Sabmit 3 Copies To Appropriate District Office	State of New Mexico	
District I 1625 N. French Dr., Hobbs, NM 88240	Energy, Minerals and Natural F	WELL API NO. 30-025-21850
District II 1301 W. Grand Ave., Artesia, NM 88210	OIL CONSERVATION DI	
District III 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis	Or. STATE X FEE
<u>District IV</u> 1220 S. St. Francis Dr., Santa Fe, NM	Santa Fe, NM 87505	6. State Oil & Gas Lease No.
(DO NOT USE THIS FORM FOR PROPO	TICES AND REPORTS ON WELLS OSALS TO DRILL OR TO DEEPEN OR PLUG B. ICATION FOR PERMIT" (FORM C-101) FOR SU	
1. Type of Well: Oil Well X	Gas Well Other	8. Well Number 001
	Operating, Inc.	9. OGRID Number 147179
3. Address of Operator P. O. Bo Midland	x 11050 , TX 79702-8050	10. Pool name or Wildcat Bagley;Permo Penn, North 3820
4. Well Location		
Unit Letter L	2050 feet from the South	line and 550 feet from the West line
Section 11	Township 11S Range	
	11. Elevation (Show whether DR, RK	B, RT, GR, etc.)
Pit or Below-grade Tank Application Pit type Depth to Ground		well Distance from nearest surface water
Pit Liner Thickness: mi		bbls; Construction Material
:		
	Appropriate Box to Indicate Nature NTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK		MEDIAL WORK ALTERING CASING
TEMPORARILY ABANDON	: <u> </u>	MMENCE DRILLING OPNS. P AND A
PULL OR ALTER CASING	MULTIPLE COMPL 🗆 CA	SING/CEMENT JOB
OTHER:Change Well Name 13. Describe proposed or com of starting any proposed v	pleted operations. (Clearly state all perti	HER: nent details, and give pertinent dates, including estimated date ompletions: Attach wellbore diagram of proposed completion
or recompletion.		
Chesapeake, respectfully, request toward having a consistent system	that the well name be changed from T P is in which to name our wells and show the	State #1 to the TP 11 State #1. This change will help us section number as well.
eff (3-1-05)	15 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
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		\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
I hereby certify that the information grade tank has been will be constructed of	n above is true and complete to the best of closed according to NMOCD guidelines , a	f my knowledge and belief. I further certify that any pit or below- eneral permit [] or an (attached) alternative OCD-approved plan [].
SIGNATURE SIGNATURE	a Offin TITLE Regula	ory Analyst DATE 03/14/2005
Type or print name Brenda Coffm For State Use Only	an E-mail per	OCCUM ENGINEER Telephone No. (432)687-2992 MAR 1 5 2005
APPROVED BY:	~	runn i niar
	TITLE	DATE

District I
1625 N. French Dr., Hobbs, NM 88240
District II
1301 W. Grand Avenue, 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

Form C-104A March 19, 2001

Oil Conservation Division 1220 South St. Francis Dr. Santa Fe, NM 87505 Submit 1 copy of the final affected wells list along with 1 copy of this form per number of wells on that list to appropriate District Office

Change of Operator

Prev	ious Operator Information:		New Operator Information:
OGRID: Name: Address: Address:	189535 Sapient Energy Corporation 8801 S. Yale, Suite 150	Addr	rid: 147179 me: Chesapeake Operating, Inc. ess: P. O. Box 18496 ess:
City, State, Zip:	Tulsa, OK 74137	City, State,	Zip: Oklahoma City, OK 73154-0496
	at the rules of the Oil Conservation Division ist of wells is true and complete to the best of the Bes		plied with and that the information on this forme and belief.
Title:	Sr. Vice President - Land & Le	gal	_
Date:	02/18/02 Phone: (405) 848-	R000	
Previous operato	or complete below:		NMOCD Approval
Operator:	Sapient Energy Corp.	Signature:	fraul Mente
Previous OGRID:	189535	Printed Name:	PAUL F KAUTE
Signature:	Ti Cagil	District:	PETROLEUM ENGINEER
Printed Name:	Tim Cargile, Controller	Date:	MAR 0 6 2002
			ST S

WELLS INVOLVED IN OPERATOR CHANGE FINAL LIST WITH \$104A

PEB 18, 2003

23 45 50 101/213 1415.

This is a final list of wells being transferred. It all bonding requirements are satisfied, submit this list to the OCD District with your Gl04A.

PREVIOUS OPERATOR: 189535 SAPIENT ENERGY CORPORATION

NEW OPERATOR:

	# # # # # # # # # # # # # # # # # # #
OCD DISTRICT: MOBBS	PROP- ERLY WELL NAME 29570 27749 0 G STATE #001

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29582 29760 State ve com #001	B19-175-358		30-025-24045		760 V	O 51760 VACUUM, ABO, NORTH		10-2001
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29576 2755 SHIPP IT SKD #002	I-17-178-37R	H	30-025-20267		8 160	S 96091 SWD; ABO		032000
29535 2774 AMSAZI 4 STATE ROOJ	304-20S-33B	þ	30-025-32032		110 7	O 59110 TERS, YATES-SEVEN RIVERS,	RRS, WEST	10-2001
2957 SCHARBAUER 4 #001 SCHARBAUER 4 #003	004-205-33E P04-265-33E	0 A	30-025-31857 30-025-32012	00	59110 T	59110 TEAS; VATES-SEVEN RIVERS, 59110 TEAS; VATES-SEVEN RIVERS,	RIVERS, WEST RIVERS, WEST	10-2001 10-2001
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29549 mis federal #001 federal #002	K 09-20S-338	14 14	30-025-29861 30-025-29972	6 5 6 8 8	59110 TU 59110 TU	59110 TEAS; YAPES-SEVEN RIVERS, WEST 59110 TEAS; YAPES-SEVEN RIVERS, WEST	RRS, WEST RRS, WEST	10-2001

District 1
1625 N. French Dr., Hobbs, NM 88240
District III
811 South First, 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

Form C-104A August 11, 2000

Oil Conservation Division 1220 South St. Francis Dr. Santa Fe, NM 87505 Submit 1 copy of the final affected wells list along with 2 copies of this form per number of wells on that list to appropriate District Office

Change of Operator

Previ	ious Operator Information:	New	Operator Information:
		Effective Date:	7/30/2000
OGRID:	169415	New Ogrid:	189535
Name:	Falcon Creek Resources, Inc.	New Name:	Sapient Energy Corp
Address:		Address:	8801 South Yale, Ste 150
Address:		Address:	
City, State, Zip:	Denver, CO 80293-0621	City, State, Zip:	Tulsa, OK 74137
form and the atta New Operator Signature: Printed name:	hat the rules of the Oil Conservation Division ched list of wells is true and complete to the P. K. Travis President	best of my knowledg	
•	2/26/01 Phone: (918) 488-8	988	
•	or complete below:	Ī	NMOCD Approval
Previous	•		- 1 M/1
Operator:	Falcon Creek Resources, Inc.	Signature:	aul Traits
Previous		Printed	
OGRID: _	169415	Name: Po	ul F Kauta
Signature:	Luce Luns	District:	* Geologist
Printed			
Name:	Gerald Lucero	Date:	MAR 2 1 200

This is a final list of wells being transferred. If all bonding requirezents are satisfied, submit this list to the OCD District with your C-104A.

