# 1043 Ct. French Let 20bbs, NM 88241-1980 20bbs, NM 88241-1980 20bbs; 11 - (505) 748-1283 811 S. First Arnesin, NM 88210 20bs; 16 - (505) 334-6178 1000 Rio Brazzo Road Aznoc, NM 87410 20bs; 17 - (505) 827-7131

VII.

### INEM INTEXICO

Energy Minerals and Natural Resources Department

Oil Conservation Division 2040 South Pacheco Street Santa Fe, New Mexico 87505 (505) 827-7131 SUBMIT ORIGINAL
PLUS 2 COPIES
TO APPROPRIATE

14L

Revised 06/99

APPLICATION FOR VELL WORKOVER PROJECT

|  |   |                 |            | <u>w</u>            | ELL WORKOVE         | R PRO               | <u>JECT</u> |         | $\Pi\Pi$     | Jul 1000                               |          |  |  |
|--|---|-----------------|------------|---------------------|---------------------|---------------------|-------------|---------|--------------|--|----------|--|--|
| 1  | Operat  | tor and We      | ıli        |                     |                     |                     |             |         | <b>○</b> [   | II CON. DIV.                           |          |  |  |
| Operato  | r name & a  | ndmber 1516 3   |            |                     |                     |                     |             |         |              |  |          |  |  |
| Phil   | lips Pe   | etroleum        |            |                     | On Control          |                     |             |         |              |  |          |  |  |
| 5525 Hwy. 64   |   |                 |            |                     |                     |                     |             |         |              |  |          |  |  |
| Farm   | ington  | <u>, NM 874</u> |            | 017654              |                     |                     |             |         |              |  |          |  |  |
| Contact Party Patsy Clugston   |   |                 |            |                     |                     |                     |             |         |              | Phone 505-599-3454                     |          |  |  |
| Property Name  |   |                 |            |                     |                     |                     | Well Number |         | API Number   |  |          |  |  |
| San  |   | 32-8 Unit       |            |                     |                     |                     | 228         |         | 30-045-27771 |  |          |  |  |
| UL   | Section   | Township        | Range      | Feet From The       | North/South Line    |                     | rom The     | EastV   | Vest Line    | County                                 |          |  |  |
| G  <br>11.   | 16<br><b>Worko</b> v  | 31N             | 8W         | 1343                | North               | 1.78                | 31          | Fas     | st           | San Juan                               |          |  |  |
|  |   | mmenced:        | Previous   | Producing Pool(s) ( | Prior to Workover)  |                     | <del></del> |         | <del></del>  |  | _        |  |  |
| 9/11   |   |                 |            |                     | i no to troinoroi). |                     |             |         |              |  |          |  |  |
| Date Wo  | rkover Co   | mpleted:        | 1          |                     |                     |                     |             |         |              |  |          |  |  |
| 9/14   | <del>` ` ` `                              </del>  |                 |            | in Fruitland        |                     |                     |             |         |              | ·                                      | _        |  |  |
| III.   |   |                 |            |                     | edures performe     |                     |             |         |              |  |          |  |  |
| IV.  | Attach :  | a production    | on aeciin  | e curve or table    | showing at least    | tweive              | months      | of prod | uction pr    | ior to the workover and at             |          |  |  |
| V.   | AFFIDA  |                 | s or proc  | luction tollowing   | the workover ref    | necung              | a positiv   | e proau | iction inc   | rease.                                 |          |  |  |
| <u> </u>   |   | New Me          | vico       |                     |                     |                     |             |         |              |  |          |  |  |
|  |   | <u> New Me</u>  | KICO       | /<br>) ss.          |                     |                     |             |         |              |  |          |  |  |
|  | County of <u>San Juan</u> )   |                 |            |                     |                     |                     |             |         |              |  |          |  |  |
|  | Patsy Clugston , 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 be       | st of my   | knowledge, this     | application and     | the data            | a used to   | prepar  | e the pro    | eduction curve and/or table            | <b>;</b> |  |  |
|  | (   | torthis vv      | ell are co | omplete and acc     | curate.             |                     |             |         |              |  |          |  |  |
| Signati  | ra X  | TI.             | Ol,        | eston               | Title Poquil:       | toru                | λecieta     | nt      | Det          | e 7/13/99                              |          |  |  |
| Signature Title Regulatory Assistant Date 7/13/99  SUBSCRIBED AND SWORN TO before me this 13th day of July 1999. |   |                 |            |                     |                     |                     |             |         |              |  |          |  |  |
| 00000  | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,   |                 |            |                     | 11.                 |                     |             |         | <b>-</b> '   |  |          |  |  |
|  |   |                 |            |                     | 1 Hilli             | an C                | broad       | e [     |              | OFFICIAL SEAL                          |          |  |  |
|  |   |                 |            |                     | Notary Pu           |                     | <u> </u>    |         |              | NOTARY PUBLIC - NEW MEXICO             |          |  |  |
| My Cor   | nmission  | n expires: _    |            |                     |                     |                     |             | 19      | N.           | Mary Bond Filed with Secretary of Stat | •        |  |  |
|  |   |                 |            |                     |                     |                     |             | L       | M            | Y COMMISSION EXPIRES 10-2-44           | لـــ     |  |  |
| FOD 64   | 001105  |                 |            |                     |                     |                     |             |         |              |  | =        |  |  |
| VI.  | CEDTIE  | RVATION I       | DIVISION   | USE ONLY:           |                     |                     |             |         |              |  |          |  |  |
| <b>V</b> 1.  |   |                 |            |                     |                     |                     |             |         |              |  |          |  |  |
|  | 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 |                 |            |                     |                     |                     |             |         |              |  |          |  |  |
|  | complet   | ted on          | 971        | 4.38                |                     | . <del>4</del> 1.04 |             | unc3 l  | urat uno t   | rton troncoron i loject wa             | -        |  |  |
|  |   |                 | t          |                     | •                   |                     |             |         |              |  |          |  |  |
| Signature  | District Su   | pervisor        |            | , (                 | OCD Distric         | <del>*</del> *      |             | Date    | 1            | , .                                    | $\neg$   |  |  |
|  |   |                 | بك         | <u>-</u> S. (       |                     | 7                   |             |         | 37/          | 1/09                                   |          |  |  |

