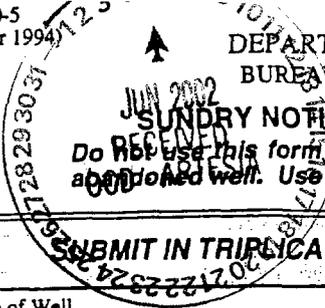


UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

CCO - Hitesia

51



SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.

5. Lease Serial No.
LC 069107

6. If Indian, Allottee or Tribe Name

7. If Unit or CA Agreement, Name and/or No.
8910169240
East Millman Unit

8. Well Name and No.
East Millman Unit No. 6-5

9. API Well No.
30-015-02233

10. Field and Pool, or Exploratory Area
Millman QN-GB-SA, East

11. County or Parish, State
Eddy County, New Mexico

Type of Well
 Oil Well Gas Well Other

Name of Operator
Stephens & Johnson Operating Co.

Address
Box 2249, Wichita Falls, TX 76307

3b. Phone No. (include area code)
(940) 723-2166

Location of Well (Footage, Sec., T., R., M., or Survey Description)
Unit Letter A:330 feet from the FNL line and 330 feet from the FEL line; Section 13 Township 19S Range 28E

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

TYPE OF SUBMISSION	TYPE OF ACTION			
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input checked="" type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input type="checkbox"/> Other _____
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input checked="" type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recomplete horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

We request that this well be classified as Temporarily Abandoned. The East Millman Unit is an active waterflood project with an on going infill drilling program and plans for conversion of existing wells to additional water injection wells. This well has beneficial use as a producing well or a future water injection well subsequent to the infill drilling program which will be completed over the next 3 years. Depending upon the success of the infill drilling program, well No. 6-5 will be reactivated as a producer or converted to a water injection well sometime during the next 3 years.

See attached well data and the procedure performed for Temporarily Abandon status.

TA Approved For 12 Month Period
Ending 4/4/03

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

Name (Printed/Typed) William M. Kincaid	Title Petroleum Engineer
Signature <i>William M. Kincaid</i>	Date April 16, 2002

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by (ORIG. SCD.) JOE G. LARA	Title Petroleum Engineer	Date 6/4/02
Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.	Office CFO	

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

Stephens & Johnson Operating Co.
East Millman Pool Unit No. 6-5
Eddy County, New Mexico

4-16-2002

Well Data

Surface Casing: 8 5/8", set @ 270' w/50 sx cmt
Production Casing: 4 1/2", 9.5 lb/ft, set @ 2235'
w/160 sx cmt. TOC @ 1535'

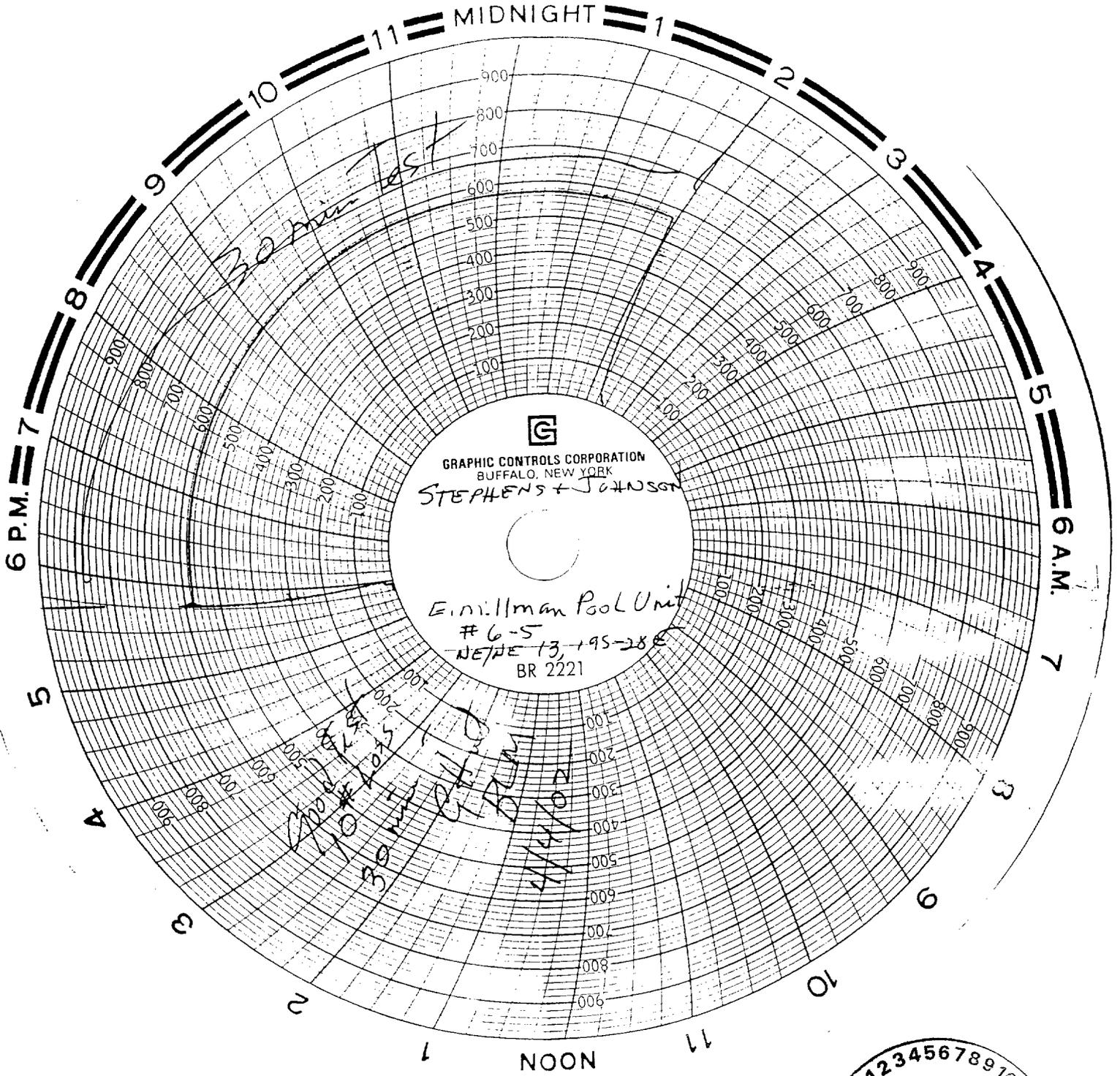
Perforations: Queen 1740-1744'
1770-1776'
1939-1945'
Grayburg 2106-2112'
2150-2156'

