe Energy, Inc., to be made part a of BLM records to show that Tahoe Energy, Inc. no longer has the record title to the referenced lease.

Thank you,

Carroll Addy
Carroll Addy

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB NO. 1004-0034
Expires: July 31, 1995

**ASSIGNMENT OF RECORD TITLE INTEREST IN A
LEASE FOR OIL AND GAS OR GEOTHERMAL RESOURCES**

Mineral Leasing Act of 1920 (30 U.S.C. 181 et seq.)
Act for Acquired Lands of 1947 (30 U.S.C. 351-359)
Geothermal Steam Act of 1970 (30 U.S.C. 1001-1025)
Department of the Interior Appropriations Act, Fiscal Year 1981 (42 U.S.C. 6508)

Lease Serial No. NM-19450
Lease Effective Date (Anniversary Date)
New Serial No.

Type or print plainly in ink and sign in ink.

PART A: ASSIGNMENT

1. Assignee* Adams Oil & Gas Producers
Street P. O. Box 433
City, State, ZIP Code Wink, Texas 79747

*If more than one assignee, check here and list the name(s) and address(es) of all additional assignees on the reverse of this form or on a separate attached sheet of paper.

This record title assignment is for: (Check one) Oil and Gas Lease, or Geothermal Lease

Interest conveyed: (Check one or both, as appropriate) Record Title, Overriding Royalty, payment out of production or other similar interests or payments

2. This assignment conveys the following interest:

Land Description <small>Additional space on reverse, if needed. Do not submit documents or agreements other than this form; such documents or agreements shall only be referenced herein.</small>	Percent of Interest			Percent of Overriding Royalty or Similar Interests	
	Owned	Conveyed	Retained	Reserved	Previously reserved or conveyed
	a	b	c	d	e
Township 23 South, Range 33 East, N.M.P.M. Section 17: W/2 NW/4 Lea County, New Mexico	100%	100%	0		

FOR BLM USE ONLY—DO NOT WRITE BELOW THIS LINE

UNITED STATES OF AMERICA

This assignment is approved solely for administrative purposes. Approval does not warrant that either party to this assignment holds legal or equitable title to this lease.

Assignment approved for above described lands;

Assignment approved for attached land description

Assignment approved effective _____

Assignment approved for land description indicated on reverse of this form.

By _____

PART B: CERTIFICATION AND REQUEST FOR APPROVAL

1. The Assignor certifies as owner of an interest in the above designated lease that he/she hereby assigns to the above assignee(s) the rights specified above.

2. Assignee certifies as follows: (a) Assignee is a citizen of the United States; an association of such citizens; a municipality; or a corporation organized under the laws of the United States or of any State or territory thereof. For the assignment of NPL-A leases, assignee is a citizen, national, or resident alien of the United States or association of such citizens, nationals, resident aliens or private, public or municipal corporations; (b) Assignee is not considered a minor under the laws of the State in which the lands covered by this assignment are located; (c) Assignee's chargeable interests, direct and indirect, in each public domain and acquired lands separately in the same State, do not exceed 246,080 acres in oil and gas leases (of which up to 200,000 acres may be in oil and gas options), or 300,000 acres in leases in each leasing District in Alaska of which up to 200,000 acres may be in options, if this is an oil and gas lease issued in accordance with the Mineral Leasing Act of 1920, or 51,200 acres in any one State if this is a geothermal lease; (d) All parties holding an interest in the assignment are otherwise in compliance with the regulations (43 CFR Group 3100 or 3200) and the authorizing Acts; (e) Assignee is in compliance with reclamation requirements for all Federal oil and gas lease holdings as required by sec. 17(g) of the Mineral Leasing Act; and (f) Assignee is not in violation of sec. 41 of the Mineral Leasing Act.

3. Assignee's signature to this assignment constitutes acceptance of all applicable terms, conditions, stipulations and restrictions pertaining to the lease described herein.

For geothermal assignments, an overriding royalty may not be less than one-fourth (1/4) of one percent of the value of output, nor greater than 50 percent of the rate of royalty due to the United States when this assignment is added to all previously created overriding royalties (43 CFR 3241).

