

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB No. 1004-0135
Expires November 30, 2000

DIST. 3

SUNDRY NOTICES AND REPORTS ON WELLS
*Do not use this form for proposals to drill or to re-enter an
Abandoned well. Use Form 3160-3 (APD) for such proposals.*

SUBMIT IN TRIPLICATE – Other instructions on reverse side

1. Type of Well <input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No. SF - 08000
2. Name of Operator BP America Production Company Attn: Cherry Hlava		6. If Indian, Allottee or tribe Name
3a. Address P.O. Box 3092 Houston, TX 77253	3b. Phone No. (include area code) 281-366-4081	7. If Unit or CA Agreement, Name and/or No.
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) #27S - 1670' FSL & 990' FWL # 126 - 1300' FSL & 1190' FWL Sec 26 T29N R09W		8. Well Name and No. Florance 27S & Florance 126
		9. API Well No. 30-045-33130 & 30-045-25022
		10. Field and Pool, or Exploratory Area Basin Fruitland Coal, Dakota & Chacra
		11. County or Parish, State San Juan County, New Mexico

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

TYPE OF SUBMISSION	TYPE OF ACTION		
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume) <input type="checkbox"/> Water shut-Off
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation <input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Water Disposal
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	Other Surface Commingle

13. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recompleate horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompleation in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.

BP America Production Company respectfully request authorization to surface commingle gas production from the Basin Fruitland Coal, Basin Dakota and Otero Chacra from our Florance 27S & Florance 126 wells. Surface commingling Fruitland Coal production will consist of the Florance 27S 30-045-33130 and DK & CH production will be from the Florance 126 30-045-25022. The production from each well will be metered prior to commingling then the commingled production will flow into & through the separator where the liquids will be removed. The commingled gas will then be sent through compression prior to entering the sales meter.

The working interest, royalty and overriding royalty interest owners in the subject wells are different therefore notification is required (sent certified return receipt 10/30/06). The proposed commingling of production is to reduce operating expenses between the wells and will result in increased economic life of the wells.

Attached in support of our application are copies of documentation submitted to the NMOCD for State approval. **PC1181**

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

Cherry Hlava

Title **Regulatory Analyst**

Signature

Cherry Hlava

Date **10/30/2006**

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by <i>Shawn Juhn</i>	Title <i>Prod. Acct. Tech.</i>	Date <i>11/15/06</i>
Conditions of approval, if any, are attached. Approval of this notice does not warrant or Certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.		Office <i>BLM ffo</i>

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make 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.

NMOCD

District I
1625 N. French Drive, Hobbs, NM 88240
District II
1301 W. Grand Ave, Artesia, NM 88210
District III
1000 Rio Brazos Road, Aztec, NM 87410
District IV
1220 S. St Francis Dr, Santa Fe, NM
87505

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-107-B
Revised June 10, 2003

OIL CONSERVATION DIVISION
1220 S. St Francis Drive
Santa Fe, New Mexico 87505

Submit the original
application to the Santa Fe
office with one copy to the
appropriate District Office.

APPLICATION FOR SURFACE COMMINGLING (DIVERSE OWNERSHIP)

OPERATOR NAME: **BP America Production Company**

OPERATOR ADDRESS: **P O Box 3092 Houston, TX 77253**

APPLICATION TYPE:

☒ Pool Commingling ☐ Lease Commingling ☐ Pool and Lease Commingling ☐ Off-Lease Storage and Measurement (Only if not Surface Commingled)

LEASE TYPE: ☐ Fee ☐ State ☒ Federal

Is this an Amendment to existing Order? ☐ Yes ☒ No If "Yes", please include the appropriate Order No. _____

Have the Bureau of Land Management (BLM) and State Land office (SLO) been notified in writing of the proposed commingling

☒ Yes ☐ No

(A) POOL COMMINGLING

Please attach sheets with the following information

(1) Pool Names and Codes	Gravities / BTU of Non-Commingled Production	Calculated Gravities / BTU of Commingled Production		Calculated Value of Commingled Production	Volumes
Basin Fruitland Coal (71629)	1138 BTU	1138 BTU		400	400
Basin Dakota (71599)	1210 BTU	1210 BTU		400	400
Basin Dakota (82329)	1210 BTU	1210 BTU		400	400

(2) Are any wells producing at top allowables? ☐ Yes ☒ No

(3) Has all interest owners been notified by certified mail of the proposed commingling? ☒ Yes ☐ No.