CIBP: Set at 1595'. Production casing is filled
with corrosion inhibited fluid.

Casing Integrity Test Procedure

04-04-2002

Pressured casing to 580 psig. In 30 minutes
pressure had dropped to 570 psig. (Copy of
pressure chart attached.) Capped well for TA
status.



UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

Oil Cons.
N.M. DIV-Dist. 2
1301 W. Grand Avenue
Artesia, NM 88210

FORM APPROVED
OMB No. 1004-0135
Expires July 31, 1996

51

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.

Case Serial No.
LC 069107

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.
8910169240

East Millman Unit

8. Well Name and No.

East Millman Unit No. 6-5

9. API Well No.

30-015-02233

10. Field and Pool, or Exploratory Area

Millman QN-GB-SA, East

11. County or Parish, State

Eddy County, New Mexico

SUBMIT IN TRIPLICATE - Other Instructions on reverse side

Type of Well

Oil Well Gas Well Other

Name of Operator

Stephens & Johnson Operating Co.

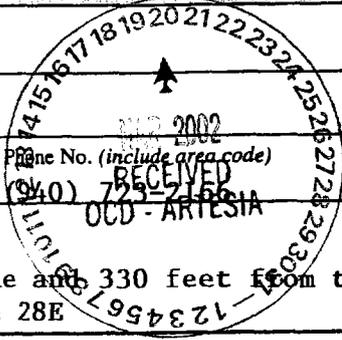
Address

PO Box 2249, Wichita Falls, TX 76307

Location of Well (Footage, Sec., T., R., M., or Survey Description)

Unit Letter A: 330 feet from the FNL line and 330 feet from the FEL line; Section 13 Township 19S Range 28E

3b. Phone No. (include area code)



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

TYPE OF SUBMISSION	TYPE OF ACTION			
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input checked="" type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input type="checkbox"/> Other _____
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input checked="" type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recomplete horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

We request that this well be classified as Temporarily Abandoned. The East Millman Unit is an active waterflood project with an on going infill drilling program and plans for conversion of existing wells to additional water injection wells. This well has beneficial use as a producing well or a future water injection well subsequent to the infill drilling program which will be completed over the next 3 years. Depending upon the success of the infill drilling program, well No. 6-5 will be reactivated as a producer or converted to a water injection well sometime during the next 3 years.

A casing integrity test as per the attached procedure will be performed during the week of March 11, 2002.

Accepted for record - NMOCD

I hereby certify that the foregoing is true and correct
Name (Printed/Typed)

William M. Kincaid

Signature
William M. Kincaid

Title

Petroleum Engineer

Date

February 22, 2002

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

COPIE FOR JARA

Title

Date

3/18/2002

Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.

Office

CFO

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

Instructions on reverse)

Stephens & Johnson Operating Co.
East Millman Pool Unit No. 6-5
Eddy County, New Mexico

2-22-2002

Well Data

Surface Casing: 8 5/8", set @ 270' w/50 sx cmt
Production Casing: 4 1/2", 9.5 lb/ft, set @ 2235'
w/160 sx cmt. TOC @ 1535'

Perforations: Queen 1740-1744'
1770-1776'
1939-1945'
Grayburg 2106-2112'
2150-2156'

CIBP: Set at 1595'. Production casing is filled
with corrosion inhibited fluid.

Casing Integrity Test Procedure

1. Pressure casing to 300 psig and hold for 30 minutes.

500


Stephens & Johnson Operating Co.
East Millman Pool Unit No. 6-5
Eddy County, New Mexico

2-22-2002

Well Data

Surface Casing: 8 5/8", set @ 270' w/50 sx cmt
Production Casing: 4 1/2", 9.5 lb/ft, set @ 2235'
w/160 sx cmt. TOC @ 1535'

Perforations: Queen 1740-1744'
1770-1776'
1939-1945'
Grayburg 2106-2112'
2150-2156'

CIBP: Set at 1595'. Production casing is filled
with corrosion inhibited fluid.

