· · · ·		1 No.	M. Oil Cons. Di	A REFUSION		
			811 S. 1ST ST.	-		Υ _i γ
Form 3160-3			APTESIAU MAT88210	,CATE*	FORM APPRO	
(July 1992)	UNITE	ED STATES	(Other instruc reverse sid		OMB NO. 1004 Expires: February :	
	DEPARTMENT	OF THE INTER	RIOR	[-]	5. LEASE DEBIGNATION AND	D BERIAL NO.
	BUREAU OF I	LAND MANAGEME	T		LC 050906	
	ICATION FOR PE	RMIT TO DRIE	LAR DEEPEN		6. IF INDIAN, ALLOTTEE OF	TRIBE NAME
R. TYPE OF WORK		IC C		I	NA 7. UNIT AGREEMENT NAM	
DR					Ballard Graybur	
01L [17] G	VELL OTHER		OVE 1 1005 HULTIP		8. FARM OR LEASE NAME WELL N	·1241
NAME OF OPERATOR		817			BGSA Unit Tract	
	troleum Corpor	ation OM	CON M-MM		9. AT WELL NO.	
ADDRESS AND TELEPHONE NO.		00255 5		-	30-015-20	LDCAT
LOCATION OF WELL (R	LOCO Hills, NM Report location clearly and 1	in accordance with any	State Tequirements.*)		Loco Hills Qn-G	Layburg-S
At surface 1350'	FNL & 1655' F	EL			11. SBC., T., R., M., JOE BLE AND SUBVEY OF AREA	
At proposed prod. zoi	De t	·				
Same	AND DIRECTION FROM NEAR				8-185-29E	3. STATE
	ly 8 miles Sou					NM
5. DISTANCE FROM PROP	° daeu		O. OF ACRES IN LEASE	17. NO. OF	ACRES ASSIGNED	
LOCATION TO NEARES PROPERTY OR LEASE	LINE, FT. g. unit line, if any)	655' 26	00		40	
S. DISTANCE FROM PRO	POSED LOCATION		HOPOSED DEPTH		OR CABLE TOOLS	
OR APPLIED FOR, ON TE	TIS LEASE, FT.	609' 32	00	Rot	ATY 22. APPROL. DATE WORK	WILL START*
1. ELEVATIONS (Show we 3515 GR	ether DF, RT, GR, etc.)		,		Mid Novembe	
GR		POPOSED CASING AN	D CEMENTING PROS			
		WEIGHT PER FOOT	SETTING DEPTH	AEFF CO	QUANTITY OF CEMENT	EK DAJIN
SIZE OF HOLE	GRADE SIZE OF CASING			25	CID CULLATE	WITNES
size of hole <u>12%</u> " 7 7/8"	8 5/8" J-55 5 1/2" J-55	<u>24#</u> 15.5#	<u>350'</u> 3200'		0 SXCIRCULATE	
12¼"	<u>8 5/8" J-55</u>	24#	350'		0 SXCIRCULATE 5 SXCIRCULATE Poslid TD	-/
12¼" 7 7/8"	<u>8 5/8" J-55</u>	24# 15.5#	350' 3200'		0 SXCIRCULAIS 5 SXCIRCULAIS Poslid ID NL AR API	-/
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*See	Instructions	On	Reverse	Side
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'e 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 ed States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

District I PO Box 1980, Hobbs, NM 88241-1980	E
District II	
PO Drawer DD, Artesia, NM 88211-0719	0
District III	
1000 Rio Brazos Rd., Aztoc, NM 87410	
District IV	
PO Box 2088, Santa Fe, NM 87504-2088	
<i>F</i>	
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State of New Mexico Energy, Minerals & Natural Resources Department.

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## OIL CONSERVATION DIVISION PO Box 2088 Santa Fe, NM 87504-2088

Form C-102 Revised February 10, 1994 Instructions on back Submit to Appropriate District Office State Lease - 4 Copies Fee Lease - 3 Copies

