

District I
PO Box 1980, Hobbs, NM 88241-1980
District II
PO Drawer DD, Artesia, NM 88211-0719
District III
1000 Rio Brazos 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 21, 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 Gas Well Services, Inc. ✓ 26 E. Compress Rd. Artesia, NM 88210		OGRID Number 163645
		Reason for Filing Code C/H 4-1-99
API Number 30 - 015-00434	Pool Name Empire Yates seven Rivers	Pool Code 22230
Property Code 24864	Property Name Saunders	Well Number #3

II. Surface Location

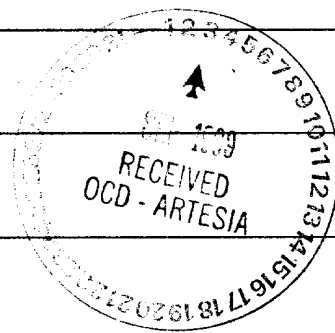
UL or lot no. D	Section 13	Township 17S	Range 27E	Lot Idn	Feet from the 330	North/South Line N	Feet from the 990	East/West line W	County Eddy
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Bottom Hole Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
Lse Code	Producing Method Code	Gas Connection Date	C-129 Permit Number		C-129 Effective Date		C-129 Expiration Date		

III. Oil and Gas Transporters

Transporter OGRID 15694	Transporter Name and Address Navajo Refining Co. P.O. Box 159 Artesia, NM 88210	POD 2050510	O/G O	POD ULSTR Location and Description



IV. Produced Water

POD	POD ULSTR Location and Description
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V. Well Completion Data

Spud Date	Ready Date	TD	PBTD	Perforations	DHC, DC, MC
Hole Size		Casing & Tubing Size	Depth Set	Sacks Cement	
				Posted ID. 3 9-10-99 Chg OP	

VI. Well Test Data

Date New Oil	Gas Delivery Date	Test Date	Test Length	Tbg. Pressure	Csg. Pressure
Choke Size	Oil	Water	Gas	AOF	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: *Keretta Matthews*

Printed name: *Keretta Matthews*

Title: *Vice President*

Date: *4-10-99*

Phone: *748-2854*

OIL CONSERVATION DIVISION

Approved by:

ORIGINAL SIGNED BY TIM W. GUM
DISTRICT II SUPERVISOR

B6X

Title:

Approval Date:

9-7-99

If this is a change of operator fill in the OGRID number and name of the previous operator

X *15 224164* *VINTAGE PRINCE*

Previous Operator Signature

Printed Name

Title

Date

Samuel Hager

Samuel Hager

Owner

8/31/97

Form 3160-5
(November 1994)UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

5. Lease Serial No.

NM 02931

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or N

8. Well Name and No.

Saunders #3

9. API Well No.

30-015-00434

10. Field and Pool, or Exploratory Area

Empire Yates Seven river

11. County or Parish, State

Eddy, NM

SUBMIT IN TRIPLICATE - Other instructions on reverse side

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator

Gas Well services, Inc.,

3a. Address

26 E. Compress Rd. Artesia, NM 88210

3b. Phone No. (include area code)

505-748-2854

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

Unit D, Sec 13, T17S, R27E, 330 FNL, 990 FWL

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

TYPE OF SUBMISSION	TYPE OF ACTION			
<input 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 type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other <u>Change of operator</u>
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

13. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration to : If the proposal is to deepen directionally or recompleat horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and : 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 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 testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operati determined that the site is ready for final inspection.)

To provide notice of CHANGE OF OPERATOR from Vintage Drilling, LLC
to Gas Well Services, Inc.

Effective Date 4-1-99

Bonding as follows:
statewide bond #NM 2713

APPROVED

AUG 17 1999

AUTHORIZED OFFICER, MINERALS
BUREAU OF LAND MANAGEMENT

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

Jack Matthews

Title

President

Signature

Date

4-10-99

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

Title

Date

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 enable the applicant to conduct operations thereon.

Office