PREVIOUS OPERATOR: 169415 PALCON CREEK RESOURCES, INC.

NEW OPERATOR: 189595 SAPPLEAUT GALFELY CORP.

OCD DISTRICT: ROBBS

PROP- FAUT WELL HONG:		API	×		
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ALT FINE OF ROOM	#50-90K-67-68	30-025-24045	0 617	61760 VACUUM; ABO, NORTH	08-2000
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ENDERNY FOOT FEDERAL FOOT	IK - 09-205-338 L-09-206-338 J-09-206-338	30-025-29861 30-025-29972 30-025-30239	0 59110 0 59110 0 59110	59110 Teab; Pates-Seven Rivers, Febt 59110 Teab; Pates-Seven Rivers, Febt 59110 Teab; Pates-Seven Rivers, Febt	08-2000 01-2000 08-2000
23400 FIDERL 9 4001	G-69-20s-33E	30-028-31035	11.625.0	O BELLO TEAS; VATES-SEVEN RIVERS, WEST	08-2000

District.1 625 N. French Dr., Hobbs, NM 88240 District.11 111 South First, Artesia, NM 88210 District.111

000 Rio Brazos Rd., Aztec, NM 87410

1040 South Pacheco, Santa Fe, NM 87505

District IV

State of New Mexico inergy, Minerals & Natural Resources

Form C-104 Revised March 25, 1999

OIL CONSERVATION DIVISION 2040 South Pacheco Santa Fe, NM 87505

Submit to Appropriate District Office 5 Copies

☐ AMENDED REPORT

·	REQ			OWABLE	AND	AUTI	IORI	ZATIC	OTM				
		•	rator name and	•	_	_				• 00	GRID No	mber	
Falcon Cree				Sapie	nt Ene	rgy Co	orp.			1 Dece	16941 on for Fi		A.
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41 Choke Size		42 Oil		43 Water		44	Gas		45 AO	F		46 -	Test Method
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	Previ	ous Operator	Signature			Printed	Name				Title		Date

District.1 1625 N. French Dr., Hobbs, NM 88240 State of New Mexico
Energy, Minerals & Natural Resource.

Form C-104 Revised March 25, 1999

N. Held District II
811 South First, Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION 2040 South Pacheco Santa Fe, NM 87505

Submit to Appropriate District Office 5 Copies

1000 Rio Brazos Rd., Aztec, NM 87410 District IV. 2040 South Pacheco, Santa Fe, NM 87505

☐ AMENDED REPORT

•	REQU	JEST FO	R ALLC)WABLE	AND	AUT	HORIZ	ZATIC	N TO T	RANS	PORT	
			or name and	Address						² OGRIE	Number	}
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III. Oil and	Gas Tr	ansporters										
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District I PO Box 1980, Hobbs, NM 88241-1980

District II 811 South First, Artesia, NM 88210

District III 1000 Rio Brazos Rd., Aztec, NM 87410

State of New Mexico
Energy, Minerals & Natural Resources Department

Form C-104 Revised October 18, 1994 Instructions on back Submit to Appropriate District Office 5 Copies

OIL CONSERVATION DIVISION 2040 South Pacheco

District IV 2040 South Pag		Canta Es	NII 075	:OE		S	anta	Fe, NM	875	505	•			AME	NDED REPORT
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35 Date No		T		Delivery Dat		37 Test [Date	Т	36	Test Leng	gth	39 Tbg. Pres	ssure	$\neg \Gamma$	40 Csg. Pressure
					i							<u> </u>			
⁴¹ Choke	Size			42 Oil		43 Wa	ter			44 Gas		45 AOF			46 Test Method
												<u> </u>			
47 I hereby cer complied w	th and	that the	informatio	on given abo		ision have b ie and comp		Į.		(NSERVATI	ON D	IVISIO	NC
to the best	of my k	nowledg	e and bel	iet.							e Co	ig. Signed by	ט		
Signature:	_{	ay	-7)	Janti	n.				roved	by:		Paul Kautz			
Printed name:	Ray	у в) <u>.</u>	Marti	ń		/97	<u>N</u>	/ Title:				Geologist			
Title:	0pe	erati	ons E	nginee	r			Appr	oval	Date:		SEP 25 8	998		
Date:	_	11-98		Phone	(915)										
ff this is a ch	ange of	operato	or fill in the	OGRID nu	mber an	nd name of ti	ne pre	vicus opera	lor						
<u> </u>	D *	aa O	enles C						-4 1						
Ì	LIEVI	aus Ope	erator Sign	MUIE				Pri	inted	Name	-			Tille	Date

Submit 5 Copies
Appropriate District Office
DISTRICT I
P.U. Box 1980, Hobbs, NM 88240

State of New Mexico Energy, Minerals and Natural Resources Department Form C-104 Revised 1-1-89 See Instructions at Bottom of Page

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

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

DISTRICT III
1000 Rio Brizos Rd., Aziec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION

·	1	O TRA	NSF	ORT OIL	<u>, and na</u>	TURAL	<u>. Gas</u>	- 1 W.H	ATI No.		 -
CROSS TIMBERS OPERA	TING COL	MPANY							-025-218	50	
Address			~~~	79710	`						
P. O. Box 50847 Reason(s) for Filing (Check proper box)	Midla	ilu, it	2242	/3/10		er (Please	explain				
New Well		Charge la			_	·	•				>.
Recompletion U	Oil Codinghead		Cond								
Change of operator give name ad address of previous operator	- Comp		, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,								
	ANDIEA	cr									
1. DESCRIPTION OF WELL Lease Name	ANTO LEA				ng Formation				of Lesse		tese No.
T. P. State		_1	B	agley P_{ℓ}	umo le	m, 7	7 v.		Federal or Fee	OG-	201
Location	20	50		From The S	outh		550	_		West	
Unit Letter	_ }		. Feel I		Lie	bas a			set Prote The		Lies
Section] Townshi	<u> </u>	5	Range	, 33E	Ν.	MPM,	Lea	l			County
II. DESIGNATION OF TRAN	SPORTE	R OF O	IL AI	UTAN DE	RAL GAS						
Name of Authorized Transporter of Oil		or Conde		<u>,</u>					evelland		79336
Amoco Pipeline Intellement of Authorized Transporter of Carlo		(XX)		y Out	Address (Gl	e address	to which	approved	copy of this fo	rm b to be se	und)
Warren Petroleum Co	rporati	on			P. O.	Box 1	689,	Lovi	ngton, Ne	w Mexic	o 88260
if well produces oil or liquids, ive location of tanks.	Unit	Sec.	[[] طمر[1 Rea.	In gas actual Yes	y consect	ed 7	Whee	2-2-67		
this production is commissied with that	from any other					ber:					
V. COMPLETION DATA		TOII Well		Clea Well	New Well	Worker		<u> </u>			bee and
Designate Type of Completion		i	i_		i	Worker		Despes	Plug Back	32/100 A(63 V	Diff Res'v
Date Special of	Data Compl	l. Ready to	Prod.		Total Depth				F.B.T.D.		
levations (DF, RKB, RT, GR, etc.)	Name of Pri	oducing Fo	othermo		Top OiVGe	Pay			Tybing Depti	1	
erforstices	<u> </u>				L				B 7 8 T		
UIVIAOD									Depth Carlos	Sho4	
					CEMENT						
HOLE SIZE	CAS	ING & TL	JBING	SIZE		DEPTH	SET		s	ACKS CEM	ENT
	 										
