

Energy Minerals and Natural Resources Department

Oil Conservation Division

2040 South Pacheco Street
Santa Fe, New Mexico 87505
(505) 827-7131SUBMIT ORIGINAL
PLUS 2 COPIES
TO APPROPRIATE
DISTRICT OFFICERECEIVED
OCT 25 1999
OIL CON. DIV.
DIST. 3APPLICATION FOR
WELL WORKOVER PROJECTDistrict I - (505) 393-6161
1625 N. French Dr
Tobbs, 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

I. Operator and Well

Operator name & address Koch Exploration Company 20 E. Greenway Plaza, Houston, TX 77046						OGRID Number 012807	
Contact Party Debbie Snow						Phone 713-544-7334	
Property Name Carle #1				Well Number		API Number 30-045-0939500	
UL C	Section 20	Township 30N	Range 11W	Feet From The 966	North/South Line North	Feet From The 1575	East/West Line West
							County San Juan

II. Workover

Date Workover Commenced: 1-23-99	Previous Producing Pool(s) (Prior to Workover): Pictured Cliffs
Date Workover Completed: 2-11-99	

- 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 Texas)County of Harris) ss.Debbie Snow, being first duly sworn, upon oath states:

- I am the Operator, or authorized representative of the Operator, of the above-referenced Well.
- I have made, or caused to be made, a diligent search of the production records reasonably available for this Well.
- 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 Debbie Snow Title Engineering Asst. Date 10-19-99
SUBSCRIBED AND SWORN TO before me this 19 day of October, 1999.JILLIAN LYNN MCLEAN
MY COMMISSION EXPIRES
OCTOBER 8, 2002

Notary Public

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 2/11/99.

Signature District Supervisor <u>SS.3</u>	OCD District <u>3</u>	Date <u>12/23/99</u>
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VII. DATE OF NOTIFICATION TO THE SECRETARY OF THE TAXATION AND REVENUE DEPARTMENT: _____