1700' →

Casing Integrity Test Procedure

1. Pressure casing to 300 psig and hold for 30 minutes.

SF

Submit 3 Copies To Appropriate District Office
District I
1625 N. French Dr., Hobbs, NM 87240
District II
811 South First, Artesia, NM 87210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
2040 South Pacheco, Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
Revised March 25, 1999

OIL CONSERVATION DIVISION
2040 South Pacheco
Santa Fe, NM 87505

WELL API NO.
30-015-02233
5. Indicate Type of Lease
STATE FEE
6. State Oil & Gas Lease No.
LC 069107

7. Lease Name or Unit Agreement Name:
8910169240
East Millman Unit

8. Well No.
East Millman Unit No. 6-5

9. Pool name or Wildcat
Millman QN-GB-SA, East

4. Well Location
Unit Letter **A** : **330** feet from the **FNL** line and **330** feet from the **FEL** line
Section **13** Township **19S** Range **28E** NMPM County **Eddy**

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

11. 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 COMPLETION
OTHER:
SUBSEQUENT REPORT OF:
REMEDIAL WORK ALTERING CASING
COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT
CASING TEST AND CEMENT JOB
OTHER:

12. 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 recompilation.

We request that this well be classified as Temporarily Abandoned. The East Millman Unit is an active waterflood project with an ongoing infill drilling program and plans for conversion of existing wells to additional water injection wells. This well has beneficial use as a producing well or a future water injection well subsequent to the infill drilling program which will be completed over the next 3 years. Depending upon the success of the infill drilling program, well No. 6-5 will be reactivated as a producer or converted to a water injection well sometime during the next 3 years.

A casing integrity test will be performed during the week of October 2, 2000. CIBP run a set 100' above Top perforations. M.I.T. min test pressure 300 # for 30 min. on Recorder Chart.

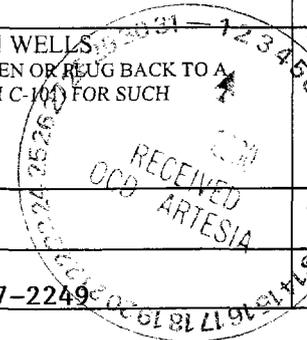
I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE William M. Kincaid TITLE Petroleum Engineer DATE 9-28-00

Type or print name William M. Kincaid Telephone No. (940) 723-2166
(This space for State use)

APPROVED BY [Signature] TITLE Field Rep. II DATE 10/12/2000
Conditions of approval, if any:

*Notify N.M.O.C.D. to witness M.I.T.



Stephens & Johnson Operating Co.
East Millman Pool Unit No. 6-5
Eddy County, New Mexico

9-28-00

Well Data

Surface Casing: 8 5/8", set @ 270' w/50 sx cmt
Production Casing: 4 1/2", 9.5 lb/ft, set @ 2235'
w/160 sx cmt. TOC @ 1535'

Perforations: Queen 1740-1744'
1770-1776'
1939-1945'
Grayburg 2106-2112'
2150-2156'

CIBP: Set at 1595'. Production casing is filled
with corrosion inhibited fluid.

Casing Integrity Test Procedure

1. Pressure casing to 300 psig and hold for 30 minutes.

SP

District I
PO Box 1988, Hobbs, NM 88241-1988
District II
PO Drawer DD, Artesia, NM 88211-8719
District III
1000 Rio Bravo Rd., Aztec, NM 87410
District IV
PO Box 2088, Santa Fe, NM 87504-2088

State of New Mexico
Energy, Minerals & Natural Resources Department
OIL CONSERVATION DIVISION
PO Box 2088
Santa Fe, NM 87504-2088

Form C-104
Revised February 10, 1994
Instructions on back
Submit to Appropriate District Office
5 Copies
 AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

Operator name and Address STEPHENS & JOHNSON OPERATING CO. P O BOX 2249 WICHITA FALLS TX 76307-2249		OGRID Number 019958
		Reason for Filing Code CO effective 2/8/96
API Number 30-015-02233	Pool Name MILLMAN QUEEN, GB-SA, EAST	Pool Code 46555
Property Code 009799	Property Name EAST MILLMAN POOL UNIT	Well Number TRACT 6 WELL 5

II. ¹⁰ Surface Location

Ul or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South Line	Feet from the	East/West Line	County
A	13	19S	28E		330	North	330	East	Eddy

¹¹ Bottom Hole Location

Ul or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South Line	Feet from the	East/West Line	County

¹² Les Code F	¹³ Producing Method Code P	¹⁴ Gas Connection Date	¹⁵ C-129 Permit Number	¹⁶ C-129 Effective Date	¹⁷ C-129 Expiration Date
-----------------------------	--	-----------------------------------	-----------------------------------	------------------------------------	-------------------------------------