DATE OF NOTIFICATION TO THE SECRETARY OF THE TAXATION AND REVENUE DEPARTMENT:

# San Juan 32-8 Unit #228 E-3868-2; API # 30-045-27771 Unit G, 1343' FNL & 1781' FEL Section 16, T31N, R8W; San Juan County, NM

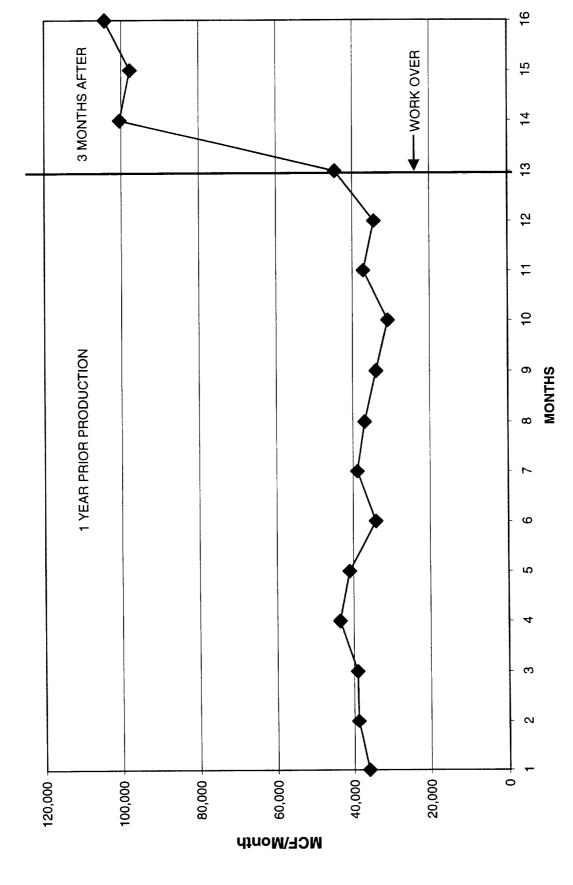
# Description of Workover Procedure used to increase production of subject well:

### A compressor was installed and the work entailed:

- 1. Taking exiting surface equipment off.
- 2. Replacing old equipment with bigger equipment, (i.e... bigger separator and flow lines).
- 3. Installing compressor manifold.
- 4. Debottlenecking location eliminating any restrictions between wellhead and meter-run.
- 5. Installing compressor and hooking up.

The type of compressor installed is Cooper - 305 hp. Work began approx. 9/11/98 and was completed 9/14/98.

32-8 #228 Workover Production Increase



| API#         | 32-8 | #228         | MCF/Month |
|--------------|------|--------------|-----------|
| 30-045-27771 |      | 1            | 36,095    |
|              |      | 2            | 38,862    |
|              |      | 3            | 39,073    |
|              |      | 4            | 43,585    |
|              |      | 5            | 41,031    |
|              |      | 6            | 34,060    |
|              |      | 7            | 38,902    |
|              |      | 8            | 36,916    |
|              |      | 9            | 33,890    |
|              |      | 10           | 30,819    |
|              |      | 11           | 37,164    |
|              |      | 12           | 34,348    |
| WORK OVER    |      | <b>—</b> ▶13 | 44,587    |
|              |      | 14           | 100,398   |
|              |      | 15           | 97,783    |
|              |      | 16           | 104,230   |