I certify that the statements made herein by me are true, complete, and correct to the best of my knowledge and belief and are made in good faith.

Executed this 5 day of January, 1996. Executed this _____ day of _____, 19____.

Tahoe Oil & Cattle Company

Name of Assignor as shown on current lease

Please type or print

Assignor *J.A. Freeman* (Signature)

Assignee _____ (Signature)

Attorney-in-fact _____ (Signature) or _____ (Signature)

3909 W. Industrial Ave. (Signature)

(Assignor's Address)

Midland, Texas 79703 (City) (State) (Zip Code)

 (Signature)
 Attorney-in-fact

Public reporting burden for this form is estimated to average 30 minutes per response, including the time for reviewing instructions, gathering and maintaining data, and completing and reviewing the form. Direct comments regarding the burden estimate or any other aspect of this form to U.S. Department of the Interior, Bureau of Land Management, (Alternate) Bureau Clearance Officer, (WO-771), 1849 C Street, N.W., Washington, D.C. 20240, and the Office of Management and Budget, Paperwork Reduction Project (1004-0034), Washington, D.C. 20503.

Title 18 U.S.C. Sec. 101 makes it a crime for any person knowingly and willfully to make to any Department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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Township 23 South, Range 33 East Section 17: W/2 NW/4 Lea County, New Mexico	100%	100%	0		

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3. Assignee's signature to this assignment constitutes acceptance of all applicable terms, conditions, stipulations and restrictions pertaining to the lease described herein. For geothermal assignments, an overriding royalty may not be less than one-fourth (1/4) of one percent of the value of output, nor greater than 50 percent of the rate of royalty due to the United States when this assignment is added to all previously created overriding royalties (43 CFR 3241).

I certify that the statements made herein by me are true, complete, and correct to the best of my knowledge and belief and are made in good faith.

Executed this 5 day of January, 19 96. Executed this _____ day of _____, 19 ____.

Name of Assignor as shown on current lease: Tahoe Oil & Cattle Company

Please type or print

Assignor *J. O. Freeman* (Signature)

Assignee _____ (Signature)

Attorney-in-fact _____ (Signature) or Assignee _____ (Signature)

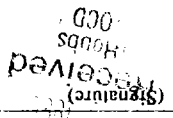
3909 W. Industrial Ave. (Signature)

(Assignor's Address)

Midland, Texas 79703 (City, State, Zip Code)

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Assignment approved for attached land description

Assignment approved effective _____

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Executed this 5 day of January, 1996

Executed this _____ day of _____, 19__

Name of Assignor as shown on current lease: **Tahoe Oil & Cattle Company**

Please type or print

Assignor: *J. A. Freeman* (Signature)

Assignee: _____ (Signature)

Attorney-in-fact: _____ (Signature)

or _____ (Signature)

(Signature)

3909 W. Industrial Ave.

(Assignor's Address)

Midland, Texas 79703

(City) (State) (Zip Code)

Received
1996
Tobbs

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P 087 126 404

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED
NOT FOR INTERNATIONAL MAIL

(See Reverse)

Sent to	BUM
Street and No.	P.O. Box 27115
P.O. State and ZIP Code	Santa Fe, N.M. 87502
Postage	S
Additional Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt showing whom and Date Delivered	
Return Receipt showing to whom, Date, and Address of Delivery	
TOTAL Postage and Fees	S
Signature or Date	Brian Adams

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. Addressee's Address
2. Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Bureau of Land Management
P.O. Box 27115
Santa Fe, N.M.
87502

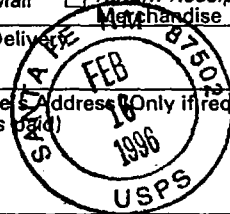
4a. Article Number

126-404

4b. Service Type

- Registered Insured
 Certified COD
 Express Mail Return Receipt for Merchandise

7. Date of Delivery



5. Signature (Addressee)

Tony Vigil - 908

6. Signature (Agent)

Tony Vigil - 908

8. Addressee's Address (Only if requested and fee is paid)

Thank you for using Return Receipt Service.

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

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

**REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS**

I.

