

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

N.M. Oil Division
311 S. 1st St. et
Artesia, NM 88210-2834

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

SUNDRY NOTICES AND REPORTS ON WELLS

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

SUBMIT IN TRIPLICATE

1. Type of Well <input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other	7. If Unit or CA, Agreement Designation
2. Name of Operator M. Brad Bennett, Inc	8. Well Name and No. Big Sinks Fed. Com #1
3. Address and Telephone No. PO Box 51510, Midland, Texas 79710-1510	9. API Well No. 30-015-23491
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 660' FNL & 1980' FEL of Sec 35, T-25-S, R-31-E, NMPM	10. Field and Pool, or Exploratory Area Ross Ranch (Wolfcamp)
	11. County or Parish, State Eddy, New Mexico

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

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

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.)*

Respectfully request permission to commingle the Yates Petroleum Corporation-Amoco "DB" Federal #1, unit J, Sec. 22, T-25-S, R-31-E and M. Brad Bennett, Inc.-Big Sinks Federal Com #1, unit B, Sec. 25, T-25-S, R-31-E, Eddy Co., and have allocation meters at each well site with volumes allocated back to allocation meters from the sales meter located at the Yates Petroleum Corporation-Almost Texas Unit #1, unit N, Sec. 2, T-26-S, R-31-E, Eddy Co.

Also, respectfully request change of purchaser to Sid Richardson Gas Company.

Thank you for your assistance.

**SEE ATTACHED FOR
CONDITIONS OF APPROVAL**

MAY 14 1998

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

Signed [Signature] Title Asst. Clerk Date 4/27/98

(This space for Federal or State office use)

Approved by _____ Title _____ Date _____
Conditions of approval, if any:

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

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

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

OIL CONSERVATION DIVISION

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

WELL API NO. 30-015-23491
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. NM-17232
7. Lease Name or Unit Agreement Name Big Sinks Fed. Com.
8. Well No. #1
9. Pool name or Wildcat Ross Ranch (Wolfcamp)

SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)	
1. Type of Well: OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER	
2. Name of Operator M. Brad Bennett, Inc.	
3. Address of Operator PO Box 51510, Midland, Texas 79710-1510	
4. Well Location Unit Letter <u>B</u> : <u>660'</u> Feet From The <u>north</u> Line and <u>1980'</u> Feet From The <u>east</u> Line Section <u>35</u> Township <u>25S</u> Range <u>31E</u> NMPM <u>Eddy</u> County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.)	

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
OTHER: <u>Off lease metering</u> <input checked="" type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
	CASING TEST AND CEMENT JOB <input type="checkbox"/>
	OTHER: <input type="checkbox"/>

12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

Respectfully request approval for off lease metering at El Paso meter located in S/2 of Unit N, Section 2, T-26-S, R-31-E, Eddy County, New Mexico.

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

SIGNATURE [Signature] TITLE President DATE 3/17/97
TYPE OR PRINT NAME M. Brad Bennett TELEPHONE NO. (915) 682-4336

(This space for State Use)

ORIGINAL SIGNED BY TIM W. GUM
DISTRICT II SUPERVISOR

APPROVED BY _____ TITLE _____ DATE MAR 28 1998

CONDITIONS OF APPROVAL, IF ANY:

1000000000



UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

M. Oil Cons. Division
3. 1st Street

dsf

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

SUNDRY NOTICES AND REPORTS ON WELLS

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

SUBMIT IN TRIPlicate

1. Type of Well

☐ Oil Well ☒ Gas Well ☐ Other

2. Name of Operator

M. Brad Bennett, Inc.

3. Address and Telephone No.

PO Box 51510, Midland, Texas 79710-1510 (915) 682-4336

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

660' FNL & 1980' FEL Sec 35, T-25-S, R-31-E

5. Lease Designation and Serial No.

NM-17232

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.