III. Oil and Gas Transporters

¹⁸ Transporter OGRID	¹⁹ Transporter Name and Address	²⁰ POD	²¹ O/G	²² POD ULSTR Location and Description
12816	KOCH OIL CO., A DIVISION OF KOCH INDUSTRIES, INC. P O BOX 2256, WICHITA, KS 67201	2229610	0	J 12-19S-28E Main Tank Battery
009171	GPM Gas Corporation 1030 Plaza Office Bldg Bartlesville, OK 74004	2229630	G	J 12-19S-28E
				RECEIVED FEB - 9 1996 OIL CON. DIV. DIST. 2

IV. Produced Water

²³ POD 2229650	²⁴ POD ULSTR Location and Description J 12-19S-28E
------------------------------	--

V. Well Completion Data

²⁵ Spud Date	²⁶ Ready Date	²⁷ TD	²⁸ PBD	²⁹ Perforations
³⁰ Hole Size	³¹ Casing & Tubing Size	³² Depth Set	³³ Sacks Cement	

VI. Well Test Data

³⁴ Date New Oil	³⁵ Gas Delivery Date	³⁶ Test Date	³⁷ Test Length	³⁸ Tbg. Pressure	³⁹ Csg. Pressure
⁴⁰ Choke Size	⁴¹ Oil	⁴² Water	⁴³ Gas	⁴⁴ AOF	⁴⁵ Test Method

* I hereby certify that the rules 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: *JO Bumgardner*
Printed name: JO BUMGARDNER
Title: PRODUCITON MANAGER
Date: 2/7/96
Phone: (817)723-2166

OIL CONSERVATION DIVISION
Approved by: *Jim W. Burn*
Title: District Supervisor
Approval Date: 2/12/96

* If this is a change of operator fill in the OGRID number and name of the previous operator			
Previous Operator Signature	Printed Name	Title	Date

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

NM OIL CONSERVATION DIVISION
Drawer DD
Artesia, NM 88210

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well
 Oil Well Gas Well Other

2. Name of Operator

Stephens & Johnson Operating Co.

3. Address and Telephone No.

P O Box 2249, Wichita Falls, TX 76307-2249 (817) 723-2166

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

**Unit Letter A, 330' FNL, 330' FEL
Section 13, T 19S, R 28E**

5. Lease Designation and Serial No.

52 LC 069107

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8910169240

East Millman Unit

8. Well Name and No. **Pool 6 #5
East Millman Unit No.**

9. API Well No.

30-015-02233

10. Field and Pool, or Exploratory Area

Millman QN-GB-SA, East

11. County or Parish, State

Eddy

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

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

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

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

We request that this well be classified as Temporarily Abandoned. The East Millman Unit is an active waterflood project with plans in the near future for infill drilling and conversion of existing wells to additional water injection wells. This well has beneficial use as a producing well or a future water injection well subsequent to the infill drilling program which will be accomplished over the next 4 years. Depending upon the success of the infill drilling program, well No. 6-5 will be reactivated as a producer or converted to a water injection well sometime during the next 4 years.

See attached well data and the procedure performed for Temporarily Abandon Status.

TA APPROVED FOR 12 MONTH PERIOD
ENDING 11/15/95

NOV 23 10 00 AM '94
RECEIVED

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

Signed

William M. Kincade

Title

Petroleum Engineer

Date

11-18-94

(This space for Federal or State office use)

(ORIG. SGD.) JOE G. LARA

Title

PETROLEUM ENGINEER

Date

12/14/94

Approved by
Conditions of approval, if any:

OIL AND GAS INSPECTOR KZ-12-18-94 BJR

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

Stephens & Johnson Operating Co.
East Millman Unit No. 6-5
Eddy County, New Mexico

11-18-94

Well Data

Surface Casing: 8 5/8" set @ 270' w/50 sx cmt.
Production Casing: 4 1/2", 9.5 lb/ft, set @ 2235'
w/160 sx cmt. TOC @ 1535'.
Perforations: Queen 1740-1744'
1770-1776'
1939-1945'
Greyburg 2106-2112'
2150-2156'