. TEST DATA AND REQUE	T FOR A	LLOW	ABLE	:					ــــــــــــــــــــــــــــــــــــــ		
IL WELL (Test must be after to the First New Oil Run To Tenk			of load	oil and must	be equal to or Producing M					r full 24 hou	77.
ARTHE IMM ON VOR 10 1977	Date of Test				LICOLOGIE IN	enios filio	w, pary,	, gas igi,	ne j		ł
tages of Test	Tubing Pres				Casing Press	11.6			Choke Size		
ctual Prod. During Test	Oil - BML				Water - Bbis				Ose-MCF		
									1		
AS WELL											
itual Prod. Test - MCF/D	Leegth of T	eel	-		Bble Coades		.P		Charles of C	فانجمناها	
alog Method (pilot, back pr)	Tubles Pres	enie (Strie	-6)		Casing Press	in (Shul-l	<u>a)</u>		Choke Size		
									<u></u>		
I. OPERATOR CERTIFIC I hereby certify that the rules and regul				NCE	1 (DIL C	ONS	ERV	ATION E	DIVISIO	N
Division have been complied with and	that the inform	ration give		**]					0 2 92	
is true and complete to the best of my i	DOWNAGE RO	o beller.			Date	Appro	oved .		001	V ~ 32	
Joney Ma	kiste	1/2	/		p.,	ORIG	Mai 2	IGNED	of Jorgy 1	IXTON	
Signature Gary L. Markestad	_Opera	tions	Ena	ineer	By_				UPSKVISOR		
Printed Name			Title		Title	•				· · · · · · · · · · · · · · · · · · ·	•
9-30-92 (9	15)682-		phone i	No.						<u>-</u>	
					u,						

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.
- All sections of this form must be filled out for allowable on new and recompleted wells.
 Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
 Separate Form C-104 must be filed for each pool in multiply completed wells.

Appropriate District Office
DISTRICT 1
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico Energy, Minerals and Natural Resources Department Form C-104 Revised 1-1-89 See Instructions at Bottom of Page

OIL CONSERVATION DIVISION P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III			
1000 Rio Brezos	Rd. Ane	c, NM	87410

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

1000 Rio Brezos Rd., Aziec, NM 87410	REQ					AUTHOR		N			
l. Operator		TOTAL	MOP	UH I UII	- ANU NA	TURAL G			Pl No.		
CROSS TIMBERS OPER	ATING	COMPAN	<u>Υ</u>					Ē	30-02	5-218	50
Address P. O. Box 50847 M	lidland	l. Texa	s	79710							
Resson(s) for Filing (Check proper box)	101011	-			Oil	res (Please exp	lain)				
New Well Recompletion	Oil	Change in	Dry G								
Change in Operator		14 Gus 📋	•				_				
If change of operator give name cross	s Timb	ers Pr	oduc	tion C	ompany,	810 Hou	ston S	tre	et, Su	ite 2000)
IL DESCRIPTION OF WELL	AND LE	ASE				Fort Wo	rth, T	exa	is 76	102	•
Lease Name T. P. STATE				ley Pe	ing Formation	enn Ho			Lense ederal or Fe		esse No. 201
Lecation		2000				,	^				
Unit Letter	- :	2050	. Feet F	rom The S	outn u	sed55	U	_ Fee	4 From The .	West	Line
Section 11 Township	, 1	IS	Range	33E	N	MPM,	Lea	1			County
III. DESIGNATION OF TRAN	SPARTT	TR OF O	II. AN	ID NATE	DAT. GAS						
Name of Authorized Transporter of Oil	וצאו	or Cogder	sate			we address to w	hick appro	wed o	copy of this f	orm is to be se	ini)
Amoco Pipeline Con	many Z					Box 172					
Name of Authorized Transporter of Casing Warren Petroleum (EXX ation	or Dry	Om		wa <i>adarese to</i> w Box 168					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp		le gas actual			ben i			<u></u>
or units. I this production is commingled with that i	<u>L</u>		115		Yes				2-2-	6/	
V. COMPLETION DATA	ioni say u	intricate of	pour, gr	At committee	HILL OLDER STATE						
Designate Type of Completion	· (X)	Oil Well	<u> </u>	Gas Well	New Well	Workover	Deepe	•	Plug Back	Same Res'v	Diff Res'v
Date Spudded		ipl. Ready to	Prod.		Total Depth	<u></u>	ــــــــــــــــــــــــــــــــــــــ	ᆛ	P.B.T.D.	L	J
·	<u> </u>	<u> </u>									
Elevations (DF, RKB, RT, GR, etc.)	Name of	Producing Fo	omuior	•	Top Oil/Gas	Pay			Tubing Dep	th	
Perforations	L				·			-	Depth Casia	g Shoe	
		TIPAG	CASI	NCI AND	CEMPART	NO DECOI	<u></u>	1		 	
HOLE SIZE		ISING & TI			CEMENTI	NG RECORDED THE SET				SACKS CEM	ENT
					 						
······································											
V. TEST DATA AND REQUES OIL WELL Test must be after re											
OIL WELL (Test must be after re Date First New Oil Run To Tank	Date of To		oj ioaa	ou and must		ethod (Flow, p				or juli 24 hou	rs.j
· · · · · · · · · · · · · · · · · · ·									<u> </u>		
Length of Test	Tubing Pr	testiff.			Casing Press	ris			Choke Size		
Actual Prod. During Test	Oil - Bbla				Water - Bbla				Gu- MCF		
GAS WELL	·										·
Actual Prod. Test - MCF/D	Leogth of	Test			Bbls Conde	HWWCP		7	Charley of C	condensate	
esting Method (pitot, back pr.)	Tubing Pr	essure (Shut	·in)		Casing Press	ure (Shut-to)		\dashv	Choka Siza		
VL OPERATOR CERTIFIC	ATE O	COMP	LIAN	NCE	1						
I hereby certify that the rules and regula	alone of the	Oil Couser	vation		(OIL COI	NSER	VA	TION	DIVISIO	N
Division have been complied with and it is true and complete to the best of my k			te abov					2		1001	
		_	D		Date	Approve			W_W	0 1331	
Jany S	ng	and	Ψ_		By_	Orig. S	igned b Kautz	y .			
Signature B. McDonald		V-P P	rodu	ction	~ لام	Geo	logist				
Printed Name 6-1-9]			Title		Title	,					
Date			682-6 phose N								

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.