AMENDED REPORT

|                                     |                                          |                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | CATION        | AND                | ACE                       | REAGE DEDI                   | CATION P            | LAT                              |                         |                                                                                                                 |
|-------------------------------------|------------------------------------------|--------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|--------------------|---------------------------|------------------------------|---------------------|----------------------------------|-------------------------|-----------------------------------------------------------------------------------------------------------------|
| API Number <sup>1</sup> Pool Code   |                                          |                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |               | •                  | <sup>3</sup> Pool Name    |                              |                     |                                  |                         |                                                                                                                 |
| 30.01                               | 5-2                                      | 9269                           | 3                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 9520          |                    | $\mathbf{L}_{\mathbf{c}}$ | oco Hills;                   | Queen, G            | Graybu                           | rg, s                   | San Andres                                                                                                      |
|                                     | * Property Code * Property Name          |                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |               |                    |                           | * Well Number                |                     |                                  |                         |                                                                                                                 |
|                                     | 001241 BALLARD GRAYBURG SA UNIT TRACT #5 |                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |               |                    |                           | 18                           |                     |                                  |                         |                                                                                                                 |
| 'OGRID No. Operator Name            |                                          |                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |               |                    | * Elevation               |                              |                     |                                  |                         |                                                                                                                 |
| 000817                              |                                          | ANADARKO PETROLEUM CORPORATION |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |               |                    |                           | . 3515                       |                     |                                  |                         |                                                                                                                 |
|                                     |                                          |                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |               | <sup>10</sup> Surf | face                      | Location                     | . •                 |                                  |                         | · · · · · · · · · · · · · · · · · · ·                                                                           |
| 1 1                                 | Section                                  | Township                       | Range                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | Lot Ida       | Feet from          | the                       | North/South Mae              | Fost from the       | EAN WON                          |                         | County                                                                                                          |
| G                                   | 8                                        | 18S                            | 29E                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |               | : 1350             |                           | NORTH                        | 1655                | EAST                             | 1<br>                   | EDDY                                                                                                            |
|                                     |                                          |                                | the second value of the se | tom Hole      |                    |                           | f Different Fro              | om Surface          |                                  |                         |                                                                                                                 |
| UL or lot no.                       | Section                                  | Township                       | Range                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | Lot Ida       | Feet from          | the .                     | North/South line             | Fost from the       | East/Wes                         | line                    | Cousty                                                                                                          |
| up r                                |                                          |                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |               |                    |                           |                              |                     |                                  |                         |                                                                                                                 |
| <sup>12</sup> Dedicated Acres<br>40 | Joint (                                  | or Lafill   " Co               | asolidatio                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | a Code   4 Q  | rder No.           |                           |                              |                     |                                  |                         |                                                                                                                 |
|                                     | ADIES                                    |                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |               |                    |                           |                              |                     |                                  |                         | · · · · · · · · · · · · · · · · · · ·                                                                           |
| NO ALLOW                            |                                          | OR A N                         | SON-ST.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | ANDARD'       | S COMPL            | SBI                       | ON UNTIL ALL<br>EEN APPROVED | INTERESTS H         | LAVE BEE                         | EN COI                  | NSOLIDATED                                                                                                      |
| 16                                  | T                                        |                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |               |                    |                           |                              |                     |                                  |                         |                                                                                                                 |
|                                     |                                          |                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |               |                    | •                         |                              | " OPE               | RATOR                            | CERI                    | TIFICATION                                                                                                      |
|                                     |                                          |                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |               | 5                  |                           |                              | ine and com         | ly that the in<br>whete to the b | formation<br>est of nev | contained herein is<br>browledge and belief                                                                     |
|                                     |                                          |                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |               | 350'               |                           |                              |                     | •                                |                         |                                                                                                                 |
|                                     |                                          |                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |               | <b>⊢</b> 1         |                           |                              |                     |                                  |                         | ]                                                                                                               |
|                                     |                                          |                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |               |                    |                           |                              |                     |                                  |                         | al                                                                                                              |
|                                     |                                          |                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |               | 6-                 | =                         | - 1655' -                    | min                 | -Bra                             | مرر                     | $\mathcal{Q}$                                                                                                   |
|                                     |                                          |                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |               |                    | N                         | 1055                         | Signature           | _                                |                         |                                                                                                                 |
|                                     |                                          |                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |               | / /                | N                         |                              | Mike<br>Printed Nam | Brasw                            | rell                    |                                                                                                                 |
|                                     | Í                                        |                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |               | / /                | $\backslash$              |                              |                     | d Fore                           | man                     |                                                                                                                 |
|                                     |                                          |                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |               | / /                |                           |                              | Title               | <b>B</b> 0.6                     |                         |                                                                                                                 |
|                                     |                                          |                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |               | / /                | $\backslash$              |                              | <u>09-2</u>         | 7-96                             |                         |                                                                                                                 |
|                                     | <u>-</u>                                 |                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | $\rightarrow$ |                    |                           |                              |                     |                                  |                         |                                                                                                                 |
|                                     |                                          |                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |               |                    |                           |                              | "SURV               | EYOR                             | CERT                    | IFICATION                                                                                                       |
|                                     |                                          |                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 1             |                    |                           |                              | I hereby cert       | fy that the we                   | di location             | s shown on this plas<br>I surveys made by                                                                       |
|                                     |                                          |                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |               |                    |                           |                              | me or under         | my supervisio                    | n, and the              | t surveys made by<br>It the same is true                                                                        |
|                                     | ·                                        |                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |               |                    |                           |                              | and correct u       | o the best of a                  | ny belief.              |                                                                                                                 |
|                                     |                                          |                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | · ·           |                    |                           |                              | Detection           | 9/23                             | /96                     |                                                                                                                 |
|                                     |                                          |                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |               |                    |                           |                              | Date of Surve       |                                  |                         | in the second |
|                                     |                                          |                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |               |                    |                           |                              | Signature and       | ERSONELL                         | -101 N                  |                                                                                                                 |
|                                     |                                          |                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |               |                    |                           |                              |                     | EN ME                            | で、                      | <b>\</b>                                                                                                        |
|                                     |                                          |                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |               |                    |                           |                              |                     | 1.3                              | 1 - 1                   |                                                                                                                 |
|                                     |                                          |                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |               |                    |                           | •                            | AEX                 | 3640                             | 1/18                    | <b>5</b>                                                                                                        |
|                                     |                                          |                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 1             |                    |                           |                              |                     | sectif                           |                         | Hen -                                                                                                           |
|                                     |                                          |                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |               | _                  |                           |                              | Centification       | The Format                       | 407/                    | 7                                                                                                               |

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301 BOYD, E ALLEN, TEXAS 75002 (214) 727-8367

## P. O. BOX 589 ALLEN, TEXAS 75002

In Texas (800) 442-5224



3000 the working Preseure

EXIBIT 1