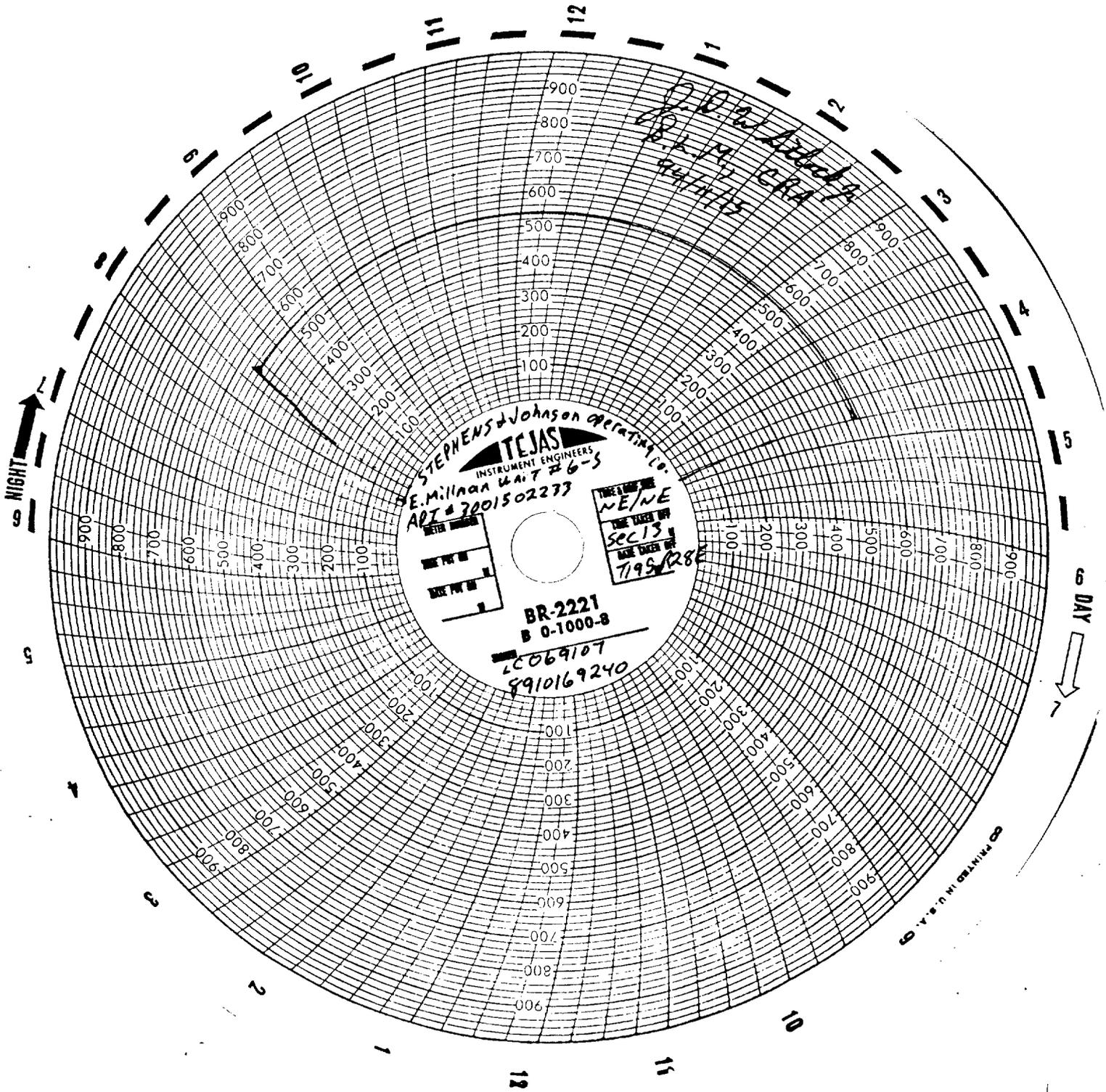
Casing Integrity Test Procedure

11-11-94
(Friday)

Set CIBP @ 1595'.

11-15-94
(Tuesday)

Loaded casing with corrosion inhibited fluid. Pressured casing to 545 psig. In 30 minutes pressure had dropped 15 psig to 530 psig. (Pressure chart attached) Capped well for TA status.



51

Form 3160-1
PERMISSION
(June 1990)
RECEIVED

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

NM OIL CONS COMMISSION
Drawer DD
Artesia, NM 88210

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

5 AM 8 50

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals

5. Lease Designation and Serial No.
LC 069107

6. If Indian, Allottee or Tribe Name

SUBMIT IN TRIPLICATE

7. If Unit or CA, Agreement Designation
8910169240

East Millman Unit

8. Well Name and No.

East Millman Unit No. 6-5

9. API Well No.

30-015-02233

10. Field and Pool, or Exploratory Area

Millman QN-GB-SA, East

11. County or Parish, State

Eddy

1. Type of Well
 Oil Well Gas Well Other

2. Name of Operator
Stephens & Johnson Operating Co.

3. Address and Telephone No.
P O Box 2249, Wichita Falls, TX 76307-2249 (817) 723-2166

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
**Unit Letter A, 330' FNL, 330' FEL
Section 13, T 19S, R 28E**

JUL 29 '94

O. C. D.
ARTESIA, OFFICE

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

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

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

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

We request that this well be classified as Temporarily Abandoned. The East Millman Unit is an active waterflood project with plans in the near future for infill drilling and conversion of existing wells to additional water injection wells. This well has beneficial use as a producing well or a future water injection well subsequent to the infill drilling program which will be accomplished over the next 4 years. Depending upon the success of the infill drilling program, well No. 6-5 will be reactivated as a producer or converted to a water injection well sometime during the next 4 years.

If this justification for temporary abandonment is deemed reasonable, a casing integrity test will be scheduled during the month of August, 1994.

RECEIVED
JUL 5 9 12 AM '94
CARETAKER AREA

14. I hereby certify that the foregoing is true and correct
Signed William M. Kincaid Title Petroleum Engineer Date 6-29-94

(This space for Federal or State office use)

Approved by **(ORIG. SGD.) JOE G. LARA** Title **PETROLEUM ENGINEER** Date 7/28/94
Conditions of approval, if any: See attached.