NO. OF COMES SICEIVED DISTRIBUTION SANTA FE FILE

(Date)

NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE AND

Form C-104 Supersedes Old C-104 and G-110 Effective 1-1-65

U.S.G.S.	AUTHORIZATION TO TR	ANSPORT OIL AND NATURAL G	AS
LAND OFFICE			
TRANSPORTER GAS	1		
OPERATOR			
PRORATION OFFICE Operator			
Cross Timbers Produ	uction Company		
P.O. Box 50847 Reason(s) for filing (Check prop.	Midland, Texas 79710	Other (Please explain)	
New Well	Change in Transporter of:	Come (process companies)	
Hecompletion	OII X Dry G	as 🔲	
Change in Ownership	Casinghead Gas Conde	nadte	
f change of ownership give na and address of previous owner			
DESCRIPTION OF WELL A	AND LEASE		
Lease Name	Well No. Pool No	ame, Including Formation	Kind of Lease
T. P. State	1 Bagle	y Permo Penn, North	State, Federal or Fee State
Unit Letter :	2050 Feet From The South Li	ne and <u>550</u> Feet From T	he West
Line of Section 11	, Township 11 S Range 3	33 E , NMPM, Lea	County
	PORTER OF OIL AND NATURAL GA		
Name of Authorized Transporter	of OII 💢 or Condensate 📋	Address (Give address to which approv	
Western Oil Transporter Name of Authorized Transporter	of Casinghead Gas (X) or Dry Gas (1)	P.O. Box 3119 Midland Address (Give address to which approv	Texas 79702 ed copy of this form is to be sent)
		1	
Warren Petroleum If well produces oil or liquids,	Unit Sec. Twp. Rge.	P.O. Box 1589 Tulsa. Is gas actually connected? Whe	on 74107
give location of tanks.	L 11 115 33E	Yes	1966
	ed with that from any other lease or pool,	give commingling order number:	
COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.
Designate Type of Comp			
Date Spudded	Date Compt. Ready to Prod.	Total Depth	P.B.T.D.
Pool	Name of Producing Formation	Top Oll/Gas Pay	Tubing Depth
Perforations		<u> </u>	Depth Casing Shoe
	TUBING CASING AN	D CEMENTING RECORD	·
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
TEST DATA AND REQUES	ST FOR ALLOWABLE (Test must be a able for this do	ifter recovery of total volume of load oil a epth or be for full 24 hours)	and must be equal to or exceed top allow-
Date First New Oil Run To Tank		Producing Method (Flow, pump, gas life	t, etc.)
_ength of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bhis.	Water - Bbls.	Gas-MCF
		,	
AS WELL			
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Cesting Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size
ERTIFICATE OF COMPL	JANCE	011 00110=	TION 0
		11115	TION-ROMMISSION
ommission have been compli	and regulations of the Oil Conservation lied with and that the information given to the best of my knowledge and belief.	APPROVED COLUMN	JERRY SEXTON
	Jose of all knowledge and belief.	DISTRICT I SUP	
11 11 10	10	TITLE	
San J V	>>>	This form is to be filed in co	ompliance with RULE 1104.
7 X. 4	K.K. Kirby		able for a newly drilled or deepened
	(Signature)	well, this form must be accompan tests taken on the well in accord	led by a tabulation of the deviation lance with RULE 111.
Operations Engineer	(Tule)	All sections of this form mus	t be filled out completely for allow-
May 31, 1988		The same of the sa	·

Fill out Sections I, II, III, and VI only 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 multiply completed wells.

į	NO. OF COPIES PECEIVED			
	DISTRIBUTION	NEW MEXICO OIL CO	ONSERVATION COMMISSION	Form C-104
	SANTA FE	. REQUEST I	FOR ALLOWABLE	Supersedes Old C-104 and C+ Effective 1-1-65
	FILE	•	AND	
	U.S.G.S.	AUTHORIZATION TO TRA	NSPORT OIL AND NATURAL GA	,\$
i				
	IRANSPORTER GAS			
	OPERATOR .		1	. •
1.	PRORATION OFFICE			
	CROSS TIMBERS PRO	UNICTION COMPANY		
	Address	DECTION CONTAIN		
		et, Suite 2000, Fort Wort	th, TX 76102	
	Reason(s) for filing (Check proper linx)		Other (Please explain)	
i	New Well	hings in Fransporter of:		
	Recompletion	Out Day Gro	= (
	Change in Ownership X	Casinahead Gas Conden		
	If change of ownership give name	Crown Central Petroleum		_
	and address of previous owner	4000 N. Big Spring, Suit	te 213, Midland, TX 7970	5
11	DESCRIPTION OF WELL AND	rease m. I	Bagles ferm hem	. /
•••	Lease Hame	Well No. Pect Nar	me, including ormation	Kind of Luque
	T. P. STATE	1 7/2	Bagley Wolfcamp	Islate, Federal or Free State
	Location			
	Unit Letter L ; 20	<u>150</u> Feet From The <u>South</u> Lin	e and 550 Feet From Th	west
		116	205	_
	Line of Section]] , Tou	vnship 115 Range	33E , NMPM, Lea	County
п.	DESIGNATION OF TRANSPORT	CER OF OIL AND NATURAL GA	.s	
	Name of Authorized Transporter of Cil		Address (Give address to which approve	d copy of this form is to be sent)
	Amoco Pipeline Compan		P. O. Box 1725, Midland	TX_ 79702
	Name of Authorized Transporter of Cas	singhead Gas or Dry Gas	Address (Give address to which approve	d copy of this form is to be sent)
	Warren Petroleum Cor	Unii Sec. Twp. Rge.		on. NM 88260
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge.	Is gas actually connected? When	2-2-67
				
v.	COMPLETION DATA	th that from any other lease or pool,	give comminging order number:	
	Designate Type of Completion	Cil Well Gas Well	New Well Workover Deepen	Plug Back Same Resty, Diff. Rest
		Date Compl. Ready to Prod.	7	
	Date Spudded	Date Compt. Neday to Prod.	Total Depth	P.B.T.D.
	Pool	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
	Perforations			Depth Casing Shoe
			CEMENTING RECORD	
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
٧.	. TEST DATA AND REQUEST F		fter recovery of total volume of load oil a	nd must be equal to or exceed top allow
	OII. WEI.I. Date First New Cil Run To Tanks	Date of Test	producing Method (Flow, pump, gas lift	erc.)
			Troubling inclined (tribble pamps give tri)	, etc.,
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size
		<u> </u>		1
	Actual Prod. During Test	Oil-fibls.	Water - Bbls.	Gas - MC1
			L.	
	GAS WELL			
	Actual Frod. Test-MOF (D)	Lougth of Test	Bbls. Condensur/MMCF	Gravity of Condensate
	Testing Esthod (pitot, back pr.)	Tubing Pressure	Cusing Pressure	Choke Size
			<u> </u>	<u> </u>
Ί.	CERTIFICATE OF COMPLIAN	CE	OIL CONSERVA	TION COMMISSION
			JAN 2	2 5 1988
		regulations of the Oil Conservation with and that the information given	1	
	above is true and complete to the	best of my knowledge and belief.	BY ORIGINAL SIGNED B	
	/ . /		DISTRICT I SU	PERVISOR "
	(1)		1	ometiance with new const
1	Varyle D. Werner (XXX)	aughn O. Vennerberg, II	This form is to be filed in co	ompliance with RULE 1104. able for a newly drilled or deepene
•	/ 1	ature)	well, this form must be accompan	ied by a tabulation of the deviation
	() Land Manager		tests taken on the well in accord	

(Title) 12-31-87

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

Fill out Sections I, II, III, and VI only for changes of owner well name or number, or transporter, or other such change of condition Separate Forms C-104 must be filled for parking of the second transporter.

