1-orac C 104

40 Csg. Pressure

39 Tbg. Pressure

State of New Mexico Energy, Minerals & Natural Resources Department

CONSERVATION DIVISION 2040 South Pacheco Santa Fe NM 87505

Revised October 18, 1994	116
Revised October 18. 1994 Instructions on back Submit to Appropriate District Office	Jyr ~
5 Copies	
AMENDED REPORT	M

District II	
811 South First, Artesia, NM 88210	
District III	
1000 Rio Brazos Rd., Aztec, NM 87410	•

. () Lox 1980, Hobbs, NM 88241-1980

District IV

2040 South Pacheco, San	the Per land of the Company
I.	REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

Cameron O:1 8Has Inc. Operator name and Address PD Box 1456 Ros well, NM 88202			18/109 ² OGRID Number			
PO Box 1456		СН	e trective	n for Filing Code		
⁴ API Number	⁵ Pool Name			⁶ Pool Code		
30 - 015 - 04352	Grayburg Jackson SR-QN-GB-SA			28509		
7 Property Code	⁸ Property Name			9 Well Number		
85512	Sergent			#4		

¹⁰ Surface Location II.

Ul or lot no.	Section	Township	Range	Lot.ldn	Feet from the	North/South Line	Feet from the	East/West line	County
A	27	178	30E		330	North	330	East	Eddy

11 Bottom Hole Location

UL or lot no.	Section 27	Township 17S	Range 30E	Lot Idn	Feet from the 330	North/South North		Feet from the	East/West Eas		County Eddy
12 Lse Code			¹⁵ C-129 Perm			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
15694	Navajo Refining Co.	1166810	0	
			The Secret	

IV. Produced Water

²³ POD	24 POD ULSTR Location and Description

V. Well Completion Data

²⁵ Spud Date	²⁶ Ready Date	27 TD	28 PBTD	²⁹ Perforations	[∞] DHC, DC,MC	
31 Hole Size	32 Casing & Tubing Size		33 Depth Set		³⁴ Sucks Cement	
		1				

37 Test Date

VI. Well Test Data

35 Date New Oil

³⁶ Gas Delivery Date

41 Choke Size	¹² Oil	43 Water	44 Gas	* AOF	" Test M	ethod
hat the information given above Signature:	of the Oil Conservation Division is true and complete to the best	of my knowledge and belief.	Approved by:	CONSERVATION IGINAL SIGNED BY STRICT II SUPERVIS	TIM W. GUM	
Title: A 3(n+ Date: 020/100		56225544	Approval Date:	MAR 1 5 2000		
	tor fill in the OGRID number s		ntor OGRID #124768 Daniel M. Alexander			
Davidana (Operator Stonature		Printed Name		Title	Date

38 Test Length



N.M. Oil Cons. Division 811 S. 1st Str Artesia, NM 88210-2834

505622554

Form 3160-5 (June 1990)

> 1. Type of Well X Oil Well

> > ames on

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

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

5. Lease Designation and Serial No.

6. If Indian, Allottee or Tribe Name

LC 059376

••••••••••••••••••••••••••••••••••••••	/	
t use this form for proposals	to drill or to deepen or reentry	to a different reservoir.

Do no Use "APPLICATION FOR PERMIT—" for such proposals

SUBMIT IN TRIPLICATE

SUNDRY NOTICES AND REPORTS ON WELLS

7. If Unit or CA, Agreement Designation 8. Well Name and No. #4 Sergent Federal 9. API Well No. 30-015-04352

Section 27, T17S - R30E 330 North, 330 East

10. Field and Pool, or Exploratory Area Grayburg, Jackson-SR-QU-GB-SA

11. County or Parish, State

Eddy Co., New Mexcio

12.	CHECK APPROPRIATE BOX	s) TO INDICATE	NATURE OF NOTICE,	REPORT, OR C	THER DATA
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TYPE OF SUBMISSION	TYPE OF ACTION	
X Notice of Intent Subsequent Report	Abandonment Recompletion Plugging Back	Change of Plans New Construction Non-Routine Fracturing
Final Abandonment Notice	Casing Repair Altering Casing Change Operator	Water Shut-Off Conversion to Injection 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.)*

Effective January 1, 2000

APPROVED

MAR 08.2000

RIZED OFFICER, MINER. F LAND MANAGEM

14. I hereby certify that the foregoing is true and correct (This space for Federal Approved by _______ Conditions of approval, if any:

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