Big Sinks Fed. Com #1

9. API Well No.

30-015-23491

10. Field and Pool, or Exploratory Area

Ross Ranch (Wolfcamp)

11. County or Parish, State

Eddy County, New Mexico

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

TYPE OF SUBMISSION

- ☐ Notice of Intent
☐ Subsequent Report
☐ Final Abandonment Notice

TYPE OF ACTION

- ☐ Abandonment
☐ Recompletion
☐ Plugging Back
☐ Casing Repair
☐ Altering Casing
☒ Other off lease metering
☐ Change of Plans
☐ New Construction
☐ Non-Routine Fracturing
☐ Water Shut-Off
☐ Conversion to Injection
☐ Dispose Water

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

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

Respectfully request approval for off lease metering at El Paso meter located in S/2 of Unit N, Section 2, T-26-S, R-31-E, Eddy County, New Mexico.

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

Signed [Signature]

Title President, M. Brad Bennett, Inc. Date 3/5/97

(This space for Federal or State office use)

(ORIG. SGD.) DAVID R. GLASS

PETROLEUM ENGINEER

Approved by
Conditions of approval, if any:

Title

Date MAR 13 1997

SEE ATTACHED FOR

CONDITIONS OF APPROVAL

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

*See Instruction on Reverse Side



STATE OF NEW MEXICO

ENERGY, MINERALS AND NATURAL RESOURCES DEPARTMENT

OIL CONSERVATION DIVISION
ARTESIA DISTRICT OFFICE

BRUCE KING
GOVERNOR

P.O. DRAWER 88
ARTESIA NEW MEXICO 88211
(505) 748-1293

Date: November 18, 1991

M. Brad Bennett Inc.
P.O. Box 2062
Midland, Tx 79702

Re: Well ~~is~~ placed in pool ~~is~~

Gentlemen:

As the result of Division Order R-9609 the following described well ~~is~~ (has ~~been~~) been placed in the pool ~~is~~ shown below. This change in nomenclature has been made in our files. Please change your records to reflect the proper pool name. All subsequent reports must show this nomenclature until further notice.

North Ross Ranch - Wolfcamp Gas Pool
Big Sinks Fed. Com. #1 B-35-25-31

Transporters are advised, by copy of this letter, to change their records to reflect the pool name as established by this order, effective November 1, 1991.

Sincerely,

Darrell Moore

Darrell Moore
District Geologist

cc: Each Transporter Permian Yates
Santa Fe
Mae
Well File ✓
Joe Chism
Blm

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

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

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

State of New Mexico
Energy, Minerals and Natural Resources Department

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

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

CISF
21
6T
DP

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator M. Brad Bennett, Inc.		Well API No. 30-015-23491
Address P.O. Box 2062 Midland, Texas 79702		
Reason(s) for Filing (Check proper box) New Well <input type="checkbox"/> Other (Please explain) <input type="checkbox"/> Recompletion <input checked="" type="checkbox"/> Change in Transporter of: Change in Operator <input type="checkbox"/> Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>		
If change of operator give name and address of previous operator		

RECEIVED
JUL 22 1991
O. G. D.
ARTESIA OFFICE

II. DESCRIPTION OF WELL AND LEASE

Lease Name Big Sinks Fed. Com	Well No. 1	Pool Name, including Formation Ross Ranch (Wolfcamp)	Kind of Lease State (Federal) or Fee	Lease No. NM-1732
Location Unit Letter B : 660' Feet From The North Line and 1980' Feet From The East Line Section 35 Township 25 South Range 31 East, NMPM, Eddy County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> Perman	Address (Give address to which approved copy of this form is to be sent)	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> Vate	Address (Give address to which approved copy of this form is to be sent)	
If well produces oil or liquids, give location of tanks.	Unit B	Sec. 35
	Twp. 25	Rge. 31
	Is gas actually connected? Yes	When? 6-4-91

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
		X				X		X
Date Spudded	Date Compl. Ready to Prod. 6/9/91		Total Depth 15,700'		P.B.T.D. 14,075'			
Elevations (DF, RKB, RT, GR, etc.) 3350	Name of Producing Formation Wolfcamp		Top Oil/Gas Pay 13,140'		Tubing Depth 12,349'			
Perforations (13140-13154) & (13239-13254)					Depth Casing Shoe 4 1/2" @ 15,699			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
No change since previous form 9-330 dated 7/26/82					Part ID-2 11-1-91 PLA MCO camp Wolfcamp			

V. TEST DATA AND REQUEST FOR ALLOWABLE

OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours.)