(4) Measurement type: ☒ Metering ☐ Other (Specify)

(5) Will commingling decrease the value of production? ☐ Yes ☒ No If "yes", describe why commingling should be approved

(B) LEASE COMMINGLING

Please attach sheets with the following information

(1) Pool Name and Code.

(2) Is all production from same source of supply? ☐ Yes ☐ No

(3) Has all interest owners been notified by certified mail of the proposed commingling? ☐ Yes ☐ No

(4) Measurement type: ☐ Metering ☐ Other (Specify)

(C) POOL and LEASE COMMINGLING

Please attach sheets with the following information

(1) Complete Sections A and E.

(D) OFF-LEASE STORAGE and MEASUREMENT

Please attached sheets with the following information

(1) Is all production from same source of supply? ☐ Yes ☐ No

(2) Include proof of notice to all interest owners.

(E) ADDITIONAL INFORMATION (for all application types)

Please attach sheets with the following information

(1) A schematic diagram of facility, including legal location.

(2) A plat with lease boundaries showing all well and facility locations. Include lease numbers if Federal or State lands are involved.

(3) Lease Names, Lease and Well Numbers, and API Numbers.

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

SIGNATURE: Cherry Hlava

TITLE: Regulatory Analyst DATE: 10/29/2006

TYPE OR PRINT NAME Cherry Hlava

TELEPHONE NO.: 281-366-4081

E-MAIL ADDRESS: hlavacl@bp.com

IDENTITY: NUMBER OF READER IDENTIFIERS (LAST NAME)

Revised October 18, 1994
Instructions on back
Submit to Appropriate District Office
State Lease - 4 Copies
Fee Lease - 3 Copies

☐ AMENDED REPORT

OIL CONSERVATION DIVISION
2040 South Pacheco
Santa Fe, NM 87505

WELL LOCATION AND ACREAGE DEDICATION PLAT

API Number		Pool Code		Pool Name	
30-045-25022		82329		OTERO CHACRA (GAS) EXT	
Property Code		Property Name			Well Number
000518		FLORANCE			126
OGRID No.		Operator Name			Elevation
000778		RMPCO PRODUCTION CO.			5626

¹⁰ Surface Location

UL or lot no.	Section	Township	Range	Lot Ida	Feet from the	North/South line	Feet from the	East/West line	County
L	26	29N	09W		1300	SOUTH	1190	WEST	SD

" Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Ida	Feet from the	North/South line	Feet from the	East/West line	County
---------------	---------	----------	-------	---------	---------------	------------------	---------------	----------------	--------

<input type="checkbox"/> Dedicated Assets 145.33	<input type="checkbox"/> Joint or Infill	<input type="checkbox"/> Consolidation Code	<input type="checkbox"/> Order No.
---	--	---	------------------------------------

NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED
OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION

16.			17 OPERATOR CERTIFICATION I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief. <div style="border-bottom: 1px solid black; margin-bottom: 5px;"> <i>Patty Haebele</i> <small>Signature</small> </div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;"> Patty Haebele <small>Printed Name</small> </div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;"> Staff Assistant <small>Title</small> </div> <div style="border-bottom: 1px solid black;"> 5-16-96 <small>Date</small> </div>
<div style="border: 2px solid black; width: 100px; height: 100px; margin: 10px auto; position: relative;"> 1190 1300 </div>	<div style="border: 1px solid black; padding: 10px; width: fit-content; margin: 0 auto;"> <div style="font-size: 2em; font-weight: bold; letter-spacing: 5px;">RECEIVED</div> <div style="font-size: 1.2em; margin-top: 5px;">MAY 20 1996</div> <div style="font-size: 1.2em; margin-top: 5px;">OIL CON. DIV.</div> <div style="font-size: 1.2em; margin-top: 5px;">OFF. 3</div> </div>		
	18 SURVEYOR CERTIFICATION I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief. <div style="border-bottom: 1px solid black; margin-bottom: 5px;"> <small>Date of Survey</small> </div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;"> <small>Signature and Seal of Professional Surveyor:</small> </div> <div style="border-bottom: 1px solid black;"> <small>Certificate Number</small> </div>		

