

APPROVED
MAR 28 1961
E. W. SUTHERLAND
ACTING DISTRICT ENGINEER

(SUBMIT IN TRIPLICATE)

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

Indian Agency Ignacio
Allottee Ute Mtn Tribal
Lease No. 14-20-604-1950

SUNDRY NOTICES AND REPORTS ON WELLS

NOTICE OF INTENTION TO DRILL	<input checked="" type="checkbox"/>	SUBSEQUENT REPORT OF WATER SHUT-OFF	
NOTICE OF INTENTION TO CHANGE PLANS		SUBSEQUENT REPORT OF SHOOTING OR ACIDIZING	
NOTICE OF INTENTION TO TEST WATER SHUT-OFF		SUBSEQUENT REPORT OF ALTERING CASING	
NOTICE OF INTENTION TO REDRILL OR REPAIR WELL		SUBSEQUENT REPORT OF REDRILLING OR REPAIR	
NOTICE OF INTENTION TO SHOOT OR ACIDIZE		SUBSEQUENT REPORT OF ABANDONMENT	
NOTICE OF INTENTION TO PULL OR ALTER CASING		SUPPLEMENTARY WELL HISTORY	
NOTICE OF INTENTION TO ABANDON WELL			

(INDICATE ABOVE BY CHECK MARK NATURE OF REPORT, NOTICE, OR OTHER DATA)

March 24, 1961

Well No. Ute #19 is located 570 ft. from [S] line and 1900 ft. from [E] line of sec. 26
S4 SE Sec. 26 T-31-N R-16-W NMPM
 (1/4 Sec. and Sec. No.) (Twp.) (Range) (Meridian)
Horseshoe Gallup San Juan New Mexico
 (Field) (County or Subdivision) (State or Territory)

The elevation of the derrick floor above sea level is 5500 ft.

DETAILS OF WORK

(State names of and expected depths to objective sands; show sizes, weights, and lengths of proposed casings; indicate mudding jobs, cementing points, and all other important proposed work)

We propose to drill a well at the above location to an approximate total depth of 1800'. 100' of 8 5/8" O.D. casing will be set and cemented to surface. Completion is contemplated in the Gallup formation. A 4 1/2" O.D. casing oil string will be used.



I understand that this plan of work must receive approval in writing by the Geological Survey before operations may be commenced.

Company The Atlantic Refining Company

Address P. O. Box 520

Casper, Wyoming

By Ad Klopfer/bc

Title Regional Drilling Manager

14-50-604-1250
Life Men T-10
1984

1984

1984

1984

1984

1984

1984

1984

1984

1984

1984

1984

1984

1984

1984

1984

1984

the purpose of this is to provide a list of names of persons who are known to be in the area of the above location. This list is being provided for your information and is not intended to be used for any other purpose. The names are listed in alphabetical order and are based on the information provided to us by the persons who have been identified as being in the area of the above location. A list of names will be made.

The above is being provided

to the following

person

1984

1984

NEW MEXICO OIL CONSERVATION COMMISSION

Well Location and Acreage Dedication Plat

Section A.

Date March 24, 1961

Operator THE ATLANTIC REFINING COMPANY Lease UTE
 Well No. 19 Unit Letter 0 Section 26 Township 31 NORTH Range 16 WEST, NMPM
 Located 570 Feet From the SOUTH Line, 1900 Feet From the EAST Line
 County SAN JUAN G. L. Elevation 5502.0 Dedicated Acreage 39.644 Acres
 Name of Producing Formation _____ Pool _____

1. Is the Operator the only owner in the dedicated acreage outlined on the plat below?
 Yes X No _____
2. If the answer to question one is "no", have the interests of all the owners been consolidated by communitization agreement or otherwise? Yes _____ No _____. If answer is "yes", Type of Consolidation _____.
3. If the answer to question two is "no", list all the owners and their respective interests below:

Owner

Land Description

Section B.

This is to certify that the information in Section A above is true and complete to the best of my knowledge and belief.

The Atlantic Refining Company

(Operator)

Ad Klesper

(Representative)

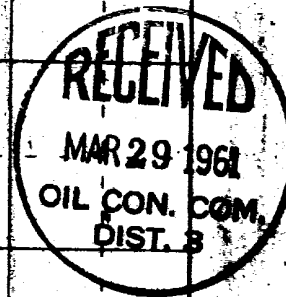
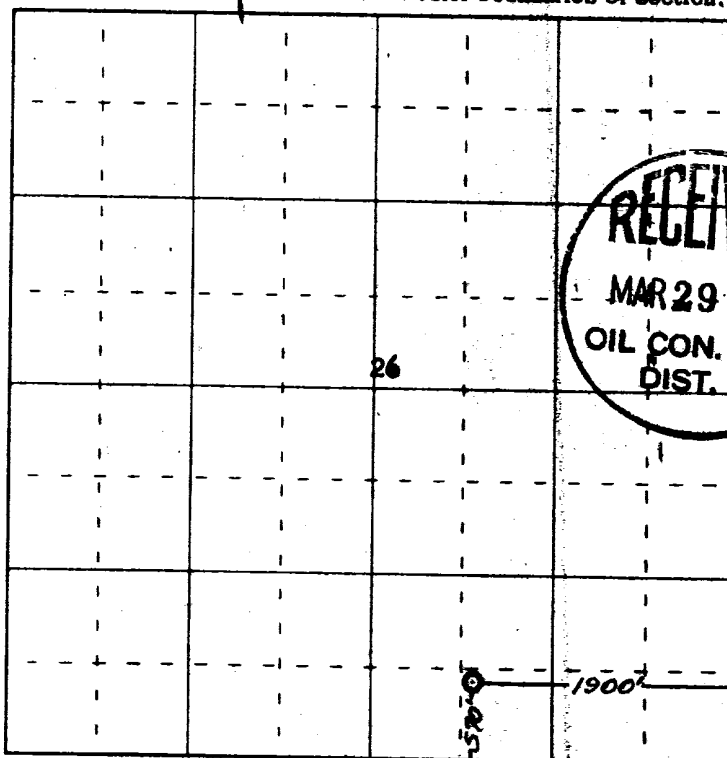
P.O. Box 520

(Address)

Casper, Wyoming

Ref: SJE plat of survey dated
 October 1958

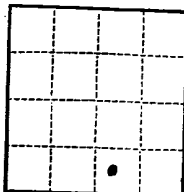
Note: All distances must be from outer boundaries of section.



This is to certify that the above plat was prepared from field notes of actual surveys made by me or under my supervision and that the same are true and correct to the best of my knowledge and belief.