Operator Adobe Oil & Gas Producers	Well API No. 30-025-28667
Address P. O. Box 433, Wink, Texas 79747	
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)	
New Well <input type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Operator <input checked="" type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
If change of operator give name and address of previous operator Tahoe Energy, Inc.	

II. DESCRIPTION OF WELL AND LEASE

Lease Name Federal	Well No. 2	Pool Name, Including Formation Cruz Delaware	Kind of Lease State, Federal or Fee Federal	Lease No. NM-19450
Location Unit Letter <u>D</u> : <u>660</u> Feet From The <u>North</u> Line and <u>990</u> Feet From The <u>West</u> Line Section <u>17</u> Township <u>23-S</u> Range <u>33-E</u> , <u>NMPM</u> , <u>Lea</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Conoco, Inc. Surface Transportation	Address (Give address to which approved copy of this form is to be sent) P. O. Box 2587, Hobbs, NM 88240			
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> GPM Gas Corp.	Address (Give address to which approved copy of this form is to be sent) 1040 Plaza Office Bldg., Bartlesville, OK 74004			
If well produces oil or liquids, give location of tanks.	Unit E	Sec. 17	Twp. 23-S	Rge. 33-E
Is gas actually connected?		When ?		

If this production is commingled with that from any other lease or pool, give commingling order number: _____

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded	Date Compl. Ready to Prod.		Total Depth			P.B.T.D.		
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay			Tubing Depth		
Perforations		Depth Casing Shoe						

TUBING, CASING AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

V. TEST DATA AND REQUEST FOR ALLOWABLE

OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours.)

Date First New Oil Run To Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas- MCF

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilo., back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. OPERATOR CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Stanley Adams
Signature
Stanley Adams

Printed Name
10-22-92

Date
Date

Owner
Title 2583
(915) 586-2867
Telephone No.

OIL CONSERVATION DIVISION
OCT 29 '92

Date Approved _____

By **ORIGINAL SIGNED BY JERRY SEXTON**
DISTRICT I SUPERVISOR

Title _____

- INSTRUCTIONS:** This form is to be filed in compliance with Rule 1104
- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
 - 2) All sections of this form must be filled out for allowable on new and recompleted wells.
 - 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
 - 4) Separate Form C-104 must be filed for each pool in multiply completed wells.

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

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

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

**REQUEST FOR ALLOWABLE AND AUTHORIZATION
 TO TRANSPORT OIL AND NATURAL GAS**

I.

Operator Adams Oil & Gas Producers	Well API No. 30-025-28667
Address 901 East Dallas, Kermit, Tx. 79745	
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)	
New Well <input type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Operator <input checked="" type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
If change of operator give name and address of previous operator Tahoe Energy, Inc. Adobe Oil & Gas Producers	

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Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> GMP Gas Corp.	Address (Give address to which approved copy of this form is to be sent) 1040 Plaza Office Bldg., Bartlesville, Ok. 74004			
If well produces oil or liquids, give location of tanks.	Unit E	Sec. 17	Twp. 23-S	Rge. 33-E
Is gas actually connected? <input type="checkbox"/> When? _____				

If this production is commingled with that from any other lease or pool, give commingling order number: _____

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Date Spudded	Date Compl. Ready to Prod.		Total Depth			P.B.T.D.		
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Perforations						Depth Casing Shoe		

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HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

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Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas- MCF

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pico, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. OPERATOR CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Signature Stanley Adams
 Printed Name Stanley Adams
 Title _____
 Date _____ Telephone No. 915-586-3397

OIL CONSERVATION DIVISION
 NOV 24 '92

Date Approved _____
 By ORIGINAL SIGNED BY JERRY SEXTON
 DISTRICT I SUPERVISOR
 Title _____

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UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R355.5.