NEW MEXICO OIL CONSERVATION COMMISSION
WELL LOCATION AND ACREAGE DEDICATION PLAT

Form C-102
Supersedes C-128
Effective 1-4-65

30-045-25022

All distances must be from the outer boundaries of the Section

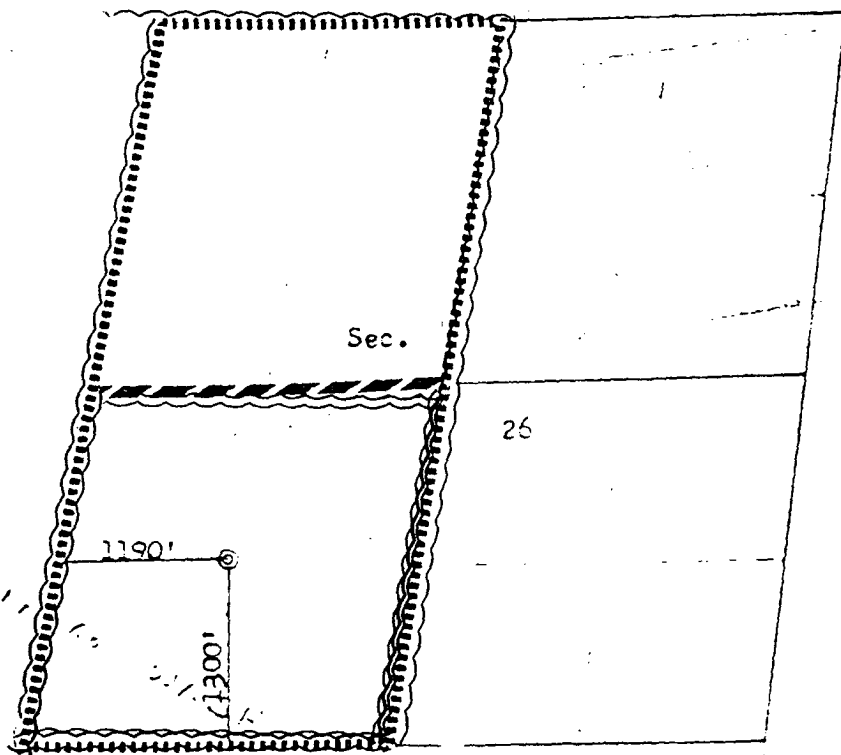
Operator MEXCO OIL COMPANY			Lease FLORANCE		Well No. 126
Unit Letter L	Section 26	Township 29N	Range 9W	County San Juan	
Actual Footage Location of Well: 1300 feet from the South line and 1190 feet from the West line					
Ground Level Elev. 5626	Producing Formation DAKOTA/CHACRA	Pool BASIN DAKOTA/CHACRA	Dedicated Acreage: 320/160 Acres		

1. Outline the acreage dedicated to the subject well by colored pencil or hachure marks on the plat below.
2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).
3. If more than one lease of different ownership is dedicated to the well, have the interests of all owners been consolidated by communitization, unitization, force-pooling, etc?

☐ Yes ☐ No If answer is "yes," type of consolidation _____

If answer is "no," list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if necessary.) _____

No allowable will be assigned to the well until all interests have been consolidated (by communitization, unitization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interests, has been approved by the Commission.



Scale: 1"=1320'

CERTIFICATION

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

R.A. Nishen

Name

Position

Company

Date

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my knowledge and belief.

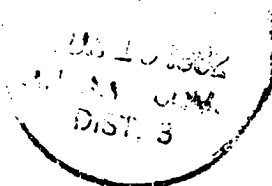
Date Surveyed

June 10, 1960

Registered Professional Engineer and Land Surveyor

Fred B. Kennedy
Certificate No.