ST OF COPIES BEC	CIVED	;	
DISTRIBUT	ON	1	
SANTA FE		-	
FHE			
U.S.G.S.		İ	
LAND OFFICE			
IRANSPORTER	OIL		
	GAS		
OPERATOR			

NEW MEXICO OIL CONSERVATION COMMISSION

	SANTA FE	REQUEST	FOR ALLOWABLE	Supersedes Old C-104 and C-11
	U.S.G.S.	AUTHORIZATION TO TRA	AND ANSPORT OIL AND NATURAL G	Effective 1-1-65
	I HANSPORTER OIL GAS			
	OPERATOR			
ı.	PRORATION OF ICE			
	Crown Central Petr	coleum Corporation		
	1010 Bank of the S	Southwest Bldg., Hous	ston, Texas 77002	
	New Well	Change in Transporter of:	Committee Capitality	
	Recompletion Change in Overship	Oil Dry Ga Casinghead Gas Conder	≔ 1	
	If change r. ownership give name		onal Petroleum Corpo ion Tower, Dallas, To	
	and address of previous owner	2400 Fiderity On.	ion Tower, Dallas, To	exas /5201
11.	DESCRIPTION OF WELL AND	Well No. Pool Name, Including Fo	ormation Kind of Lease	Lease No.
	T. P. State	l Bagley Wolfc	amp Northeast Stole, Federal	or Fee State OG-201
	-	Feet From TheLin	e andFeet From T	W
	Line of Section 11 Tow	waship 115 Range	33E , NMPM, Lea	County
111.	DESIGNATION OF TRANSPORT	FER OF OIL AND NATURAL GA	ıs	
	None of Authorized Transporter of Oil Amoco Pipe Line Co		3411 Knoxville Aven	ed copy of this form is to be sent) UC
	Name or Authorized Transporter of Cas		Lubbock Texas 7941 Address (Give address to which approv	ed copy of this form is to be sent)
	Warren Petroleum	Unit Sec. Twp. Pgs.	Tulsa, Oklahoma Is gos actually connected? Whe	n
	If well produces oil or liquids, give location of tanks.	12 12 12 12 12 12 12 12 12 12 12 12 12 1		
IV.	If this production is commingled with COMPLETION DATA	th that from any other lease or pool,		`
	Designate Type of Completion	on - (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 Oll/Gas Pay	Tubing Depth
	Perforations	<u> </u>		Depth Casing Shoe
		TUBING, CASING, AND	CEMENTING RECORD	<u> </u>
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
			<u> </u>	i
V.	TEST DATA AND REQUEST FO OIL WELL	able for this de	fter recovery of total volume of load oil a opth or be for full 24 hours)	
	Date First New Ct. Run To Tanks	Date of Test	Producing Method (Flow, pump, gas life	t, etc.)
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size
	Artua: Prea. Burin, Test	Oil-Bble.	Water-Bbls.	Gde-MCF
	1		1	
	GAR WELL Adrug Prod. Test-MCF/D	Length of Test	Bble. Condensate/MMCF	Gravity of Condensate
	Teating vethod 'puct, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
,.	CI TO CONTRACTOR OF CONTRACTOR		1 04 004055144	
1.	CERTIFICATE OF COMPLIANC	J i.	NOV 1	TION COMMISSION
	I herery cort.ly that the rules and r Communitor have been complied w	ith and that the information given	APPROVED INUV	Pure
	above .a true and complete to the		TITE Geolo	gist
	H. R. Shory			
	M. G. Shows	son		able for a newly drilled or deepened
			well, this form must be accompant tests taken on the well in accord	led by a tabulation of the deviation lance with MULE 111.
	Age		All sections of this form mus	t be filled out completely for allow-

NO. OF COPIES REC	:VED	
DISTRIBUTION	ЭN	
SANTA FE		T
FILE	T	
U.S.G.\$.		1
LAND OFFICE		Ĭ
IRANSPORTER	OIL	
TRANSI OTTER	GAS	<u> </u>
OPERATOR		
PRORATION OF	ICE	
Operator		
Sunset Int	ernati	ona
Address	_	
201 Wall E	3ldg.,	Sui
Reason(s) for filing	(Check prop	er box)

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-104

SANTA FE	REQUEST	FOR ALLOWABLE	Supersedes Old C-104 and C-110 Effective 1-1-65
U.S.G.S.	_	AND NSPORT OIL AND NATURAL GA	
LAND OFFICE	: AOTHORIZATION TO TRA	INO OK MOIE AND NATOKAE GA	J
IRANSPORTER OIL			
OPERATOR GAS			
PRORATION OFFICE			
Operator Sunset Internation	al Petroleum Corporat	ion	
Address			
201 Wall Bldg., Su Reason(s) for filing (Check proper box	ite 308 - Midland, Te	Other (Please explain)	
New Weil	Change in Transporter of:		
Hecompletion	Of: Try Go	$\overline{}$	
Change in Ownership	Casinghead Gas Conder	sate [
f change of ownership give name and address of previous owner			
	IFACE		
DESCRIPTION OF WELL AND Lease Name	Well No. Pool Ma		Kind of Lease State
T. P. State	1 N. I	E. Bagley - Wolfcamp	State, Federal or Fee OG -201
	50 Feet From The South Lin	e and 550 Feet From Th	West
Line of Section 11 , To	waship 115 Range	33E , NMPM, Lea	County
	TER OF OIL AND NATURAL GA	Address (Give address to which approve	d conv of this form is to be cont
Name of Authorized Transporter of Ci			•
Name of Authorized Transporter of Co	Company Autors Pheline Consideration of the Conside	3411 Knoxville Ave Address (Give address to which approve	d copy of this form is to be sent)
Warren Petroleum C	orporation Unit Sec. Twp. Age.	P. O. Box 1589 Is gas actually connected? When	Tulsa, Okla
If well produces oil or liquids, give location of tanks.	L 11 11s 33F		ebruary 2, 1967
· · · · · · · · · · · · · · · · · · ·	ith that from any other lease or pool,		
COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Festv. Diff. Restv.
Designate Type of Completi			
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
Pcol	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
Perforations			Depth Casing Shoe
		CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
TEST DATA AND REQUEST F	FOR ALLOWABLE (Test must be a	fter recovery of total volume of load oil an	nd must be equal to or exceed top allow-
OIL WELL Date First New Oil Run To Tanks	able for this de	ppth or be for full 24 hours) Froducing Method (Flow, pump, gas lift,	
		1	,
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbis.	Water-Bbls.	Gas-MCF
GAS WELL			
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure	Coulon	
resting Method (pitot, odex pr.)	i wing Fressure	Casing Pressure	Choke Size
CERTIFICATE OF COMPLIAN	ICE	OHE CONSERVAT	TON COMMISSION
I have be a considerable of the confidence of the	nominations of the Oil Communication	APPROVED	
Commission have been complied	regulations of the Oil Conservation with and that the information given		, 19
100vc 15 true and complete to th	best of my knowledge and belief.	BY_	
1//		TITLE	
JUL-	S. L. Parks	This form is to be filed in co	
(Sign	nature)		ble for a newly drilled or deepened ed by a tabulation of the deviation
Clerk	itle)	All sections of this form must	be filled out completely for allow-
May 17, 1967		able on new and recompleted well	s. nd VI only for changes of owner,
(1)	Pate)	well name or number, or transporter	or other such change of condition.