5. LEASE DESIGNATION AND SERIAL NO.
NM-19450

6. IF INDIAN, ALLOTTEE OR TRIBE NAME
N/A

7. UNIT AGREEMENT NAME
N/A

8. FARM OR LEASE NAME
Federal

9. WELL NO.
2

10. FIELD AND POOL, OR WILDCAT
Cruz Delaware

11. SEC. T. R. M., OR BLOCK AND SURVEY OR AREA
Sec. 17, T23S, R33E

12. COUNTY OR PARISH
Lea

13. STATE
New Mexico

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL: OIL WELL GAS WELL DRY Other _____

b. TYPE OF COMPLETION: NEW WELL WORK OVER DEEP-EN PLUG BACK DIFF. RESVR. Other _____

2. NAME OF OPERATOR
Corquest Exploration Company

3. ADDRESS OF OPERATOR
4201 FM 1960 West, Suite 500, Houston, TX 77068

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*
At surface 660' FNL & 990' FWL (NW NW)
At top prod. interval reported below Same
At total depth Same

14. PERMIT NO. _____ DATE ISSUED 3/27/84

15. DATE SPUNDED 4-14-84 16. DATE T.D. REACHED 4-27-84 17. DATE COMPL. (Ready to prod.) 6-04-84 18. ELEVATIONS (DF, REB, RT, GR, ETC.)* 3713' (RMB) GR 19. ELEV. CASINGHEAD _____

20. TOTAL DEPTH, MD & TVD 5300' 21. PLUG, BACK T.D., MD & TVD 5216' 22. IF MULTIPLE COMPL., HOW MANY* N/A 23. INTERVALS DRILLED BY _____ ROTARY TOOLS X CABLE TOOLS _____

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 5124' - 5130' ; 5168' - 5166' 25. WAS DIRECTIONAL SURVEY MADE No

26. TYPE ELECTRIC AND OTHER LOGS RUN Sonic, CNL/FDC, Gamma Ray, Dual Laterolog 27. WAS WELL CORED Yes

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

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
16'		40'			
9-5/8"	36# K-55	500'	12-1/4"	250 sx Cl "C"	
5-1/2"	17# J-55	5300'	7-7/8"	775 sx Howco Lite & 250 sx Cl "C"	

29. LINER RECORD				30. TUBING RECORD			
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					2-3/8"	5151'	

31. PERFORATION RECORD (Interval, size and number)
5124 - 5130'; 8 SPF, .50" diameter
5148 - 5166'; 8 SPF, .50" diameter

32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED

33. PRODUCTION

DATE FIRST PRODUCTION	PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)	WELL STATUS (Producing or shut-in)					
6-14-84	Pumping - 320-305-100 Lufkin w/EA30 HP Ajax	Producing					
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
6-10-84	24	N/A	→	33	10	135	303
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)	
0	20#	→	33	10	135	42.1°	

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Vented, used for fuel TEST WITNESSED BY Warren Thompson

35. LIST OF ATTACHMENTS
Logs, inclination survey

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records

SIGNED Kay Beasley TITLE Permits Administrator NEW MEXICO DATE 6-21-84

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

INSTRUCTIONS

General: This form is designed for submitting a complete and correct well completion report and log on all types of lands and leases to either a Federal agency or a State agency, 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 as 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 35, 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: "Sacks 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

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.
Ramsey Sand	5133'	5193'	Slightly calcareous sand, density 2.61 - 2.67, porosity 18.7 - 26.1, water saturation 56.2 - 86.3, oil saturation 2.7 - 21.0.

38. GEOLOGIC MARKERS

NAME	TOP	
	MEAS. DEPTH	TRUE VERT. DEPTH
Rustler	1322'	
Castile	3718'	
Lamar Lime	5084'	
Delaware Sand	5146'	
Olds Sand	5248'	
Ford Shale	5238'	

RECEIVED
JUN 29 1984
O.C.O.
HOBBS OFFICE

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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 Form 9-331-C for such proposals.)