Date Surveyed 25 March 1961

James P. Leese
 Registered Professional Engineer and/or Land Surveyor
 James P. Leese E. Mex. Reg. No. 1142



(SUBMIT IN TRIPLICATE)
**UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY**

Indian Agency Ignacio
Allottee Ute Mtn Tribal
Lease No. 14-20-604-1950

SUNDRY NOTICES AND REPORTS ON WELLS

NOTICE OF INTENTION TO DRILL	SUBSEQUENT REPORT OF WATER SHUT-OFF	APR 12 1961
NOTICE OF INTENTION TO CHANGE PLANS	SUBSEQUENT REPORT OF SHOOTING OR ACIDIZING	
NOTICE OF INTENTION TO TEST WATER SHUT-OFF	SUBSEQUENT REPORT OF ALTERING CASING	
NOTICE OF INTENTION TO REDRILL OR REPAIR WELL	SUBSEQUENT REPORT OF REDRILLING OR REPAIR	
NOTICE OF INTENTION TO SHOOT OR ACIDIZE	SUBSEQUENT REPORT OF ABANDONMENT	
NOTICE OF INTENTION TO PULL OR ALTER CASING	SUPPLEMENTARY WELL HISTORY	X
NOTICE OF INTENTION TO ABANDON WELL		

(INDICATE ABOVE BY CHECK MARK NATURE OF REPORT, NOTICE, OR OTHER DATA)

April 11, 1961

Well No. Ute #19 is located 370 ft. from S line and 1900 ft. from E line of sec. 26
SW SE Sec 26 T-31-N R-16-W NMPM
 (1/4 Sec. and Sec. No.) (Twp.) (Range) (Meridian)
Horseshoe Gallup San Juan New Mexico
 (Field) (County or Subdivision) (State or Territory)

The elevation of the ground ~~land surface~~ above sea level is 5502 ft.

DETAILS OF WORK

(State names of and expected depths to objective sands; show sizes, weights, and lengths of proposed casings; indicate mudding jobs, cementing points, and all other important proposed work)

This well was spudded at 4:00 p.m. 4/2/61. Drilled 12 1/4" hole to 107' SLM. Set 3 joints of 8 5/8" O.D. 24# J-55 casing at 102.51' and cemented with 100 sacks common cement plus 2% CaCl. Cement circulated. WOC 18 hours. Tested casing with 600# for 30 minutes. O.K. Drilled 7 7/8" hole to 1690' TD. Set 53 joints 9.5# J-55 casing at 1680.73' and cemented with 160 sacks regular mix diamix. WOC 36 hours. Tested 4 1/2" casing with 1500# for 30 minutes. O.K.

Cut notches 1620' and 1622' Schl GR. Treated notches with 250 gals mud acid, and 23,800 gals of lease crude containing 40,000# 10/20 sand. FBD 1000#. Average treating pressure 900#. Average injection rate 36.5 BPM.

I understand that this plan of work must receive approval in writing by the Geological Survey before operations may be commenced.

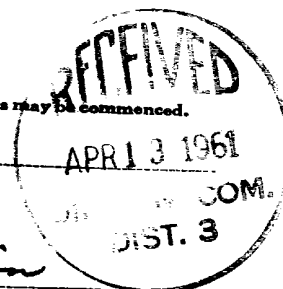
Company The Atlantic Refining Company

Address P. O. Box 520

Casper, Wyoming

By Adrian

Title Regional Drilling Manager



✱

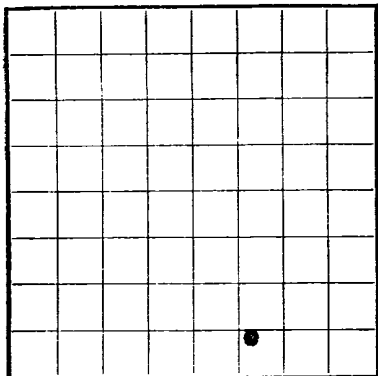
[illegible]

000000 000000 000000 000000

000 000 000 000

100-443680-1

regardati gattini (cane, gatto)



LOCATE WELL CORRECTLY

RECEIVED
MAY 3 1961U. S. LAND OFFICE Santa Fe

SERIAL NUMBER

LEASE OR PERMIT TO PROSPECT
11-20-60 - 1970UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

LOG OF OIL OR GAS WELL

Company The Atlantic Refining Co. Address Box 520 - Casper, Wyoming
Lessor or Tract UTB Tribal Field Horseshoe-Gallup State New Mexico
Well No. 19 Sec. 26 T. 31N R. 16W Meridian N.M.P.M. County San Juan
Location 570 ft. N. of S. Line and 1900 ft. E. of E. Line of Sec. 26 Elevation 5502' GL
(Derrick floor relative to sea level)

The information given herewith is a complete and correct record of the well and all work done thereon so far as can be determined from all available records.

Date May 1, 1961 Signed L. J. King Title District Superintendent

The summary on this page is for the condition of the well at above date.

Commenced drilling 4-2, 1961 Finished drilling 4-7, 1961

OIL OR GAS SANDS OR ZONES

(Denote gas by G)

No. 1, from 1468 to 1486 Upper No. 4, from _____ to _____
No. 2, from 1615 to 1624 Lower No. 5, from _____ to _____
No. 3, from _____ to _____ No. 6, from _____ to _____

IMPORTANT WATER SANDS

No. 1, from _____ to _____ No. 3, from _____ to _____
No. 2, from _____ to _____ No. 4, from _____ to _____

CASING RECORD

Size casing	Weight per foot	Threads per inch	Make	Amount	Kind of shoe	Cut and pulled from	Perforated		Purpose
							From—	To—	
<u>8-5/8</u>	<u>202.51</u>	<u>100</u>	<u>Pump - Plug</u>	<u>9.0</u>	<u>9.0</u>	<u>1600 to 1624</u>	<u>Oil String</u>		
<u>4-1/2</u>	<u>1600.73</u>	<u>160</u>	<u>Pump - Plug</u>	<u>9.0</u>	<u>9.0</u>				

MUDDING AND CEMENTING RECORD

Size casing	Where set	Number sacks of cement	Method used	Mud gravity	Amount of mud used
<u>8-5/8</u>	<u>102.51</u>	<u>100</u>	<u>Pump - Plug</u>	<u>9.0</u>	
<u>4-1/2</u>	<u>1600.73</u>	<u>160</u>	<u>Pump - Plug</u>	<u>9.0</u>	

PLUGS AND ADAPTERS

Heaving plug—Material _____ Length _____ Depth set _____
Adapters—Material _____ Size _____

SHOOTING RECORD

Size	Shell used	Explosive used	Quantity	Date	Depth shot	Depth cleaned out

TOOLS USED

Rotary tools were used from 0 feet to 1690 feet, and from _____ feet to _____ feet
Cable tools were used from _____ feet to _____ feet, and from _____ feet to _____ feet

DATES

_____ 1961 Put to producing _____ 1961
The production for the first 24 hours was _____ barrel of fluid of which _____ % was oil; _____ %
emulsion; _____ % water; and _____ % sediment. Gravity, °Bé. 10.0
If gas well, cu. ft. per 24 hours _____ Gallons gasoline per 1,000 cu. ft. of gas _____
Rock pressure, lbs. per sq. in. _____

EMPLOYEES

_____, Driller _____, Driller
_____, Driller _____, Driller

FORMATION RECORD

FROM—	TO—	TOTAL FEET	FORMATION
<u>0</u> <u>1441</u>	<u>1441</u>		<u>Muscos</u> <u>Gallup</u>
Note: Treated patches 1620' and 1622' with 23,800 gals. lease crude and 40,000# 10/20 sand. Average treating pressure 900# at 36.5 BPM.			
FROM—	TO—	TOTAL FEET	FORMATION