able on new and recompleted wells. Fill out Sections I, II, III, and VI only 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 multiply

•		
NO. OF COPIES HEC	EIVED	į
DISTRIBUTI	ON	
SANTA FE		
FILE		1
u.s.g.s.		
LAND OFFICE		1 1
(RANSPORTER	OIL	
TRANSPORTER	GAS	
OPERATOR		
PRORATION OF	FICE	
Operator		
	Ju	nset
Address		
	20:	l Wal
Reason(s) for filing	(Check)	proper bo
New Well	\sqcup	
Recompletion		
Change in Ownersh	io l	

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-104

SANTAFE	REQUEST	FOR ALLOWABLE	Supersedes Old C-104 and C-11: Effective 1-1-65
FILE U.S.G.S.		AND	
LAND OFFICE	AUTHORIZATION TO TRA	NSPORT OIL AND NATURAL	GAS
[RANSPORTER OIL	1 11	MIPATE	
GAS GAS		MIL	*
OPERATOR	إنا		
PRORATION OFFICE		- Missing the market of the last of the la	
Operator	International Petrole	ama Corvoration	
Address	THIGHTIGHTOWN DECLOY	Sen COLTOI GETON	· · · · · · · · · · · · · · · · · · ·
i e	1 Bldg. Buite 308, R	idland. Texas	
Reason(s) for filing (Check proper bo		Other (Please explain)	
New Well	Change in Transporter of:		
Recompletion.	O:1 Ory Ga	.s	
Change in Ownership	Casinghead Gas Conder	isate	<u> </u>
If change of ownership give name			
and address of previous owner			
DESCRIPTION OF WELL AND	T PACE		
Lease Name	Well No.: Pool No.	me, Including Formation	Kind of Lease
T state	1 Undes	ignated Wolfcamp	State State, Federal or Fee OG-201
Location			40-201
Unit Letter 1, 205	60 Feet From The Jouth Lin	e and 550 Feet From	The West
			•
Line of Section 11 , To	ownship 11 Range	33 , NMPM, Le	County
DECIONATION OF TRANSPOS	TED OF OH AND MATURAL OF	.c	
Name of Authorized Transporter of O	RTER OF OIL AND NATURAL GA	Address (Give address to which appro	oved copy of this form is to be sent)
Par de la	42, 11 51 -	· · /	
Name of Authorized Transporter of C	asinghead Gas cr Dry Gas	Address (Give address to which appro	oved copy of this form is to be sent)
W rren etroleum Co	orporation	0. Box 1589 Tu	lsa, Oklahoma
If well produces oil or liquids,	Unit Sec. Twp. Ege.	ls gas actually connected?	hen
give location of tanks.	11 11 332	Yes B	eing Connected
	ith that from any other lease or pool,	give commingling order number:	
COMPLETION DATA	Of! Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.
Designate Type of Complet	ion – (X)		
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
		ļ.,	
Pocl	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
		<u> </u>	
Perforations		•	Depth Casing Shoe
	TURING CASING AND	CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
L	<u> </u>	1	
TEST DATA AND REQUEST I		fter recovery of total volume of load oi opth or be for full 24 hours)	l and must be equal to or exceed top allow
OIL WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas i	ift, etc.)
		, , , , , , , , , , , , , , , , , , , ,	• • •
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
			<u> </u>
Actual Prod. During Test	Oll-Bbis.	Water-Bbis.	Gas-MCF
	1	<u> </u>	
CAC WELL			
GAS WELL Actual Prod. Test-MCF/D	Length of Test	Rbls. Condensate/MMCF	Gravity of Condensate
1		l l l l l l l l l l l l l l l l l l l	S.A.M. of Sondensque
Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size
CERTIFICATE OF COMPLIAN	NCE	OIL CONSERV	ATION COMMISSION
	regulations of the Oil Conservation	APPROVED	, 19
	with and that the information given ne best of my knowledge and belief.	BV.	<u> </u>
•			
		TITLE	
the to		This form is to be filed in	compliance with RULE 1104.
	Ram	If this is a request for allo	wable for a newly drilled or deepened
	nature)	well, this form must be accomp- tests taken on the well in acco	anied by a tabulation of the deviation ordance with RULE 111.
roduction_Cl			
73	eri-		
January 20, 1	eri. ^{ule)}	able on new and recompleted w	ust be filled out completely for allow- ells. , and VI only for changes of owner,

Fill out Sections I, II, III, and VI only 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 multiply

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NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE COMMISSION

Form C-104 Supersedes Old C-104 and C-110

Dist. Sant.	Harrix	If this is a request for allow	compliance with RULE 1104. wable for a newly drilled or deepened spied by a tabulation of the deviation whence with RULE 111.
\searrow	1. ~1	TITLE	
I hereby certify that the rules and r Commission have been complied w above is true and complete to the	ith and that the information given	87	
I. CERTIFICATE OF COMPLIANC		APPROVED	ATION COMMISSION
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Candensate
GAS WELL			
184	176	8	211
24 hr. Actual Prod. During Test	225 PSI Oil-Bble.	Packer Water-Bble.	16/64 Gas-MCF
Length of Test	12-27-00 Tubing Pressure	Casing Pressure	Choke Size
OIL WELL Date First New Oil Run To Tanks 12-22-66	Date of Test 12-29-66	Producing Method (Flow, pump, gas l	ift, etc.)
TEST DATA AND REQUEST FO			and must be equal to or exceed top allow
7 7/8"	5 1/2" 17#	10325 D.V. Tool 4712	1060 sacks-top 7800 300 sacks Tep 3800
11"	8 5/8" 24 & 32#	3770 !	300 sacks-top 2500
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET 3631	SACKS CEMENT 375 Sacks-circulated
		CEMENTING RECORD	
Perforations 8805' to 8818	' + 13' 2 holes per ft.		Depth Casing Shoe
4248.7 Gr	Wolf Care	8805	8826 Pasker
9-16-66 Elevations (DF, RKB, RT, GR, etc.)	12-22-66 Name of Producing Formation	10325 Top Oil/Gas Pay	8863 Tubing Depth
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
Designate Type of Completion	n - (X) Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v
If this production is commingled with COMPLETION DATA	h that from any other lease or pool,	give commingling order number:	
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. L 11 118 33E	Is gas actually connected? Wh	available
Warren			
Pan American Name of Authorized Transporter of Cas	inghead Gas or Dry Gas	201 Wall Bldg, Sulto	
Name of Authorized Transporter of Oil		Address (Give address to which appro	oved copy of this form is to be sent)
pare of decidar	Timing		County
33	119	200	
Location Unit Letter L ; 20	50 Feet From The south Lin	(-523 / ne and 550 Feet From	The Vest
T. P. State	Well No. Pool Name, Including F. 1 North Begley,	Well Camphayle State, Feder	
DESCRIPTION OF WELL AND I	LEASE	wolfant -	Jul
If change of ownership give name and address of previous owner		- 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	July Colland
Change in Ownership	Casinghead Gas Conder	741	
New Well Recompletion	Change in Transporter of: Oil Dry Ga	ıs 🔲	
Reason(s) for filing (Check proper box)		Other (Please explain)	
Address			1111
Operator Sunset Internation	onal Petroleum Corporati	on	
PRORATION OFFICE			
TRANSPORTER GAS			
LAND OFFICE	AUTHORIZATION TO TRA	INSPORT OIL AND NATURAL	17
FILE U.S.G.S.	1	AND	
	WE WOLD!	I AN UPPROPRERIEDINE U.V.	C SW