1. oil well gas well other

2. NAME OF OPERATOR
Conquest Exploration Co.

3. ADDRESS OF OPERATOR Houston, Texas
4201 FM 1960 West, Suite 500, / 77068

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 660' FNL & 990' FWL (NW NW)
AT TOP PROD. INTERVAL: Same
AT TOTAL DEPTH: Same

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF	<input type="checkbox"/>		<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>		<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>		<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>		<input type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>		<input type="checkbox"/>
MULTIPLE COMPLETE	<input type="checkbox"/>		<input type="checkbox"/>
CHANGE ZONES	<input type="checkbox"/>		<input type="checkbox"/>
ABANDON*	<input type="checkbox"/>		<input type="checkbox"/>
(other) Set 5-1/2" casing			

5. LEASE
NM - 19450

6. IF INDIAN, ALLOTTEE OR TRIBE NAME
N/A

7. UNIT AGREEMENT NAME
N/A

8. FARM OR LEASE NAME
Federal

9. WELL NO.
2

10. FIELD OR WILDCAT NAME
Cruz Delaware

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 17, T23S, R33E

12. COUNTY OR PARISH
Lea

13. STATE
New Mexico

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
3713 GR

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

17. 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.)*

DATE	HOLE SIZE	CSG. SIZE	GRADE/WT.	SETTING DEPTH	QTY. OF CEMENT
4-29-84	7-7/8"	5-1/2"	17# J-55 STC	5300'	775 sx Howco Lite + 250 sx "C"

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED [Signature] TITLE Dirg. Superintendent DATE 5/7/84

ACCEPTED FOR RECORD
(This space for Federal or State office use)

APPROVED BY [Signature] TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: MAY 14 1984

Carlsbad, NEW MEXICO *See Instructions on Reverse Side

N. M. OIL CONSP. COMMISSION
P. O. BOX 1930
TOMBES, NEW MEXICO 88240

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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 Form 9-331-C for such proposals.)

1. oil well gas well other

2. NAME OF OPERATOR
Conquest Exploration Company

3. ADDRESS OF OPERATOR
4201 FM 1960 W, Suite 500, Houston, TX 77068

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 660' FNL & 990' FWL (NW NW)
AT TOP PROD. INTERVAL: Same
AT TOTAL DEPTH: Same

5. LEASE
NM-19450

6. IF INDIAN, ALLOTTEE OR TRIBE NAME
N/A

7. UNIT AGREEMENT NAME
N/A

8. FARM OR LEASE NAME
Federal

9. WELL NO.
2

10. FIELD OR WILDCAT NAME
Cruz Delaware

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 17T23S, R33E

12. COUNTY OR PARISH
Lea

13. STATE
New Mexico

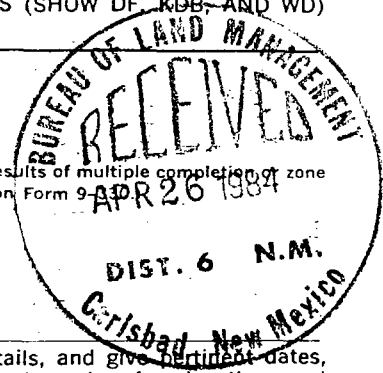
14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
3713 GR

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF	<input type="checkbox"/>		<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>		<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>		<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>		<input type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>		<input type="checkbox"/>
MULTIPLE COMPLETE	<input type="checkbox"/>		<input type="checkbox"/>
CHANGE ZONES	<input type="checkbox"/>		<input type="checkbox"/>
ABANDON*	<input type="checkbox"/>		<input type="checkbox"/>
(other) <u>Set 9 5/8" surface casing</u>			

(NOTE: Report results of multiple completion or zone change on Form 9-331-C)



17. 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.)*

Spud Date: 4-14-84

Date	Casing Size	Grade/Wt.	Hole Size	Depth Set	Amount/ Type Cmt.	TOC	Csg. Test
4-13-84	16" conductor			40'			
4-15-84	9 5/8"	36#K-55 STC	12 1/4"	500'	*250 sx cl "C"	Surface	500#

*Circulated to surface

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED J. C. Cochran TITLE Drlg. Superintendent DATE 4-19-84

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE **ACCEPTED FOR RECORD**

CONDITIONS OF APPROVAL, IF ANY:

RECEIVED
APR 19 1984
D.D.O.
FORWARDED 2/28/84

APR 27 1984

*See Instructions on Reverse Side

N. M. OIL & GAS COMMISSION
P. O. BOX 1980
HOBBS, NEW MEXICO 88240
UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other instructions on reverse side)