Date First New Oil Run To Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas- MCF

GAS WELL

Actual Prod. Test - MCF/D 210 MCF/D	Length of Test 24 Hrs.	Bbls. Condensate/MMCF 0	Gravity of Condensate N/A
Testing Method (pilot, back pr.) Back Pr.	Tubing Pressure (Shut-in) 800	Casing Pressure (Shut-in) Pkr.	Choke Size 1/2"

VI. OPERATOR CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Signature
M. Brad Bennett
Engineer

Printed Name
M. Brad Bennett
Title
(915) 682-4336
Date 7/2/91
Telephone No.

OIL CONSERVATION DIVISION

Date Approved OCT 24 1991

By ORIGINAL SIGNED BY
MIKE WILLIAMS
Title SUPERVISOR, DISTRICT II

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN DUPL. E*

(See other In-
structions on
reverse side)

FOR APPROVED
OMB NO. 1004-0137
Expires: December 31, 1991

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL: OIL WELL ☐ GAS WELL ☒ DRY ☐ Other ☐

b. TYPE OF COMPLETION: NEW WELL ☐ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☒ DIFF. RESER. ☐ Other ☐

2. NAME OF OPERATOR

M. Brad Bennett, Inc.

3. ADDRESS AND TELEPHONE NO.

P.O. Box 2062 Midland, Texas 79702

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*

At surface 660' FNL & 1980' FEL

At top prod. interval reported below

At total depth

14. PERMIT NO.

DATE ISSUED

Re-complete

Re-complete

12. COUNTY OR
PARISH
Eddy

13. STATE

New Mexico

15. DATE RECOMPLETED 2/8/91 16. DATE T.D. REACHED N/A 17. DATE COMPL. (Ready to prod.) 6/9/91 18. ELEVATIONS (OF RKB, RT, OR, ETC.)* 3350 RT 19. ELEV. CASINGHEAD 3323

20. TOTAL DEPTH, MD & TVD 15,700' 21. PLUG BACK T.D., MD & TVD 14,075' 22. IF MULTIPLE COMPL., HOW MANY* N/A 23. INTERVALS DRILLED BY ROTARY TOOLS 0-15700' CABLE TOOLS N/A

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 13140' - 13254' (Wolfcamp) 25. WAS DIRECTIONAL SURVEY MADE Yes

26. TYPE ELECTRIC AND OTHER LOGS RUN CNL/FDC/DLL 27. WAS WELL CORRED N/A

28. CASING RECORD (Report all strings set in well)					
CASING SIZE/GRADE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	TOP OF CEMENT, CEMENTING RECORD	AMOUNT PULLED
20"/K-55	133 #/Ft.	981'	26"	Surf/2000 sx Cl. H	N/A
13 3/8"/K-55	54.5 #/Ft.	4366'	17 1/2"	Surf/5400 sx Lite & Cl.C	N/A
9 5/8"/S-95	53.5 #/Ft.	12140'	12 1/4"	6820'/3100 sx Lite & Cl.H	N/A

29. LINER RECORD				30. TUBING RECORD		
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)
7"	11,634'	14,899'	650 sx.		2 7/8"	12,349
4 1/2"	14,403'	15,699'	200 sx.			12,288'

31. PERFORATION RECORD (Interval, size and number)		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
		DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
(13,140'-13,154', Total 16 holes, .39 inches)		13,140-13,254	Acidized w/5000 gal.15% HCL
(13,239'-13,254', Total 17 holes, .39 inches)			

33. PRODUCTION							
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)				WELL STATUS (Producing or shut-in)	
6/4/91		Flowing				Producing	
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
6/24/91	24	1/4"		0			N/A
FLOW, TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)	
800	Pkr.		0	210	17	N/A	

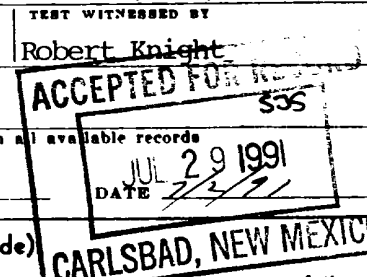
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Sold

35. LIST OF ATTACHMENTS

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records

SIGNED

TITLE



*(See Instructions and Spaces for Additional Data on Reverse Side)

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

GEOLOGIC MARKERS

[illegible]