

District I - (505) 393-6161  
1625 N. French Dr  
Hobbs, NM 88241-1980  
District II - (505) 748-1283  
811 S. First  
Artesia, NM 88210  
District III - (505) 334-6178  
1000 Rio Brazos Road  
Aztec, NM 87410  
District IV - (505) 827-7131

New Mexico  
Energy Minerals and Natural Resources Department  
Oil Conservation Division  
2040 South Pacheco Street  
Santa Fe, New Mexico 87505  
(505) 827-7131

Form C-140  
Revised 06/99

SUBMIT ORIGINAL  
PLUS 2 COPIES  
TO APPROPRIATE  
DISTRICT OFFICE

APPLICATION FOR  
WELL WORKOVER PROJECT

RECEIVED  
AUG 27 1999  
OIL CON. DIV.  
DIST. 3

I. Operator and Well

Operator name & address <b>Amoco Production Company</b> <b>P.O. Box 3092</b> <b>Houston, TX 77253</b>						GRID Number <b>000778</b>		
Contact Party <b>Mary Corley</b>						Phone <b>281-366-4491</b>		
Property Name <b>Elliott Gas Com E</b>				Well Number <b>1</b>		API Number <b>30-045-09040</b>		
UL <b>A</b>	Section <b>34</b>	Township <b>30N</b>	Range <b>9W</b>	Feet From The <b>990'</b>	North/South Line <b>North</b>	Feet From The <b>990'</b>	East/West Line <b>East</b>	County <b>San Juan</b>

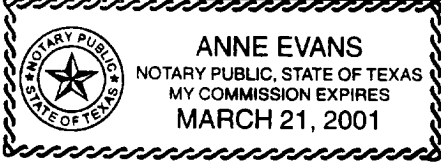
II. Workover

Date Workover Commenced: <b>October 13 1998</b>	Previous Producing Pool(s) (Prior to Workover): <b>Blanco Mesaverde</b>
Date Workover Completed: <b>October 13 1998</b>	

III. Attach a description of the Workover Procedures performed to increase production.

IV. Attach a production decline curve or table showing at least twelve months of production prior to the workover and at least three months of production following the workover reflecting a positive production increase.

V. AFFIDAVIT:

State of <u>Texas</u> )		
) ss.		
County of <u>Harris</u> )		
<u>Mary Corley</u> , being first duly sworn, upon oath states:		
1. I am the Operator, or authorized representative of the Operator, of the above-referenced Well.		
2. I have made, or caused to be made, a diligent search of the production records reasonably available for this Well.		
3. To the best of my knowledge, this application and the data used to prepare the production curve and/or table for this Well are complete and accurate.		
Signature <u>Mary Corley</u>	Title <u>Sr. Business Analyst</u>	Date <u>August 25 1999</u>
SUBSCRIBED AND SWORN TO before me this <u>25</u> day of <u>August</u> , 1999.		
		<u>Anne Evans</u> Notary Public
My Commission expires: <u>March 21 2001</u>		

FOR OIL CONSERVATION DIVISION USE ONLY:

VI. CERTIFICATION OF APPROVAL:

This Application is hereby approved and the above-referenced well is designated a Well Workover Project and the Division hereby verifies the data shows a positive production increase. By copy hereof, the Division notifies the Secretary of the Taxation and Revenue Department of this Approval and certifies that this Well Workover Project was completed on 10/17, 98.

Signature District Supervisor <u>35.8</u>	OCD District <u>3</u>	Date <u>10/15/99</u>
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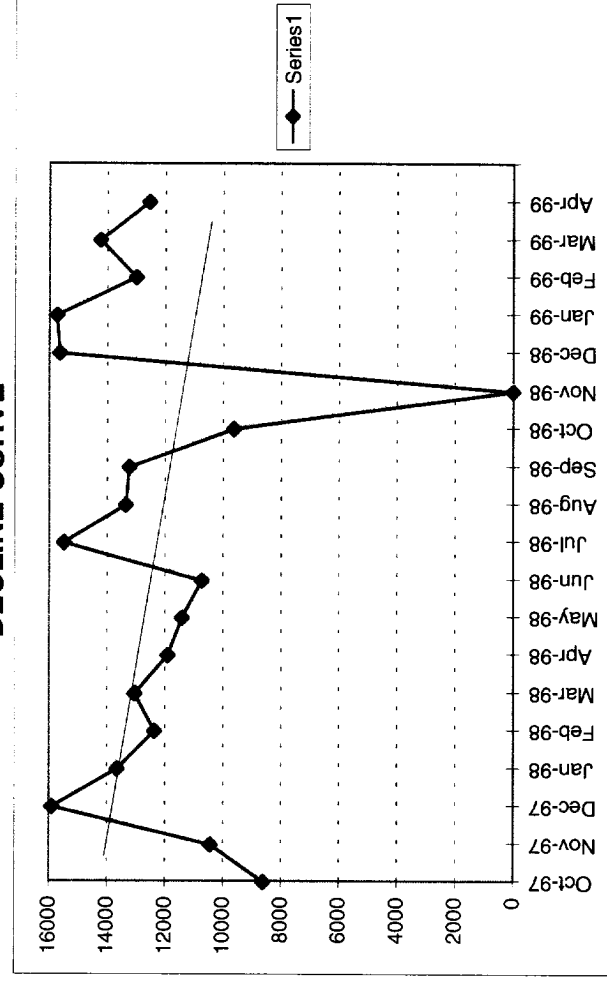
VII. DATE OF NOTIFICATION TO THE SECRETARY OF THE TAXATION AND REVENUE DEPARTMENT: \_\_\_\_\_

**ELLIOTT GAS COM 1**  
**BLANCO MESAVERDE POOL**  
**API 30-045-09040**  
**FLAC # 923943-01**  
**LOCATION S34 T30N R9W**  
**INSTALLATION OF INDIVIDUAL WELLHEAD COMPRESSOR**  
**COMPLETED 10/13/98**

**PRODUCTION TABLE**

Oct-97	8611
Nov-97	10436
Dec-97	15907
Jan-98	13655
Feb-98	12353
Mar-98	13039
Apr-98	11895
May-98	11410
Jun-98	10725
Jul-98	15490
Aug-98	13355
Sep-98	13238
Oct-98	9628
Nov-98	0
Dec-98	15641
Jan-99	15740
Feb-99	12995
Mar-99	14241
Apr-99	12539

**DECLINE CURVE**



**INSTALLED INDIVIDUAL WELLHEAD COMPRESSOR TO ULOAD LIQUIDS AND INCREASE PRODUCTION.**