30-025-28667
Form approved.
Budget Bureau No. 1004-0136
Expires August 31, 1985

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. TYPE OF WORK
 DRILL DEEPEN PLUG BACK

b. TYPE OF WELL
 OIL WELL GAS WELL OTHER
 SINGLE ZONE MULTIPLE ZONE

2. NAME OF OPERATOR
 Conquest Exploration Company

3. ADDRESS OF OPERATOR
 4201 F.M. 1960 West, Suite 500, Houston, Texas 77068

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.)*
 At surface
 660' FNL & 990' FWL (NW NW)
 At proposed prod. zone
 Same

14. DISTANCE IN MILES AND DIRECTION FROM NEAREST TOWN OR POST OFFICE*
 Location is 53.7 miles east of Loving, New Mexico

15. DISTANCE FROM PROPOSED* LOCATION TO NEAREST PROPERTY OR LEASE LINE, FT. (Also to nearest drlg. unit line, if any)
 660'

16. NO. OF ACRES IN LEASE
 80

17. NO. OF ACRES ASSIGNED TO THIS WELL
 40

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

19. PROPOSED DEPTH
 5500'

20. ROTARY OR CABLE TOOLS
 Rotary

21. ELEVATION (SHow whether DF, RT, GR, etc.)
 3713' GR

22. APPROX. DATE WORK WILL START*
 April 1, 1984

5. LEASE DESIGNATION AND SERIAL NO.
 NM-19450

6. IF INDIAN, ALLOTTEE OR TRIBE NAME
 N/A

7. UNIT AGREEMENT NAME
 N/A

8. FARM OR LEASE NAME
 Federal

9. WELL NO.
 #2

10. FIELD AND POOL, OR WILDCAT
 Wildcat

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
 Sec. 17 T23S R33E

12. COUNTY OR PARISH
 Lea

13. STATE
 New Mexico

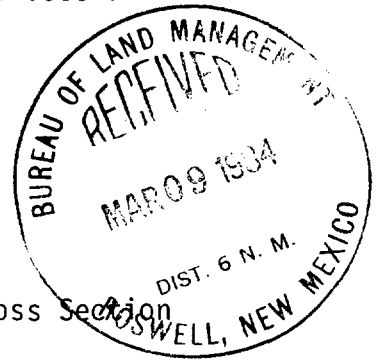
23. PROPOSED CASING AND CEMENTING PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	QUANTITY OF CEMENT
12 1/4"	8 5/8" new	24# J-55 ST&C	500'	312 sx Class "C" + additives
7 7/8"	5 1/2" new	17# J-55 LT&C	5500'	775 sx Howco Lite + 300 sx Class "C"

1. Drill 12 1/4" hole and set 8 5/8" surface casing to 500' with good returns.
2. Log B.O.P. checks in daily drill reports and drill 7 7/8" hole to 5500'.
3. Run tests if warranted and run 5 1/2" casing if productive.
4. Run logs, as needed, and perforate and stimulate as needed.

EXHIBITS ATTACHED:

- "A" Location and Elevation Plat
- "B" Drilling Program to Accompany A.P.D.
- "C" The Blowout Preventer Diagram
- "D" Surface Use Program to Accompany A.P.D.
- "E" & "E₁" Access Road Maps to Location
- "F" Radius Map of Field
- "G" & "G₁" Drill Pad Layout, Production Facilities & Cut-Fill Cross Section
- "H" Drill Rig Layout



IN 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 preventer program, if any.

24. [Signature] TITLE Drilling Superintendent DATE 2/28/84

(This space for Federal or State office use)

PERMIT NO. _____ APPROVAL DATE _____

APPROVED BY: 'Orig. Sgd.' Earl R. Cunningham TITLE District Manager DATE MAR 27 1984

CONDITIONS OF APPROVAL, IF ANY:

APPROVAL SUBJECT TO GENERAL REQUIREMENTS AND SPECIAL STIPULATIONS ATTACHED

*See Instructions On Reverse Side

WELL LOCATION AND ACREAGE DEDICATION PLAT Location and Elevation Plat

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

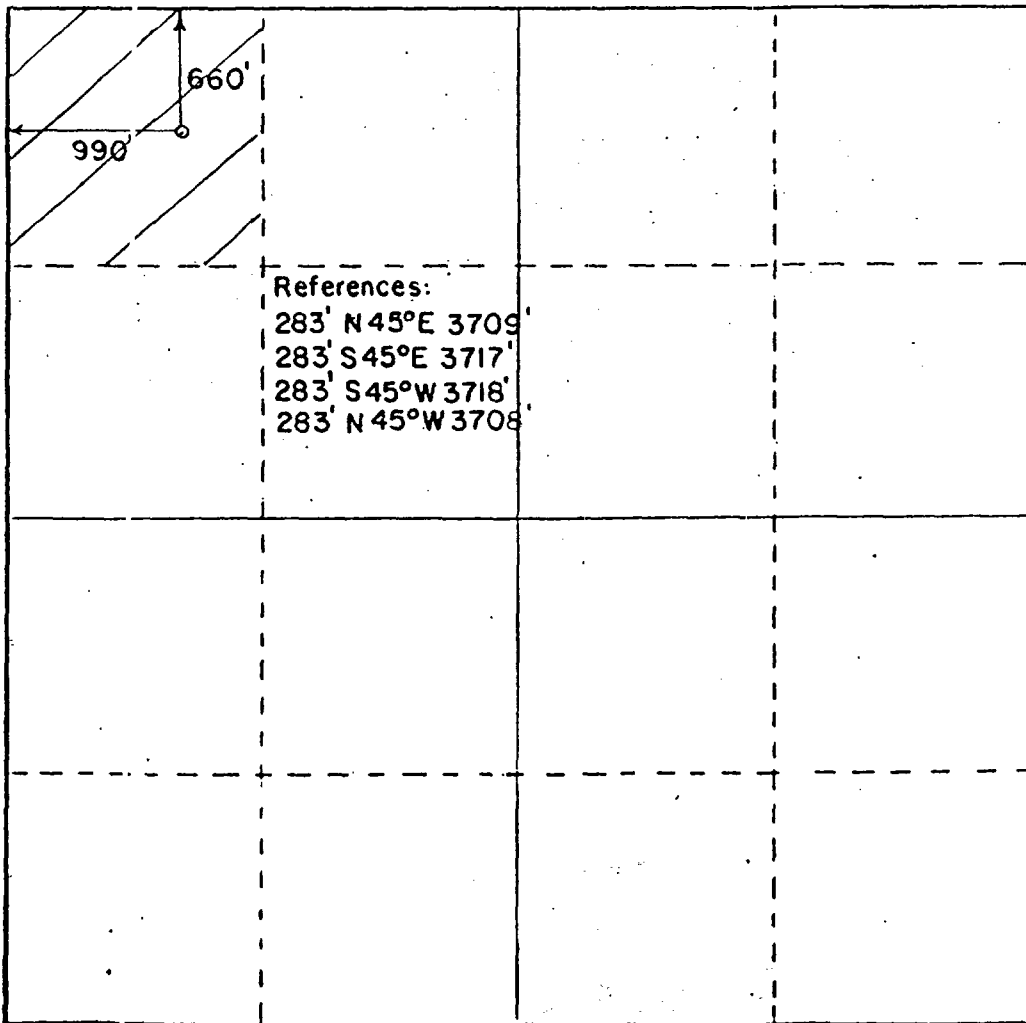
Operator CONQUEST EXPLORATION COMPANY			Lease NM-19450		Well No. # 2 FEDERAL
Unit Letter D	Section 17	Township 23 South	Range 33 East	County LEA, N.M.	
Actual Footage Location of Well: 660' feet from the NORTH line and 990' feet from the WEST line.					
Ground Level Elev. 3713'	Producing Formation Bone Spring		Pool Undesignated	Dedicated Acreage: 40 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 Commission.



CERTIFICATION

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

George Lapaseotes

Name **George Lapaseotes**
 Position **President POWERS ELEVATION**

Position
Agent Consultant for

Company
Conquest Exploration Co.

Date
3/6/84

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.

G. HUDDLESTON
2 MARCH 1984

Date Surveyed
GERALD G. HUDDLESTON

Registered Professional Engineer and a Land Surveyor
Gerald G. Huddleston

Certificate No.