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

*See Instruction on Reverse Side

Submit 5 Copies
 Appropriate District Office
 DISTRICT I
 P.O. Box 1980, Hobbs, NM 88240
 DISTRICT II
 P.O. Drawer DD, Artesia, NM 88210
 DISTRICT III
 1000 Rio Brazos Rd., Aztec, NM 87410

State of New Mexico
 Energy, Minerals and Natural Resources Department
 OIL CONSERVATION DIVISION
 P.O. Box 2088
 Santa Fe, New Mexico 87504-2088

Form C-104
 Revised 1-1-89
 See Instructions
 at Bottom of Page

RECEIVED

AUG 16 1993

REQUEST FOR ALLOWABLE AND AUTHORIZATION
 TO TRANSPORT OIL AND NATURAL GAS

I.

Operator STEPHENS & JOHNSON OPERATING CO.	Well API No. 30-015- 02233
Address P. O. BOX 2249, WICHITA FALLS, TX 76307-2249	
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)	
New Well <input type="checkbox"/>	Change in Transporter of: <input type="checkbox"/> Effective 9/1/93
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 <u>S & J OPERATING COMPANY, P. O. BOX 2249, WICHITA FALLS, TX 76307-2249</u>	

II. DESCRIPTION OF WELL AND LEASE

Lease Name EAST MILLMAN POOL UNIT, TRACT # 6	Well No. 5	Pool Name, Including Formation MILLMAN QUEEN, GB/SA, EAST	Kind of Lease State, (Federal) or Fee	Lease No. NM-069107
Location				
Unit Letter A	330	Feet From The North	Line and 330'	Feet From The East
Section 13	Township 19S	Range 28E	NMPM,	EDDY 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"/>	Address (Give address to which approved copy of this form is to be sent)
SCURLOCK PERMIAN CORPORATION	P. O. BOX 4648, HOUSTON, TX 77210-4648
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
PHILLIPS PETROLEUM COMPANY	DRAWER P, ARTESIA NM 88210
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When ?
	B 13 19S 28E yes

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 (pilot, 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.

JO Bumgardner
 Signature
JO BUMGARDNER PRODUCTION MGR
 Printed Name
 Date _____ Title 817/723-2166
 Telephone No.

OIL CONSERVATION DIVISION

Date Approved OCT 25 1993

By *M. Williams*

Title SUPERVISOR, DISTRICT II

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.

Submit 5 Copies
 Appropriate District Office
 DISTRICT I
 P.O. Box 1980, Hobbs, NM 88240

State of New Mexico
 Energy, Minerals and Natural Resources Department

Form C-104
 Revised 1-1-89
 See Instructions
 at Bottom of Page

OIL CONSERVATION DIVISION

OIL CONSERVATION DIVISION
 RECEIVED
 '91 SEP 30 AM 8 08

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

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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION
 TO TRANSPORT OIL AND NATURAL GAS

I.

Operator S & J Operating Company	Well API No. 015-02233
Address P. O. Box 2249, Wichita Falls, Texas 76307	
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)	
New Well <input type="checkbox"/>	Change in Transporter of: <input type="checkbox"/> Effective 9/1/89
Recompletion <input type="checkbox"/>	Oil <input checked="" type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Operator <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of operator give name and address of previous operator _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name East Millman Pool Unit	Well No. 5	Pool Name, Including Formation Millman (Q-G) East	Kind of Lease State, Federal or Fee State	Lease No. LC69107
Location Tr 6				
Unit Letter A	330	Feet From The north	Line and 330	Feet From The east
Section 13	Township 19-S	Range 28-E	NMPM,	County Eddy

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

SCURLOCK PERMIAN CORP EFF 9-1-91

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Permian Operating Limited Partnership	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1183 Houston, Texas 77251-1183					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Phillips Petroleum Co.	Address (Give address to which approved copy of this form is to be sent) Drawer P, Artesia, NM 88210					
If well produces oil or liquids, give location of tanks.	Unit B	Sec. 13	Twp. 19	Rgs. 28	Is gas actually connected? Yes	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			
Performances						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 (pilot, 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.

Sandy Robertson
 Signature
Sandy Robertson, Petroleum Engineer
 Printed Name Title
8/22/89 (817) 723-2166
 Date Telephone No.

OIL CONSERVATION DIVISION

Date Approved AUG 31 1989

By ORIGINAL SIGNED BY

MIKE WILLIAMS

Title SUPERVISOR, DISTRICT II

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.

Submit 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico
Energy, Minerals and Natural Resources Department
RECEIVED
OIL CONSERVATION DIVISION
P.O. Box 2088
AUG 30 '89 Santa Fe, New Mexico 87504-2088

Form C-104
Revised 1-1-89
See Instructions
at Bottom of Page

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

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

Santa Fe			
File			
Transporter	Oil		
Operator	Gas		

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

I. **ARTESIA OFFICE**

Operator S & J Operating Company	Well API No. 015-02233
Address P. O. Box 2249, Wichita Falls, Texas 76307	
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)	
New Well <input type="checkbox"/>	Change in Transporter of: <input type="checkbox"/>
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> <input checked="" type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Operator <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Effective 9/1/89	

SEP - 6 1989
OIL CONSERVATION DIV.
SANTA FE

If change of operator give name and address of previous operator

II. **DESCRIPTION OF WELL AND LEASE**

Lease Name East Millman Pool Unit	Well No. 5	Pool Name, including Formation Millman (Q-G) East	Kind of Lease State, Federal or Fee State	Lease No. LC69107
Location Tr 6				
Unit Letter A	330	Feet From The north	Line and 330	Feet From The east
Section 13	Township 19-S	Range 28-E	NMPM,	County Eddy

III. **DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS**

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Permian Operating Limited Partnership	P. O. Box 1183 Houston, Texas 77251-1183
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Phillips Petroleum Co.	Drawer P, Artesia, NM 88210
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When ?
	B 13 19 28 Yes

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 (pilot, 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.