FORMATION RECORD—Continued

State of

U. S. LAND OFFICE

Serial Number

Class or Permit to Prospect

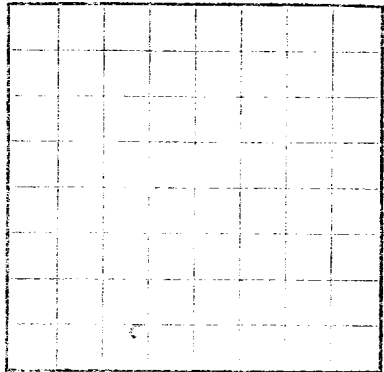
11-2-64 - 1920

UNITED STATES

DEPARTMENT OF THE INTERIOR

GEOLOGICAL SURVEY

LOG OF OIL OR GAS WELL



LOCATE WELL CORRECTLY

Company, The Oklahoma Land & Oil Co., Inc., Oklahoma City, Oklahoma
Lessor or Trust, The Oklahoma Land & Oil Co., Inc., Oklahoma City, Oklahoma
Well No., 10
Location, Sec. 20, T. 12 N., R. 10 E., S. 10 E., Oklahoma County, Oklahoma
The information given here is a complete and correct record of the well and all work done thereon
so far as can be determined from all available records.
Signed, _____
Date, May 1, 1921

The summary on this page is for the condition of the well as of the date
Commenced drilling, 1921
Finished drilling, 1921

OIL OR GAS SANDS OR TONES

(Details box for 10)

No. 1, from 10 to 10
No. 2, from 10 to 10
No. 3, from 10 to 10

IMPORTANT WATER SANDS

No. 1, from 10 to 10
No. 2, from 10 to 10

CASING RECORD

Casing	Weight	Threading	Make	Amount	Kind of pipe	From and to	For	Purpose

It is of the greatest importance to have a complete history of the well. Please state in detail the dates of redrilling, together
with the reasons for the work and the results. In the case of changes in the casing, give the size, position, and number
of the casing or pipes were put in to test for water, size, kind of material used, position, and results of pumping or running.

HISTORY OF OIL OR GAS WELL

10-1000-2 U. S. GOVERNMENT PRINTING OFFICE

MUDGING AND CEMENTING RECORD

Size	Weight	Number sacks of cement	Kind of mud	Kind of cement	Amount of mud used
10	10	10	10	10	10

PLUGS AND ADAPTERS

Adapter	Material	Weight	Kind of material
Adapter	Material	Weight	Kind of material

SHOOTING RECORD

Size	Weight	Kind of shot	Depth	Date	Quantity

TOOLS USED

Heavy tools were used from 10 to 10
Cable tools were used from 10 to 10

DATES

The production for the well was 10 barrels of oil per day
It was well, on 10 per cent of the well
Rock pressure, 100 per cent of the well
Gallons gasoline per 1000 cu. ft. of gas
10.0

EMPLOYEES

Driller, Driller
Driller, Driller

FORMATION RECORD

FROM	TO	TOTAL FEET	FORMATION

10
10
10

Notes: The well was drilled to a depth of 100 feet, with 10,000 feet of casing. The well was drilled to a depth of 100 feet, with 10,000 feet of casing. The well was drilled to a depth of 100 feet, with 10,000 feet of casing.

NEW MEXICO OIL CONSERVATION COMMISSION
Santa Fe, New Mexico

(Form C-104)
Revised 7/1/57

REQUEST FOR (OIL) - (~~GAS~~) ALLOWABLE

New Well
~~Recompletion~~

This form shall be submitted by the operator before an initial allowable will be assigned to any completed Oil or Gas well. Form C-104 is to be submitted in QUADRUPLICATE to the same District Office to which Form C-101 was sent. The allowable will be assigned effective 7:00 A.M. on date of completion or recompletion, provided this form is filed during calendar month of completion or recompletion. The completion date shall be that date in the case of an oil well when new oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

Casper, Wyoming
(Place)

4-20-61
(Date)

WE ARE HEREBY REQUESTING AN ALLOWABLE FOR A WELL KNOWN AS:

The Atlantic Refining Co. UTE, Well No. 19, in SW $\frac{1}{4}$ SE $\frac{1}{4}$,
(Company or Operator) (Lease)

0, Sec. 26, T. 31N, R. 16W, NMPM, Horseshoe-Gallup Pool
Unit Letter

San Juan

County. Date Spudded 4-2-61 Date Drilling Completed 4-7-61

Please indicate location:

Elevation 5502' GL Total Depth 1690' PBTD 1615'

Top Oil/Gas Pay 1620' Name of Prod. Form. Gallup

PRODUCING INTERVAL -

Perforations Notched at 1620' and 1622'

Open Hole None Depth 1680.73' Depth 1624.43'
Casing Shoe Tubing

OIL WELL TEST -

Natural Prod. Test: None bbls. oil, _____ bbls water in _____ hrs, _____ min. Choke Size _____

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): 30.0 bbls. oil, 0 bbls water in 24 hrs, 0 min. Choke Size 1-1/2" Plunger

GAS WELL TEST -

Natural Prod. Test: _____ MCF/Day; Hours flowed _____ Choke Size _____

Method of Testing (pitot, back pressure, etc.): _____

Test After Acid or Fracture Treatment: _____ MCF/Day; Hours flowed _____

Choke Size _____ Method of Testing: _____

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): See Remarks

Casing Tubing Date first new 4-18-61
Press. Press. oil run to tanks

Oil Transporter El Paso Natural Gas Products Co.

Gas Transporter _____

Remarks: Treated notches 1620' and 1622' with 23,800 gals. lease crude and 40,000# 10/20 sand. Average treating pressure 900# at 36.5 BPM.

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

Approved April 20 APR 24 1961, 1961

The Atlantic Refining Co.
(Company or Operator)

OIL CONSERVATION COMMISSION

By: [Signature]
(Signature)

By: Original Signed Emery C. Arnold

Title District Superintendent

Send Communications regarding well to:

Title Supervisor Dist. # 3

Name The Atlantic Refining Co.

Address Box 520 - Casper, Wyoming

RECEIVED

APR 24 1961

OIL CON. COM.
Dist. # 3

STATE OF NEW MEXICO	
OIL CONSERVATION DIVISION	
AZT 1 DISTRICT OFFICE	
NUMBER OF COPIES RECEIVED	
DISTRICT	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
PRORATION OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION
SANTA FE, NEW MEXICO

Form C-110
Revised 7/1/55

(File the original and 4 copies with the appropriate district office)

CERTIFICATE OF COMPLIANCE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Company or Operator The Atlantic Refining Co. Lease UTE

Well No. 19 Unit Letter 0 S 26 T 11N R 16W Pool Horseshoe Gallup

County San Juan Kind of Lease (State, Fed. or Patented) Federal

If well produces oil or condensate, give location of tanks: Unit N S 35 T 11N R 16W

Authorized Transporter of Oil or Condensate El Paso Natural Gas Products Co.

Address Box 1565 - Farmington, New Mexico

(Give address to which approved copy of this form is to be sent)

Authorized Transporter of Gas _____

Address _____ Date Connected 4-18-61

(Give address to which approved copy of this form is to be sent)

If Gas is not being sold, give reasons and also explain its present disposition:

Volume too small, being used for lease fuel.

Reasons for Filing: (Please check proper box) New Well (X)

Change in Transporter of (Check One): Oil (X) Dry Gas () C'head () Condensate ()

Change in Ownership () Other ()

Remarks: _____ (Give explanation below)



The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.

Executed this the 24th day of April 1961

By L.B. Kelly L.B. Kelly

Approved APR 24 1961 1961

Title District Superintendent

OIL CONSERVATION COMMISSION

Company The Atlantic Refining Co.