(Title)

(Date)

12-29-66

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 multiply completed wells.

NO. OF COPIES RECEIVED				Form C-103 Supersedes Old
DISTRIBUTION		unan		C-102 and C-103
SANTA FE	NEW MEX	CO OIL CONSERVATIONES	C. C. C. C. C.	Effective 1-1-65
FILE				
U.S.G.S.		JAN 3	8 00 AN '67	5a. Indicate Type of Lease State Fee
LAND OFFICE			an itt Ol	5, State Oil & Gas Lease No.
OPERATOR				0G - 201
(DO NOT USE THIS FORM	SUNDRY NOTICES AND R	EPORTS ON WELLS	RENT RESERVOIR.	
1.	APPLICATION FOR PERMIT -** (FORM	4 C-101) FOR SUCH PROPOSALS.)		7. Unit Agreement Name
OIL GAS WELL	OTHER-			
	tional Petroleum Con	poration		8. Farm or Lease Name T.P. State
3. Address of Operator 201 Wall Hidg.	, Suite 308, Midland	l, Texas		9. Well No.
4. Location of Well	2050	South	550	10. Field and Pool, or Wildcat North Bagley
UNIT LETTER	FEET FROM T	South LINE AND	FEET FROM	minimum's
THELIN	IE, SECTIONTOW	NSHIP RANGE	33E NMPM	
		(Show whether DF, RT, GR,	etc.)	12. County
	HILLING MACH	2.7 GR		Les
	Check Appropriate Box T E OF INTENTION TO:	AD ABANDON REMEDIAL WO	SUBSEQUEN	T REPORT OF:
TEMPORARILY ABANDON			RILLING OPNS.	PLUG AND ABANDONMENT
PULL OR ALTER CASING	CHANGE	PLANS CASING TEST	AND CEMENT JOB	г
OTHER			· · · · · · · · · · · · · · · · · · ·	
Perforated 8805	e 8863'. Test to 30 to 8818 2 holes per . Well flowing. Fi	ft. acidized with	1000 gal by We	stera Co.
18. I hereby certify that the in	formation spove is true and comp	lete to the best of my knowled,	ge and belief.	12.28 44
SIGNED	y cours	TITLE		DATE
	_			

NO. OF COPIES RECEIVED DISTRIBUTION SANTA FE

NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABILE BS OFFICE O. C. C. Supersedes Old C-104 and C-110 Effective 1-1-65

FILE		AND	Friective 1-1-02
U.S.G.S.	AUTHORIZATION TO TRA	NSPORT OIL NHO NATORAL	474 '66
LAND OFFICE	<u>-</u>		
TRANSPORTER OIL	-{		
OPERATOR GAS			
PROBATION OFFICE	-		
Operator			
Sunset Int	ernational Petroleum Corp	oration	
Address		_	
	uilding, Suite 308, Midla		
Reason(s) for filing (Check proper box		Other (Please explain)	
New Well Recompletion	Change in Transporter of: Oil X Dry Gar		İ
Change in Ownership	Casinghead Gas Conden	≔ .!	
change in owner-map	out, in the control of the control o		
If change of ownership give name			
and address of previous owner			
DESCRIPTION OF WELL AND	LEASE		
Lease Name	Well No. Pool Nar	ne, Including Formation	Kind of Lease
T. P. State	1 Bagle	ey weit	State, Federal or Fee State
Location	(2	rro	West
Unit Letter <u>I</u> ; 205	60 Feet From The South Lin	e and 550 Feet From	The West
Line of Section 11 , To	waship 118 Range	33E , NMPM,	Lea County
Line of Section 12 , Te	who hip	, HMFM,	Dea county
DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL GA	s	
Name of Authorized Transporter of Ci	l 🗶 or Condensate 🗔	Address (Give address to which app	roved copy of this form is to be sent)
Pan American Petroleum	Corporation (Trucks)	P. O. Box 591, Tulsa	
Name of Authorized Transporter of Co	rsinghead Gas or Dry Gas	Address (Give address to which appr	roved copy of this form is to be sent)
	10		
If well produces oil or liquids,	Unit Sec. Twp. Rge.	1 :	hen
give location of tanks.	121	No	
	ith that from any other lease or pool,	give commingling order number:	
COMPLETION DATA	Oil Well Gas Weli	New Well Workover Deepen	Plug Back 'Same Res'v. Diff. Res'v.
Designate Type of Completi	on – (X)		
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
Pool	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
Destanting		I	Death Control
Perforations			Depth Casing Shoe
	TIIRING CASING AND	CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
TEST DATA AND REQUEST I		fter recovery of total volume of load o	il and must be equal to or exceed top allow-
OIL WELL Date First New Oil Run To Tanks	able for this de	pth or be for full 24 hours) Producing Method (Flow, pump, gas	life atc.)
See the lies on Van 10 fauxa	200 01 1001	Francing Memod (From, pump, gas	1496, 6664 <i>j</i>
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
		1	
Actual Prod. During Test	Oil-Bbls.	Water-Bbis.	Gas-MCF
	1	,	
GAS WELL		``	
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Tooting Math. 2 (-in-)	Tables De		
Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size
OFFICIAL AS ASSESSED			
CERTIFICATE OF COMPLIAN	ICE .	OIL CONSERV	ATION COMMISSION
I haraku anatifu the the enter	regulations of the C. C.	APPROVED	
Commission have been complied	regulations of the Oil Conservation with and that the information given	1	, 19
	e best of my knowledge and belief.	BY	
		TITLE	
	2	TITLE	
Tomas	ham]	compliance with RULE 1104.
BmB 19	nature)		owable for a newly drilled or deepened panied by a tabulation of the deviation
	tion Clerk	tests taken on the well in acc	ordance with RULE 111.
	itle)	All sections of this form m	nust be filled out completely for allow-
Novemb	er 15, 1966	able on new and recompleted v	vells. I, and VI only for changes of owner,
			vor changes of owner,