Sandy Robertson
Signature
Sandy Robertson, Petroleum Engineer
Printed Name Title
8/22/89 (817) 723-2166
Date Telephone No.

OIL CONSERVATION DIVISION

Date Approved AUG 31 1989
By Mike Williams
Title SUPERVISOR, DISTRICT III

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.

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other instructions on reverse side)

Budget Bureau No. 1004-0135
Expires August 31, 1985

51

5. LEASE DESIGNATION AND SERIAL NO.

LC-69107

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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—" for such proposals.)

7. UNIT AGREEMENT NAME

East Millman Pool Unit

8. FARM OR LEASE NAME

OIL WELL GAS WELL OTHER

FEB 27 '89

2. NAME OF OPERATOR

S & J Operating Company ✓

3. ADDRESS OF OPERATOR

P. O. Box 2249, Wichita Falls, TX 76307 ARTESIA OFFICE

9. WELL NO.

TR. 6-5

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface

10. FIELD AND POOL, OR WILDCAT

Millman ON-GB-SA, East

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

Sec. 13, T19S, R28E

14. PERMIT NO.

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

N/A

12. COUNTY OR PARISH 13. STATE

Eddy

N. M.

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF

PULL OR ALTER CASING

WATER SHUT-OFF

REPAIRING WELL

FRACTURE TREAT

MULTIPLE COMPLETE

FRACTURE TREATMENT

ALTERING CASING

SHOOT OR ACIDIZE

ABANDON*

SHOOTING OR ACIDIZING

ABANDONMENT*

REPAIR WELL

CHANGE PLANS

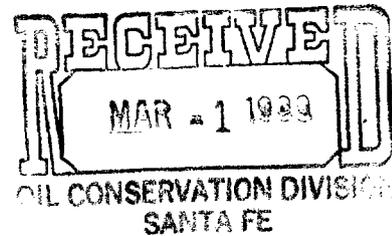
(Other) Temporary Abandonment

(Other)

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

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.)*

This well was already T. A.'d when we began operating this property on 12/1/84. We do not know how long it had been shut-in prior to that date. This well may be used again in the future as the waterflood progresses.



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

SIGNED Sandy Robertson

TITLE Petroleum Engineer

DATE 2/22/89

(This space for Federal or State office use)

APPROVED BY _____

TITLE _____

DATE _____

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

Petroleum Information
Corporation
GEO-FICHE™

19S-28E-13-01 (NE NE)
NEW MEXICO NM

WELL: EAST MILLMAN TR 6 5
OPER: S & J OPERATING
CNTY: Eddy

API: 30-015-00000
ISSUE: A07/87
CARD: 1



ILLEGIBLE

Petroleum Information
Corporation
GEO-FICHE™

19S-28E-13-01 (NE NE)
NEW MEXICO NM

WELL: EAST MILLMAN TR 6 5
OPER: S & J OPERATING
CNTY: EDDY

API: 30-015-00000
ISSUE: A07/87
CARD: 1



Submit 3 Copies
to Appropriate
District Office
DISTRICT I
1625 N. French Dr., Hobbs, NM 88240

DISTRICT II
811 S. First Street, Artesia, NM 88210

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

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

S F

OIL CONSERVATION DIVISION

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

WELL API NO.
30-005-62340

5. Indicate Type of Lease
STATE FBE

6. 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.)

7. Lease Name or Unit Agreement Name
O'Brien

1. Type of Well:
OIL WELL GAS WELL OTHER

8. Well No.
#1

Name of Operator
STRATA PRODUCTION COMPANY

9. Pool Name or Wildcat
Miller Lake Abo

3. Address of Operator
P.O. BOX 1030, ROSWELL, NEW MEXICO 88202-1030

4. Well Location
Unit Letter **C** : **660'** Feet From The **North** Line and **1900'** Feet From The **West** Line

Section **25** Township **7S** Range **29E** NMPM **Chaves** County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
4104'

11. 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"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input checked="" type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>		CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: <input type="checkbox"/>	