By Original Signed Emery C. Arnold

Address Box 520

Title Supervisor Dist # 2

Name

STATE OF NEW MEXICO		
OIL CONSERVATION COMMISSION		
ALBUQUERQUE DISTRICT OFFICE		
NUMBER OF COPIES RECEIVED		6
DISTRIBUTION		
SANTA FE		✓
FILE		✓
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	✓
	GAS	
PRODUCTION OFFICE		
OPERATOR		✓

NUMBER OF COPIES RECEIVED		6
DISTRIBUTION		
SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
PRODUCTION OFFICE		
OPERATOR		3

NEW MEXICO OIL CONSERVATION COMMISSION
SANTA FE, NEW MEXICO
CERTIFICATE OF COMPLIANCE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

FORM C-110
 (Rev. 7-60)

FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE

Company or Operator				Lease		Well No. 176	
Unit Letter 0	Section 26	Township 31N	Range 16W	County			
Pool				Kind of Lease (State, Fed, Fee)			
If well produces oil or condensate give location of tanks			Unit Letter	Section	Township	Range	
Authorized transporter of oil <input type="checkbox"/> or condensate <input type="checkbox"/>				Address (give address to which approved copy of this form is to be sent)			
Is Gas Actually Connected? Yes <input type="checkbox"/> No <input type="checkbox"/>							
Authorized transporter of casing head gas <input type="checkbox"/> or dry gas <input type="checkbox"/>			Date Connected	Address (give address to which approved copy of this form is to be sent)			

If gas is not being sold, give reasons and also explain its present disposition:

REASON(S) FOR FILING (please check proper box)

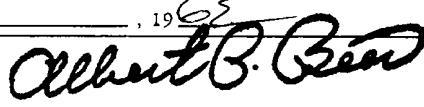
New Well ☐ Change in Ownership ☐
 Change in Transporter (check one)
 Oil ☐ Dry Gas ☐
 Casing head gas . ☐ Condensate . . ☐

Remarks

The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.

Executed this the 1 day of Aug, 1962

OIL CONSERVATION COMMISSION

Approved by Original Signed By A. R. KENDRICK	By 
Title PETROLEUM ENGINEER DIST. NO. 3	Title
Date JUL 31 1962	Company
	Address

NUMBER OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL GAS
PRORATION OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION
SANTA FE, NEW MEXICO
CERTIFICATE OF COMPLIANCE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

FORM C-110
 (Rev. 7-60)

FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE

Company or Operator				Lease		Well No. 176	
Unit Letter C	Section 26	Township	Range	County			
Pool				Kind of Lease (State, Fed, Fee)			
If well produces oil or condensate give location of tanks			Unit Letter	Section	Township	Range	
Authorized transporter of oil <input type="checkbox"/> or condensate <input type="checkbox"/>				Address (give address to which approved copy of this form is to be sent)			

Is Gas Actually Connected? Yes X No

Authorized transporter of casing head gas <input type="checkbox"/> or dry gas <input type="checkbox"/>		Date Connected	Address (give address to which approved copy of this form is to be sent)
--	--	----------------	--

If gas is not being sold, give reasons and also explain its present disposition:

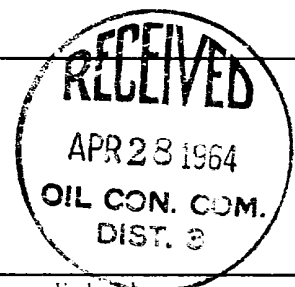
REASON(S) FOR FILING (please check proper box)

- | | |
|--|--|
| New Well <input type="checkbox"/> | Change in Ownership <input type="checkbox"/> |
| Change in Transporter (check one) | Other (explain below) <input type="checkbox"/> |
| Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> | |
| Casing head gas <input type="checkbox"/> Condensate <input type="checkbox"/> | |

"Effective May 3, 1966, The Atlantic Refining Company changed its name to Atlantic Richfield Company"

TRANSPORTER CHANGED FROM SHELL OIL COMPANY TO SHELL FIVE LINE CORPORATION EFFECTIVE 12/31/69

Remarks



The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.

Executed this the _____ day of _____, 1964.

OIL CONSERVATION COMMISSION		By
Approved by	 4-25-64	Title
Title		Company
Date		Address

NO. OF COPIES RECEIVED		5
DISTRIBUTION		
SANTA FE		1
FILE		
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	1
	GAS	
OPERATOR		2
PROBATION OFFICE		

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-105
Effective 1-1-65

I.

Operator ARCO Oil and Gas Company, Division of Atlantic Richfield Company	
Address 1860 Lincoln Street, Suite 501, Denver, Colorado 80295	
Reason(s) for filing (Check proper box)	
New Well <input type="checkbox"/>	Change in Transporter of: Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Recompletion <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Other (Please explain) Effective 4/1/79 Assumed name for formerly Atlantic Richfield Company.

If change of ownership give name
and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name Horseshoe Gallup Unit	Well No. 176	Pool Name, including Formation Horseshoe Gallup	Kind of Lease State, Federal or Fee Fed. 14-08	Lease No. 0001-820
Location Unit Letter <u>0</u> ; <u>570</u> Feet From The <u>South</u> Line and <u>1900</u> Feet From The <u>East</u> Line of Section <u>26</u> Township <u>31N</u> Range <u>16W</u> , NMPM, <u>San Juan</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Shell Pipeline Company	Address (Give address to which approved copy of this form is to be sent) Box 940, Bloomfield, NM 87413	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	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 E	Sec. 34
	Twp. 31N	Rge. 16W
	Is gas actually connected?	When

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'ty.	Diff. Res'ty.
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
Perforations					Depth Casing Shoe			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			

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 Tanks	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 - Bbls.

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	bbls. Condensate/MMCF	Gravity <u>CONDENSATE</u>
Testing Method (pilot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

VI. CERTIFICATE OF COMPLIANCE

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

J. R. Coquer
(Signature)
Accounting Supervisor
(Title)
March 9, 1979
(Date)

OIL CONSERVATION COMMISSION

APPROVED MAR 12 1979, 19_____
BY Original Signed by A. R. Kendrick
TITLE SUPERVISOR DIST. 33

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiple completed wells.

S.C.S.		AND		AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS	
AND OFFICE					
TRANSPORTER	OIL				
	GAS				
PERATOR					
ORATION OFFICE					
ARCO Oil and Gas Company, Division of Atlantic Richfield Company					
P.O. Box 5540, Denver, Colorado 80217					
Reason(s) for filing (Check proper box)					
Well	<input type="checkbox"/>	Change in Transporter of:		Other (Please explain)	
Completion	<input type="checkbox"/>	Oil	<input checked="" type="checkbox"/>	Dry Gas	<input type="checkbox"/>
Change in Ownership	<input type="checkbox"/>	Costinhead Gas	<input type="checkbox"/>	Condensate	<input type="checkbox"/>
Change of ownership give name					
Address of previous owner					
DESCRIPTION OF WELL AND LEASE					
Well Name	Well No.	Pool Name, including Formation		Kind of Lease	Lease No.
Horseshoe Gallup Unit	176	Horseshoe Gallup		State, Federal or Free	Fed.14-08-0001-8200
Location					
Unit Letter	0	Feet From The	South	Line and	1900
		Feet From The		East	
Line of Section	26	Township	31N	Range	16W
				N.M.P.M.	San Juan
County					
DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS					
Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>		Address (Give address to which approved copy of this form is to be sent)			
CINIZA Pipe Line Co., Inc.		P. O. Box 1887 Bloomfield, NM 87413			
Name of Authorized Transporter of Costinhead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>		Address (Give address to which approved copy of this form is to be sent)			
Well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Range	Is gas actually connected? When
	E	34	31N	16W	
This production is commingled with that from any other lease or pool, give commingling order number					
COMPLETION DATA					
Designate Type of Completion - (X)		Oil Well	Gas Well	New Well	Workover
		Deepen	Plug Back	Some Rest.	Dist. Rest.
One Spudded	One Compl. Ready to Prod.	Total Depth		P.B.T.D.	
Deviation (DF, RKB, RT, CR, etc.)	Name of Producing Formation	Top Oil/Gas Pay		Tubing Depth	
Effortations				Depth Casing Shoe	
TUBING, CASING, AND CEMENTING RECORD					
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET		SACKS CEMENT	
TEST DATA AND REQUEST FOR ALLOWABLE (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)					
First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)			
Length of Test	Tubing Pressure	Casing Pressure	Casing Size		
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF		
GAS WELL					
Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate		
Producing Method (pilot, back pr.)	Tubing Pressure (Start-In)	Casing Pressure (Start-In)	Casing Size		
CERTIFICATE OF COMPLIANCE					
OIL CONSERVATION COMMISSION					
APPROVED APR 1 1982					
BY Original Signed by FRANK T. CHAVEZ					
SUPERVISOR DISTRICT 3					
TITLE					
This form is to be filed in compliance with RULE 1104.					
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviate tests taken on the well in accordance with RULE 111.					
All sections of this form must be filled out completely for allowable on new and recompleted wells.					
Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.					
Separate Forms C-104 must be filed for each pool in multi-					

