| ORM 3160-5 June 1990) ORM 3160-5 UNITED STATES DEPARTMENT OF THE INTERIOR Artesia, NM 88210-2834 DEPARTMENT OF THE INTERIOR Artesia, NM 88210-2834 Budget Bureau No. 1004-0135 Expires: March 31, 1993 | | | | | | |
|---|--|--|--|--|--|--|
| SORM 3160-5 UNITED | STATES Artosia NM 8 | Budget Bureau No. 1004-0135 | | | | |
| (June 1990) DEPARTMENT O | F THE INTERIOR AT LOSICE | Expires: March 31, 1993 | | | | |
| BUREAU OF LAN | D MANAGEMENT | 5. Lease Designation and Serial No. | | | | |
| | NM 025778-A | | | | | |
| | | 6. If Indian, Allottee or Tribe Name | | | | |
| Do not use this form for proposals to drill or t Use "APPLICATION FOR PE | RMIT -" for such proposals | | | | | |
| | 1252627 | 7. If Unit or CA, Agreement Designation | | | | |
| SUBMIT IN T | NM 72013 | | | | | |
| 1. Type of Well | · · · · · · · · · · · · · · · · · · · | 8. Well Name and No. | | | | |
| Oil Gas Other | OCD RECEIVED N | Koehane C Fed #1 | | | | |
| | ARIE W | 9. API Well No. | | | | |
| 2. Name of Operator | Egy SIA ST | | | | | |
| Ocean Energy, Inc. | Str. av | 10. Field and Pool, or Exploratory Area | | | | |
| 3. Address and Telephone No. | 2 80202-4826 (303) 308-8863 | 11. County or Parish, State | | | | |
| 1670 Broadway, Suite 2800, Denver, CC | | | | | | |
| 4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 1980' FSL & 990' FWL Section 21-T18S-R31E | | Eddy NM | | | | |
| | | | | | | |
| 12. CHECK APPROPRIATE BO | CE, REPORT, OR OTHER DATA | | | | | |
| TYPE OF SUBMISSION | TYPE OF ACTION | | | | | |
| Notice of Intent | Abandonment | Change of Plans New Construction Non-Routine Fracturing Water Shut-Off Conversion to Injection Dispose Water Dispose Water | | | | |
| | Recompletion | New Construction | | | | |
| Subsequent Report | Plugging Back Casing Repair | Water Shut-Off | | | | |
| | Altering Casing | Conversion to Injection | | | | |
| Final Abandonment Notice | X Other Surface Comming | ling Ga Dispose Water | | | | |
| | (Note: Report results of multiple completion on Well | | | | | |
| | Completion or Recompletion Rep | ort and Log form.) | | | | |

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

Ocean Energy currently commingles the gas production from this well at the Littlefield EM Tank Battery, 20-T18S-R31E. The master meter for these wells is located NE/4 SW/4 NW/4 SE/4 of Section 20-T18S-R31E.

Production allocation will be based on individual wellhead check meters. The total flow through this meter will be divided into the approriate sales percentage of the allocation from each well.

| 14. I hereby certify that the foregoing is true and correct | Title Regulatory Coordinator | Date | 12/08/99 | <u></u> |
|---|--|------------|--------------------------------------|-------------------|
| (This space for Federal or State office use) | | | FEB 2 3 2000 | |
| Approved by[U-10: 500.) Britis | TRETHOLLOW | Date | FED DO LOO | |
| Conditions of approval, if any: SEE ATTACHED FOR CONDITIONS OF APPROVAL | | | | |
| Title 18 0.S.C. Section 1001, makes it a crime for any person knowingly and representations as to any matter within its jurisdiction. | willfully to make to any department or agency of the | e United S | States any false, fictitious or frau | dulent statement: |