12. 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

- 4/29/02: Notify OCD. MIRU. Dig & Line working pit.
- 4/30/02: NUBOP & Flange. POOH w/tbg. RIH & set CIBP @ 6425'. Dump 35' cement on top. RIH w/tbg & cir 10# @ mud @ 6380'. POOH & spot 25 sxs @ 2780'-2540'. POOH w/47 stands. Close in well.
- 5/01/02: POOH w/tbg. ND wellhead. Weld on pull nipple. Cut csg @ freepoint @ 3800'. Lay down 2 jts. Close in well.
- 5/02/02: POOH w/csg. RIH & spot 35 sxs @ 3850'. POOH. WOC. RIH & tag @ 3743'. POOH & spot 35 sxs @ 3550'. POOH w/25 stands. Close in well.
- 5/03/02: RIH & tag @ 3444'. POOH & spot 35 sxs @ 2378'. POOH. WOC. RIH & tag @ 2268'. POOH & spot 35 sxs @ 1283'. POOH. WOC. RIH & tag @ 1151'. POOH & spot 35 sxs @ 977'. POOH. Close in well.
- 5/06/02: RIH @ tag @ 851'. POOH & spot 35 sxs @ 388'. POOH. WOC. RIH & tag @ 260'. POOH & spot 15 sxs @ 60' to surface. RD. Move out. Install dry hole marker. Level pit & cellar.

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

SIGNATURE *Kelly M. Britt* TITLE PRODUCTION RECORDS DATE May 14, 2002
TYPE OR PRINT NAME Kelly M. Britt TELEPHONE NO. 505-622-1127

(This space for State Use)
APPROVED BY *[Signature]* TITLE *Field Rep ID* DATE JUL 22 2002
CONDITIONS OF APPROVAL, IF ANY:



Submit 2 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

SR

OIL CONSERVATION DIVISION

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

DISTRICT I
1625 N. French Dr., Hobbs, NM 88240

DISTRICT II
811 S. First Street, Artesia, NM 88210

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

WELL API NO.
30-005-62340

5. Indicate Type of Lease
STATE FEE

6. 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.)

7. Lease Name or Unit Agreement Name
O'Brien

1. Type of Well:
OIL WELL GAS WELL OTHER

8. Well No.
#1

Name of Operator
STRATA PRODUCTION COMPANY

9. Pool Name or Wildcat
Miller Lake Abo

3. Address of Operator
P.O. BOX 1030, ROSWELL, NEW MEXICO 88202-1030

4. Well Location
Unit Letter C : 660' Feet From The North Line and 1900' Feet From The West Line

Section 25 Township 7S Range 29E NMPM Chaves County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
4104'

11. 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"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
OTHER: <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
	CASING TEST AND CEMENT JOB <input type="checkbox"/>
	OTHER: <input type="checkbox"/>

12. 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

Set CIBP @ 6425', with 35' cement. Circulate hole with 9# mud. Cut and pull casing @ +/- 5300'.
Spot 100' plug, 25 sx half in and half out of casing stub, tag plug. Spot 100' plug, 25 sx, 3550' - 3450'. Spot 100' plug, 25 sx, 2278' - 2378', tag plug. Spot 100' plug, 25 sx, 877' - 977'. Spot 100' plug 25 sx, 288' - 388'. Spot 60', 15 sx surface plug. Install dryhole marker, clean location and rip.

25 sx. Plug @ 5780'
100' Plug 1180' - 1280' - TAG
RTA

(Attachment: Plugging Procedure)

Notify OCD 24 hrs. prior to any work done

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

SIGNATURE Kelly M. Britt TITLE PRODUCTION RECORDS DATE March 14, 2002
TYPE OR PRINT NAME Kelly M. Britt TELEPHONE NO. 505-622-1127

(This space for State Use)

APPROVED BY [Signature] TITLE Field Sup ID DATE APR 3 2002
CONDITIONS OF APPROVAL, IF ANY:

EXISTING

PROPOSED

T. SALT 922'

B. SALT 1232'

T. SAN ANDRES 2328'

GLORIETTA 3525'

TUBB 5013'

ABO 5780'

CISCO 7056'

MISS. 7510'

DEVONIAN 7988'

O'BRIEN #1
660' FNL & 1900' FWL
SEC. 25-T7S-R29E
CHAVES COUNTY, NM
API # 30-005-62340
SPUD DATE: 9/23/86

60', 15 SX., SURFACE PLUG
100', 25 SX., 288-388'
100', 25 SX., PLUG 877'-977'

100', 25 SX., PLUG 2278'-2378'
TAG PLUG

100', 25 SX., PLUG 3550-3450'

CUT AND PULL CASING @ +/- 5300'
100', 25 SX 1/2 IN AND 1/2 OUT OF STUB
TAG PLUG

CIBP @ 6425', W/ 35' CEMENT

INSTALL DRY HOLE MARKER
CLEAN LOCATION AND RIP

13 3/8" @ 333
375 SX.
CIRC.

8 5/8" @ 2328'
1150 SX.
CIRC. 100 SX.

TOC @ 5456' (CBL)

2 7/8" TUBING

S.N. @ 6460'. OPEN ENDED
PERF. 6488-6512'

CIBP @ 6901'
PERF. 6991-93', 7066-67', 7078-82'
5 1/2" CASING @ 7201'
425 SX.
5 1/2" X 7 5/8" = .1733 CU. FT. / FT.
425SX + 25% EXCESS=2425' FILL

PLUG @ 7410'-7510'

PLUG @ 7890'-7990'

T.D. 8100'

CL