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.

14-20-604-1950

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

Ute

7. UNIT AGREEMENT NAME

Horseshoe Gallup Unit

8. FARM OR LEASE NAME

Horseshoe Gallup

9. WELL NO.

176

10. FIELD AND POOL, OR WILDCAT

Horseshoe Gallup

11. SEC., T., R., M., OR BLK. AND
SUBVY OR AREA

Sec. 26, T-31N, R-16W

12. COUNTY OR PARISH 13. STATE

San Juan

N.M.

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—" for such proposals.)

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐
2. NAME OF OPERATOR
ARCO Oil and Gas Company, Division of Atlantic Richfield Co.
3. ADDRESS OF OPERATOR
1816 E. Mojave, Farmington, New Mexico 87401

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface

570' FSL, 1900' FEL

14. PERMIT NO.

15. ELEVATIONS (Show whether DP, RT, GR, etc.)

5502' GL

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

PULL OR ALTER CASING

FRACTURE TREAT

MULTIPLE COMPLETION

SHOOT OR ACIDIZE

ABANDON*

REPAIR WELL

CHANGE PLANE

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

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

17. 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.)*

ARCO Oil and Gas Company respectfully requests approval of long term shut-in status on this well. At this time, under the current waterflood operation, ARCO cannot economically operate the subject well. An ongoing study to determine the feasibility of CO₂ flooding for the Horseshoe Gallup Field is underway, which may yield significant additional oil recovery. Implementation of a CO₂ flood would require the workover of existing wells, and the drilling of new wells. For this reason, ARCO proposes that this well be maintained in the long term shut-in status so that the wellbore will be available, should it be needed as part of a future CO₂ flood. This plan eliminates the economic waste of potentially usable wellbores, and promotes conservation.

Approval expires July 2, 1988

RECEIVED
JUL 07 1987
OIL CONSERVATION
DIST. 0

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

SIGNED

TITLE Production Supervisor

DATE 6/30/87

(This space for Federal or State office use)

APPROVED BY

TITLE ACTING AREA MANAGER

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)

Form approved
Budget Bureau No. 1004-0135
Expires August 31, 1985

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—" for such proposals.)

1. <input type="checkbox"/> OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER		4. LEASE DESIGNATION AND SERIAL NO. 14-20-604-1950
2. NAME OF OPERATOR ARCO Oil & Gas Company, Division of Atlantic Richfield Company		5. IF INDIAN, ALLOTTEE OR TRIBE NAME Ute Mountain
3. ADDRESS OF OPERATOR 1816 E. Mojave, Farmington, New Mexico 87401		6. UNIT AGREEMENT NAME Horseshoe Gallup Unit
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface		7. FARM OR LEASE NAME Horseshoe Gallup
570' FSL & 1900' FEL		8. WELL NO. 176
14. PERMIT NO.		9. FIELD AND POOL, OR WILDCAT Horseshoe Gallup
15. ELEVATIONS (Show whether of, to, or, etc.) 5502' GR		10. SEC., T., R., W., OR S.E. AND SUBST. OR AREA Sec. 26, T-31N, R-16W
16. COUNTY OR PARISH San Juan		17. STATE NM

Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

RECEIVED
Bureau of Land Management

SHUT OR ACIDIZE

REPAIR WELL
(Other)

PLUG OR ALTER CASING

MULTIPLE COMPLETION

ABANDON*

CHANGE PLANE

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

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

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS: (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any well in directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to the well.)

ARCO Oil and Gas Company respectfully requests approval for extension of long term shut-in status on this well. At this time, under the current waterflood operation, ARCO cannot economically operate the subject well. An ongoing study to determine the feasibility of CO₂ flooding for the Horseshoe Gallup Field is underway, which may yield significant additional oil recovery (a CO₂ Pilot Project is planned to begin later this year as part of the study to assess CO₂ flooding potential). Implementation of a CO₂ flood would require the workover of existing wells, and the drilling of new wells. For this reason, ARCO proposes that this well be maintained in the long term shut-in status so that the well-bore will be available, should it be needed as part of a future CO₂ flood. This plan eliminates the economic waste of potentially usable wellbores, and promotes conservation.

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

SIGNED [Signature]

TITLE Production Supervisor

DATE 6/24/88

(This space for Federal or State office use)

ACTING

APPROVED BY L. Mark Hollis

TITLE AREA MANAGER

DATE FEB 3 1989

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

5. LEASE DESCRIPTION AND SERIAL NO.

14-20-604-1950

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

UTE MTN.

7. UNIT AGREEMENT NAME

HORSESHOE GALLUP UNIT

8. FARM OR LEASE NAME

HORSESHOE GALLUP

9. WELL NO.

176

10. FIELD AND POOL, OR WILDCAT

HORSESHOE GALLUP

11. SEC., T., R., M., OR BLM. AND
SURVEY OR AREA

SEC 26, T-31N, R-16W

12. COUNTY OR PARISH 13. STATE

SAN JUAN

NM

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—" for such proposals.)

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR

ARCO Oil and Gas Company, Div. of Atlantic Richfield Co.

3. ADDRESS OF OPERATOR

1816 E. Mojave, Farmington, New Mexico 87401

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface

570'FSL, 1900'FEL

14. PERMIT NO.

15. ELEVATIONS (Show whether OF, ST, GR, etc.)

5502' GL

Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETION

ABANDON*

CHANGE PLANS

X

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

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

17. 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 perti-
nent to this work.)*

ARCO Oil and Gas Company respectfully requests approval for extension of long term shut-in status on this well. Over the past two years, ARCO has reactivated several previously uneconomic long term shut-in wells and found commercial production. In addition, an ongoing CO2 feasibility study is underway which may yield significant additional oil recovery. Implementation of a CO2 flood would require the workover of existing wells, and the drilling of new wells. For these reasons, ARCO proposes that this well be maintained in the long term shut-in status so that the wellbore will be available, should future production tests indicate commercial production or should it be needed as part of a future CO2 flood. This plan eliminates the economic waste of potentially usable wellbores and promotes conservation.

APPROVED FOR 1100
NOT TO EXCEED YEAR.