3952



District I
PO Box 1980, Hobbs NM 88241-1980
District II
PO Drawer KK, Artesia, NM 87211-0719
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
PO Box 2088, Santa Fe, NM 87504-2088

State of New Mexico
Energy, Minerals & Natural Resources Department

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

Form C-11

Revised February 21, 1995

Instructions on back
Submit to Appropriate District Office
State Lease - 4 Copies
Fee Lease - 3 Copies

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

API Number 30-045-33130		Pool Code 71629		Pool Name Basin Fruitland Coal	
Property Code 000 518		Property Name Florance			Well Number # 27S
OGRID No. 000 778		Operator Name BP AMERICA PRODUCTION COMPANY			Elevation 5627

10 Surface Location

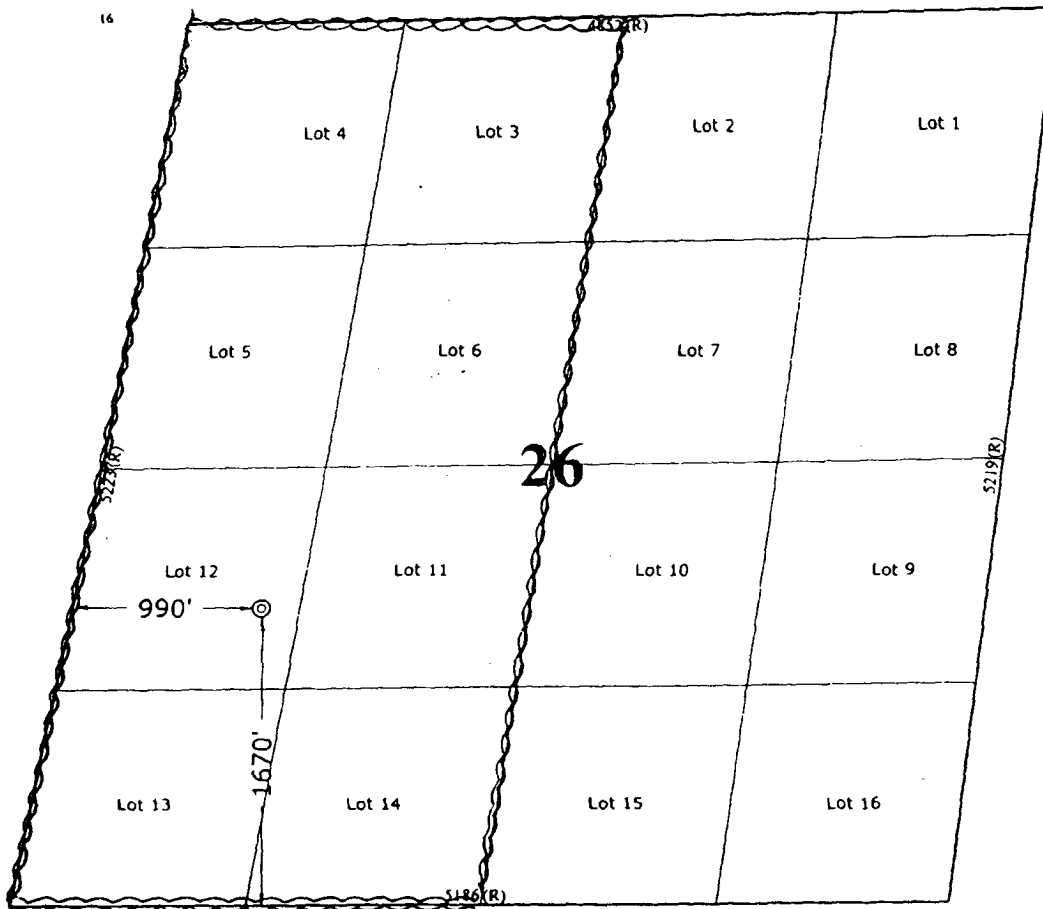
UL or Lot No.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
L (Lot 12)	26	29 N	9 W		1670	SOUTH	990	WEST	SAN JUAN

11 Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County

Dedicated Acres 295.72	Joint or Infill	Consolidation Code	Order No.
---------------------------	-----------------	--------------------	-----------

NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED
OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION



17 OPERATOR CERTIFICATION

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

Signature
Cherry Hlava
Printed Name
Cherry Hlava
Title
Regulatory Analyst
Date
5-25-05

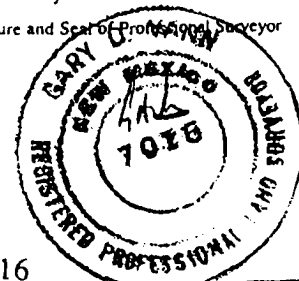
18 SURVEYOR CERTIFICATION

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief.

Restaked: May 10, 2005
December 15, 2004

Date of Survey

Signature and Seal of Professional Surveyor



7016
Certificate Number

Florance 27S & 126 Shared

Compression