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

SIGNED

Sr. Prod Supr

TITLE

DATE

08/30/89

(This space for Federal or State office use)

ACTING

APPROVED BY

L. Mark Hollis

TITLE

AREA MANAGER

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

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

See Instructions
at Bottom of Page

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator Vantage Point Operating Company		Well API No. 3004510246
Address 5801 E. 41st, suite 1001, Tulsa, Oklahoma 74135		
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)		
New Well <input type="checkbox"/>	Change in Transporter of:	
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>	Non-Producing Oil Well
Change in Operator <input checked="" type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	
If change of operator give name and address of previous operator ARCO Oil and Gas Company, P.O. Box 1610, Midland, Texas 79702 a Division of Atlantic Richfield Company		

II. DESCRIPTION OF WELL AND LEASE

Lease Name Horseshoe Gallup Unit	Well No. 176	Pool Name, Including Formation Horseshoe Gallup	Kind of Lease State, Federal or Fee	Lease No. 14-20-604-1950
Location Unit Letter <u>0</u> : <u>570</u> Feet From The <u>South</u> Line and <u>1900</u> Feet From The <u>East</u> Line Section <u>26</u> Township <u>31-N</u> Range <u>16-W</u> , NMPM, San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	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 type="checkbox"/>	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	Sec.	Twp.	Rge.	Is gas actually connected?	When?

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
Date Spudded	Date Compl. Ready to Prod.		Total Depth			P.B.T.D.		
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay			Tubing Depth		
Perforations						Depth Casing Shoe		
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET			SACKS CEMENT		

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	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. OPERATOR CERTIFICATE OF COMPLIANCE

I, the undersigned, being duly sworn, depose and say that 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.

Deborah L. Greenwich
Signature
Deborah L. Greenwich Production Asst.
Printed Name
1-19-91 918-664-2100
Date Telephone No.

OIL CONSERVATION DIVISION

Date Approved FEB 27 1991
By Brian D. Shum
Title SUPERVISOR DISTRICT #3

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.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.

OIL CONSERVATION DIVISION

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

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

DISTRICT III
1000 Rio Diazos Rd, Aztec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

I. Operator Vantage Point Operating Company		Well API No. 3004510246
Address 5801 E. 41st, suite 1001, Tulsa, Oklahoma 74135		
Reason(s) for Filing (Check proper box) New Well <input type="checkbox"/> Change in Transporter of: Recompletion <input type="checkbox"/> Oil <input checked="" type="checkbox"/> Dry Gas <input type="checkbox"/> Add Transporter Change in Operator <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>		
If change of operator give name and address of previous operator		

II. DESCRIPTION OF WELL AND LEASE

Lease Name Horseshoe Gallup Unit	Well No. 176	Pool Name, Including Formation Horseshoe Gallup	Kind of Lease State, Federal or Fee	Lease No. 14-20-604-1950
Location Unit Letter <u>O</u> : <u>570</u> Feet From The <u>South</u> Line and <u>1900</u> Feet From The <u>East</u> Line Section <u>26</u> Township <u>31N</u> Range <u>16W</u> , <u>NMPM</u> , <u>San Juan</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Meridian Oil Company	Address (Give address to which approved copy of this form is to be sent) P.O. Box 4289, Farmington, NM 87401	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	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 32	Sec. 31N
	Twp. 16W	Rge. NO
Is gas actually connected?		When?

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
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
Perforations				Depth Casing Shoe				
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			

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
NOV 15 1991 OIL CON. DIV., DIST. 3			

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MNCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

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.

Deborah L. Greenwich
Signature
Deborah L. Greenwich Production Assistant
Printed Name
11/11/91
Date
918-664-2100
Telephone No.

OIL CONSERVATION DIVISION

NOV 15 1991

Date Approved
By Barry D. Shum
SUPERVISOR DISTRICT #3
Title

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.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.

State of New Mexico
Energy, Minerals & Natural Resources Department
OIL CONSERVATION DIVISION
PO Box 2088
Santa Fe, NM 87504-2088

Form C-104
Revised February 21, 1994
Instructions on back
Submit to Appropriate District Office
5 Copies

☐ AMENDED REPORT

¹ Operator Name and Address Vantage Point Operating Company 2401 Fountain View Dr., Suite 700 Houston, TX 77057		² OGRID Number 024041
		³ Reason for Filing Code CO
⁴ API Number 30-045-10246	⁵ Pool Name Horseshoe Gallup	⁶ Pool Code 32870
⁷ Property Code 011539	⁸ Property Name Horseshoe Gallup Unit	⁹ Well Number 176

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South Line	Feet from the	East/West Line	County
O	26	31N	16W		570	South	1900	East	San Juan

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South Line	Feet from the	East/West Line	County
¹² Use Code U	¹³ Producing Method Code P		¹⁴ Gas Connection Date N/A		¹⁵ C-129 Permit Number		¹⁶ C-129 Effective Date		¹⁷ C-129 Expiration Date

18 Transporter OGRID	19 Transporter Name and Address	20 POD	21 O/G	22 POD ULSTR Location and Description
008471	Gary-Williams Energy Corporation P.O. Box 159 Bloomfield, NM 87413	2586010	O	U00 29 31N 16W HSGU B.(Central Battery #1)

RECEIVED

JUL 21 1994

OIL CON. DIV.

DIST. 3

²³ POD	²⁴ POD ULSTR Location and Description
2586050	1 02 30N 16W HSGU Water POD

25 Spud Date	26 Ready Date	27 TD	28 PBTD	29 Perforations
30 Hole Size	31 Casing & Tubing Size	32 Depth Set	33 Sacks Cement	

³⁴ Date New Oil	³⁵ Gas Delivery Date	³⁶ Test Date	³⁷ Test Length	³⁸ Tbg. Pressure	³⁹ Csg. Pressure
⁴⁰ Choke Size	⁴¹ Oil	⁴² Water	⁴³ Gas	⁴⁴ AOF	⁴⁵ Test Method
⁴⁶ I hereby certify that the rules 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: <i>Francie M. Jarvis</i>			OIL CONSERVATION DIVISION <div style="text-align: center;">378</div> Approved by: SUPERVISOR DISTRICT #3		
Printed Name: Francie M. Jarvis			Title:		
Title: Engineering Technician			Approval Date: JUL 21 1994		
Date: 07/14/94		Phone: (713)780-1952			

⁴⁷ If this is a change of operator fill in the OGRID number and name of the previous operator

⁴⁷ If this is a change of operator fill in the OGRID number and name of the previous operator			
Previous Operator Signature	Printed Name	Title	Date

submitted in lieu of Form 3160-5

RECEIVED
SEP 22 1994

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

OIL CON. DIV.
DIST. 3

Sundry Notices and Reports on Wells

		5. Lease Number 14-20-604-1950
1. Type of Well <input checked="" type="checkbox"/> Oil <input type="checkbox"/> Gas <input type="checkbox"/> Other		6. If Indian, Allottee or Tribe name Ute
2. Name of Operator Vantage Point Operating Company		7. Unit Agreement Name Horseshoe Gallup
3. Address & Phone No. of Operator 2401 Fountain View Drive Suite 700 Houston, TX 77057-4862 (713) 780-1952		8. Well Name & Number HGU #176
		9. API Well No. 30-045-10246
4. Location of Well, Footage, Sec., T, R, M O-26-31N-16W 57 ⁰ FSL & 1900' FEL		10. Field and Pool Horseshoe Gallup
		11. County and State San Juan, New Mexico

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

Type of Submission	Type of Action
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input type="checkbox"/> Dispose Water
	<input checked="" type="checkbox"/> Other - LTSI
	<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"/> Conv. to Injection

13. Describe Proposed or Completed Operations

This well is currently shut-in.
Vantage is requesting LTSI status from the BLM until such time it is economically feasible to return this well to production.

RECEIVED
BLM
94 JUL 22 PM 2:21
070 FARMINGTON, NM

THIS APPROVAL EXPIRES AUG 01 1995

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

Signed Dianna K. Fairhurst Title Consulting Engineer Date 7/13/1994
Dianna K. Fairhurst

(This Space for Federal or State Office Use)

APPROVED BY: _____ Title _____ Date _____

CONDITION OF APPROVAL, if any: _____

APPROVED

SEP 19 1994

DISTRICT MANAGER

District I
PO Box 1980, Hobbs, NM 88241-1980
District II
PO Drawer DD, Artesia, NM 88211-0719
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-104
Revised February 21, 1994
Instructions on back
Submit to Appropriate District Office
5 Copies

AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

¹ Operator Name and Address Convest Energy Corporation 2401 Fountain View Dr., Suite 700 Houston, TX 77057 (Effective 1/1/95)		² OGRID Number 005207
		³ Reason for Filing Code CH
⁴ API Number 30-045-10246	⁵ Pool Name Horseshoe Gallup	⁶ Pool Code 32870
⁷ Property Code 16561	⁸ Property Name Horseshoe Gallup Unit	⁹ Well Number 176

II. ¹⁰ Surface Location

UL or lot no. O	Section 26	Township 31N	Range 16W	Lot Idn	Feet from the 570	North/South Line South	Feet from the 1900	East/West Line East	County San Juan
--------------------	---------------	-----------------	--------------	---------	----------------------	---------------------------	-----------------------	------------------------	--------------------

¹¹ Bottom Hole Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South Line	Feet from the	East/West Line	County
¹² Lse Code U	¹³ Producing Method Code P		¹⁴ Gas Connection Date N/A		¹⁵ C-129 Permit Number		¹⁶ C-129 Effective Date	¹⁷ C-129 Expiration Date	

III. Oil and Gas Transporters

¹⁸ Transporter OGRID 008471	¹⁹ Transporter Name and Address Gary-Williams Energy Corporation P.O. Box 159 Bloomfield, NM 87413	²⁰ POD 2586010	²¹ O/G O	²² POD ULSTR Location and Description U00 29 31N 16W HSGU B (Central Battery #1)

IV. Produced Water

²³ POD 2586050	²⁴ POD ULSTR Location and Description 1 02 30N 16W HSGU Water POD
------------------------------	---

V. Well Completion Data

²⁵ Spud Date	²⁶ Ready Date	²⁷ TD	²⁸ PBDT	²⁹ Perforations
³⁰ Hole Size	³¹ Casing & Tubing Size	³² Depth Set	³³ Sacks Cement	

VI. Well Test Data

³⁴ Date New Oil	³⁵ Gas Delivery Date	³⁶ Test Date	³⁷ Test Length	³⁸ Tbg. Pressure	³⁹ Csg. Pressure
⁴⁰ Choke Size	⁴¹ Oil	⁴² Water	⁴³ Gas	⁴⁴ AOF	⁴⁵ Test Method

⁴⁰ I hereby certify that the rules 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: <i>Dianna K. Fairhurst</i> Printed Name: Dianna K. Fairhurst Title: Consulting Engineer Date: 01/16/95		OIL CONSERVATION DIVISION <i>37.8</i> SUPERVISOR DISTRICT #3 Approved by: Title: Approval Date: JAN 31 1995 Phone: (713)780-1952	
--	--	--	--

⁴⁷ If this is a change of operator fill in the OGRID number and name of the previous operator Vantage Point Operating Company OGRID 024041			
Previous Operator Signature <i>Francie M. Jarvis</i>	Printed Name Francie M. Jarvis	Title Engineering Technician	Date 01/16/95

District I
PO Box 1980, Hobbs, NM 88241-1980
District II
PO Drawer DD, Artesia, NM 88211-0719
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-104
Revised February 21, 1994
Instructions on back
Submit to Appropriate District Office
5 Copies

☐ AMENDED REPORT

I. **REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT**

¹ Operator Name and Address Convest Energy Corporation 2401 Fountain View Dr., Suite 700 Houston, TX 77057 (Effective 3/1/95)		² OGRID Number 005207
		³ Reason for Filing Code CO
⁴ API Number 30-045-10246	⁵ Pool Name Horseshoe Gallup	⁶ Pool Code 32870
⁷ Property Code 16561	⁸ Property Name Horseshoe Gallup Unit	⁹ Well Number 176

II. 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
O	26	31N	16W		570	South	1900	East	San Juan

¹¹ Bottom Hole Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South Line	Feet from the	East/West Line	County
¹² Lse Code U	¹³ Producing Method Code P		¹⁴ Gas Connection Date N/A		¹⁵ C-129 Permit Number		¹⁶ C-129 Effective Date		¹⁷ C-129 Expiration Date

III. Oil and Gas Transporters

¹⁸ Transporter OGRID	¹⁹ Transporter Name and Address	²⁰ POD	²¹ O/G	²² POD ULSTR Location and Description
014538	Meridian Oil Inc. P.O. Box 4289 Farmington, NM 87499	2586010	O	U00 29 31N 16W HSGU B (Central Battery #1)

RECEIVED
MAR - 3 1995

IV. Produced Water

²³ POD 2586050	²⁴ POD ULSTR Location and Description 1 02 30N 16W HSGU Water POD
------------------------------	---

OIL CON. DIV.
DIST. 3

V. Well Completion Data

²⁵ Spud Date	²⁶ Ready Date	²⁷ TD	²⁸ PBTD	²⁹ Perforations
³⁰ Hole Size	³¹ Casing & Tubing Size	³² Depth Set	³³ Sacks Cement	

VI. Well Test Data

³⁴ Date New Oil	³⁵ Gas Delivery Date	³⁶ Test Date	³⁷ Test Length	³⁸ Tbg. Pressure	³⁹ Csg. Pressure
⁴⁰ Choke Size	⁴¹ Oil	⁴² Water	⁴³ Gas	⁴⁴ AOF	⁴⁵ Test Method

⁴⁶ I hereby certify that the rules 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: <i>Dianna K. Fairhurst</i> Printed Name: Dianna K. Fairhurst Title: Consulting Engineer Date: 02/24/95		OIL CONSERVATION DIVISION <i>37.8</i> SUPERVISOR DISTRICT #3 Approved by: Title: Approval Date: MAR - 3 1995 Phone: (713)780-1952	
--	--	---	--

⁴⁷ If this is a change of operator fill in the OGRID number and name of the previous operator			
Previous Operator Signature	Printed Name	Title	Date

submitted in lieu of Form 3160-5

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

Sundry Notices and Reports on Wells

1. Type of Well <input checked="" type="checkbox"/> Oil <input type="checkbox"/> Gas <input type="checkbox"/> Other		5. Lease Number 14-20-604-1950
2. Name of Operator Convest Energy Corporation		6. If Indian, Allottee or Tribe name Ute
3. Address & Phone No. of Operator 2401 Fountain View Drive Suite 700 Houston, TX 77057-4862 (713) 780-1952		7. Unit Agreement Name Horseshoe Gallup
4. Location of Well, Footage, Sec., T, R, M O-26-31N-16W 575' FSL & 1900' FEL 570		8. Well Name & Number HGU #176
		9. API Well No. 30-045-10246
		10. Field and Pool Horseshoe Gallup
		11. County and State San Juan, New Mexico

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

Type of Submission	Type of Action
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input type="checkbox"/> Dispose Water
	<input checked="" type="checkbox"/> Other - Return to Production
	<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"/> Conv. to Injection

13. Describe Proposed or Completed Operations

This well was returned to production on 02/13/95.

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

Signed

Dianna K. Fairhurst
Dianna K. Fairhurst

Title Consulting Engineer

Date

04/03/95

(This Space for Federal or State Office Use)

APPROVED BY :

Title

Date

CONDITION OF APPROVAL, if any:

ACCEPTED FOR RECORD

APR 13 1995

NMOCD

FARMINGTON DISTRICT OFFICE

District I
PO Box 1980, Hobbs, NM 88241-1980
District II
PO Drawer DD, Artesia, NM 88211-0719
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-104
Revised February 21, 1994
Instructions on back
Submit to Appropriate District Office
5 Copies

AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

¹ Operator Name and Address Central Resources, Inc. 2600 Mellon Center, 1775 Sherman Street Denver, CO 80203 (Effective 7/1/95)		² OGRID Number 003939
		³ Reason for Filing Code CH
⁴ API Number 30-045-10246	⁵ Pool Name Horseshoe Gallup	⁶ Pool Code 32870
⁷ Property Code 17490	⁸ Property Name Horseshoe Gallup Unit	⁹ Well Number 176

II. ¹⁰ Surface Location

U/L or lot no. O	Section 26	Township 31N	Range 16W	Lot Idn	Feet from the 570	North/South Line South	Feet from the 1900	East/West Line East	County San Juan
---------------------	---------------	-----------------	--------------	---------	----------------------	---------------------------	-----------------------	------------------------	--------------------

¹¹ Bottom Hole Location

U/L or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South Line	Feet from the	East/West Line	County
¹² Lse Code U	¹³ Producing Method Code P	¹⁴ Gas Connection Date N/A	¹⁵ C-129 Permit Number	¹⁶ C-129 Effective Date	¹⁷ C-129 Expiration Date				

III. Oil and Gas Transporters

¹⁸ Transporter OGRID 014538	¹⁹ Transporter Name and Address Meridian Oil Inc. P.O. Box 4289 Farmington, NM 87409	²⁰ POD 2586010	²¹ O/G O	²² POD ULSTR Location and Description U00 29 31N 16W HSGU B (Central Battery #1)
9/6/95	GIANT REFINING COMPANY P.O. Box 12999 SCOTTSDALE, AZ 85267		eff. 9-1-95	

IV. Produced Water

²³ POD 2586050	²⁴ POD ULSTR Location and Description 1 02 30N 16W HSGU Water POD
------------------------------	---

V. Well Completion Data

²⁵ Spud Date	²⁶ Ready Date	²⁷ TD	²⁸ PBTD	²⁹ Perforations
³⁰ Hole Size	³¹ Casing & Tubing Size	³² Depth Set	³³ Sacks Cement	

VI. Well Test Data

³⁴ Date New Oil	³⁵ Gas Delivery Date	³⁶ Test Date	³⁷ Test Length	³⁸ Tbg. Pressure	³⁹ Csg. Pressure
⁴⁰ Choke Size	⁴¹ Oil	⁴² Water	⁴³ Gas	⁴⁴ AOF	⁴⁵ Test Method
⁴⁶ I hereby certify that the rules 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: <i>Dianna K. Fairhurst</i> Printed Name: Dianna K. Fairhurst Title: Consulting Engineer Date: 06/11/95			OIL CONSERVATION DIVISION <i>37.8</i> SUPERVISOR DISTRICT #3 Approved by: Title: Approval Date: JUL 31 1995 Phone: (713)780-1952		

⁴⁷ If this is a change of operator fill in the OGRID number and name of the previous operator

Convest Energy Corporation		OGRID 005207
Previous Operator Signature <i>Francie M. Jarvis</i>	Printed Name Francie M. Jarvis	Title Engineering Technician Date 06/11/95

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

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

5. Lease Designation and Serial No.
14-20-604-1950

6. If Indian, Allottee or Tribe Name
Ute

7. If Unit or CA. Agreement Designation

Horseshoe Gallup Unit

8. Well Name and No.
HGU #176

9. API Well No.
30-045-10246

10. Field and Pool, or Exploratory Area
Horseshoe Gallup Unit

11. County or Parish, State
San Juan County, NM

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator

Central Resources, Inc. c/o Playa Minerals & Energy, Inc.

3. Address and Telephone No.

650 N. Sam Houston Pkwy E. Suite 500 Houston, Tx 77060 (281) 931-3800

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

570' FSL, 1900' FEL, Sec. 26, T31N, R16W

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

TYPE OF SUBMISSION

TYPE OF ACTION

☐ Notice of Intent

☐ Subsequent Report

☐ Final Abandonment Notice

☐ Abandonment

☐ Recompletion

☐ Plugging Back

☐ Casing Repair

☐ Altering Casing

☒ Other Reactivation

☐ 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 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.)*

Rebuilt pump and restored well to production on 10/13/99.

RECEIVED
NOV - 1 1999
OIL CON. DIV.
DIST. 3

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

Signed

Mark L. Ehrman

Title Regulatory & Environmental

Date

10/18/99

(This space for Federal or State office use)

Approved by

Title

Date

Conditions of approval, if any:

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 manner within its jurisdiction.

*See Instruction on Reverse Side

ACCEPTED FOR RECORD

OCT 27 1999

RECEIVED

Oil and Gas Field Office
San Juan

PO Box 2088, Santa Fe, New Mexico 87505

Santa Fe, New Mexico 87505

5 Copies

☐ AMENDED REPORT

¹ Operator name and address PLAYA Minerals & Energy, Inc. 650 North Sam Houston Pkwy. E. Suite 500 Houston, Texas 77060		² OGRID Number 171052
		³ Reason for Filing Code CH - Effective September 1, 1999
⁴ API Number 30-045-10246	⁵ Pool Name Horseshoe Gallup	⁶ Pool Code 32870
⁷ Property Code	⁸ Property Name Horseshoe Gallup Unit	⁹ Well Number 176

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South Line	Feet from the	East/West line	County
O	26	31N	16W		570	South	1900	East	San Juan

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

12 Use Code U	13 Producing Method Code P	14 Gas Connection Date N/A	15 C-129 Permit Number	16 C-129 Effective Date	17 C-129 Expiration Date
------------------	-------------------------------	-------------------------------	------------------------	-------------------------	--------------------------

[illegible]

	24	POD ULSTR Location and Description
--	----	------------------------------------

25 Spud Date	26 Ready Date	27 TD	28 PBTD	29 Perforations
30 Hole Size	31 Casing & Tubing Size	32 Depth Set	33 Sacks Cement	

34 Date New Oil	35 Gas Delivery Date	36 Test Date	37 Test Length	38 Tbg. Pressure	39 Csg. Pressure
40 Choke Size	41 Oil	42 Water	43 Gas	44 AOF	45 Test Method

(713) 223-5600

~~NOV 12 1999~~

<i>Irene Martinez</i>	Irene Martinez	Engineering Technician	October 25, 1999
Previous Operator Signature	Printed Name	Title	Date
Central Resources, Inc. 003939			