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

The confidence of the many tension of the contemporal contempo

DISTRIBUTION							Form C- Revised	
SANTA FE			e .			50.	Indicate	Type of Lease
FILE			EXICO OIL CON				State	Fee 🗍
U.S.G.S.		WELL COMPLE	HON OR RECC	MPLETIO	MUKEROKIN Y	ND LOG	tate Oil	& Gas Lease No.
LAND OFFICE			• •	•		j	_	
						, (Q i	1466	Print 9929
OPERATOR								
a, TYPE OF WELL				· · · · · · · · · · · · · · · · · · ·			init Agre	eement Name
Id. I TPE OF WELL	011	<u> </u>				1"	mi ngre	-ément :vame
b. TYPE OF COMPLET	WE	GAS WELL	DRY L	OTHER_	·		Common I	Lease Name
NEW (WOR		PLUG	DIFF.			ļ °· · ·	am or 1	Lease Name
WELL OVER			RESVR.	OTHER			ell No.	tete
. Name of Operator						9. 7	veii No.	
. Address of Operator	nternatio	nel Petroles	m Cornerell	<u> </u>				1
Address of Operator				-		10.	Fieldom	nd Pool, or Wildcat
201 16	11 Bldg.	Suite 308, 1	Addand fexa	8			Pa	eler
. Location of Well			_ •					
					taka a			
INIT LETTER	LOCATED	950 PEET FE	ROM THE SOUTH	LINE AND	550	FEET FROM		
				IIIII	TTIKIII	12.	County	
THE NOS LINE OF S	sc. 11	TWP. 11 8 RG	E. 33 8 NMPM	IIIIII	MXIII		Lo	
15. Date Spudded	16. Date T.D.	Reached 17, Date			Elevations (DF ,	RKB, RT, GR, e	tc.) 19.	Elev. Cashinghead
9-16-66	10-20	-66	11-0-66		4248.7 GE	·	, [4242
20. Total Depth	21. Pl	ug Back T.D.	22. If Multipl	e Compl., Ho	w 23. Intervo	ls , Rotary To	ols	Cable Tools
10325		10124	Many		Drilled	By Rote	-	
24. Producing Interval(s)	, of this compl	etion - Top, Botton	n, Name					25, Was Directional Survey
							-: }	Made
D.m. 1000/00/	101161	4 10120-20	10199-49	10166.00	0 0-1			
Perf. 10085095	her Loge Bun	10' TATTO-30'	101)(-4),	70736-36	* % P&T#8	per It.	1 27 W	
Gamma-Collar,	100000000						1 .	Vas Well Cored
	Vende eta	Volocity, F	erro Log. Co	ard Lon-	<u></u>	·····	1 .	Na Well Cored
28.		CAS	ING RECORD (Rep	ort all string	s set in well)		1 .	No.
CASING SIZE	WEIGHT LE	CAS	SING RECORD (Rep	ort all string	s set in well)	NTING RECORD		
28.	WEIGHT LE	CAS 3./FT. DEPTH 363	SING RECORD (Rep	ort all string	s set in well) CEMEI 375 Seel	cs Circula	led.	No.
CASING SIZE	WEIGHT LE 46 26 ▲ 32	CAS 3./FT. DEPTH 363 3770	SING RECORD (Rep	ort all string LE SIZE	s set in well) CEMEI 375 Seci	to Circulate Top 25	led.	No.
CASING SIZE	WEIGHT LE	CAS 3./FT. DEPTH 363	SING RECORD (Rep	ort all string LE SIZE	s set in well) CEMEI 375 Seel	to Circulate Top 25	Red.	No.
CASING SIZE	WEIGHT LE 46 26 ▲ 32	363 3770 10325	SING RECORD (Rep	ort all string LE SIZE	s set in well) CEMEI 375 Seci	te Circula te Tep 25 Top 78 Top 38	Red	AMOUNT PULLED
CASING SIZE 13 3/8 8 5/8 5 1	WEIGHT LE 46 26 ▲ 32	363 3770 10325	SING RECORD (Rep	ort all string LE SIZE	S set in well) CEMEI 375 Sect 300 Sect	te Circula te Tep 25 Top 78 Top 38	ked 00	AMOUNT PULLED
CASING SIZE 13 3/8 8 5/8 5 1	WEIGHT LE 46 26 ▲ 32	363 3770 10325	SING RECORD (Rep	ort all string LE SIZE	375 Seel 375 Seel 300 Seel 1060 Seeks 300 Seeks	te Circula te Tep 25 Top 78 Top 38	NG REC	AMOUNT PULLED
CASING SIZE 13 3/8 8 5/8 5 1	WEIGHT LE	363 3770 10325 D V	SING RECORD (Rep	ort all string LE SIZE /8 /12	375 Seel 375 Seel 300 Seel 1060 Seeks 300 Seeks	Circula Top 25 Top 78 TUBI DEPTH	NG REC	AMOUNT PULLED
CASING SIZE 13 3/8 8 5/8 5 1	WEIGHT LE	363 3770 10325 D V	SING RECORD (Rep	ort all string LE SIZE /8 /12	375 Seek 375 Seek 300 Seek 1060 Seeks 300 Seeks 30.	ts Circula ts 299 25 109 78 109 38 TUBI	NG REC	AMOUNT PULLED ORD PACKER SET
CASING SIZE 13 3/8 8 5/8 5 29. SIZE	WEIGHT LE 46 26 ▲ 32 17	CAS 3./FT. DEPTH 363 3770 10325 D V S LINER RECORD BOTTOM	SING RECORD (Rep	ort all string LE SIZE /8 /12	375 Seek 375 Seek 300 Seek 1060 Seeks 300 Seeks 300 Seeks 23,8	Circula Top 25 Top 78 TUBI DEPTH	OO OO OO OO OO OO OO OO OO OO OO OO OO	AMOUNT PULLED ORD PACKER SET 10058
28. CASING SIZE 13 3/8 8 5/8 5 ½ 29. SIZE	WEIGHT LE 46 26 ▲ 32 17	CAS 3./FT. DEPTH 363 3770 10325 D V S LINER RECORD BOTTOM	SING RECORD (Rep	ort all string LE SIZE /8 /12 SCREEN	375 Seel 375 Seel 300 Seek 300 Seeks 300 Seeks 2 3/8 ACID, SHOT, F	Top 25 Top 26 Top 36 TUBI DEPTH 10058	DO OO OO OO OO OO OO OO OO OO OO OO OO O	AMOUNT PULLED ORD PACKER SET 19058
28. CASING SIZE 13 3/8 8 5/8 5 ½ 29. SIZE	WEIGHT LE 46 26 ▲ 32 17	CAS 3./FT. DEPTH 363 3770 10325 D V S LINER RECORD BOTTOM	SING RECORD (Rep	SCREEN 32. DEPTH	375 Seel 375 Seel 375 Seel 300 Seeks 30. SIZE 2 3/8	TOP 78 TOP 38 TUBI DEPTH 10058 RACTURE, CEM	NG REC	AMOUNT PULLED ORD PACKER SET 10058 DUEEZE, ETC. ND MATERIAL USED
CASING SIZE 13 3/8 8 5/8 5 ½ 29. SIZE	WEIGHT LE 46 26 ▲ 32 17	CAS 3./FT. DEPTH 363 3770 10325 D V S LINER RECORD BOTTOM	SING RECORD (Rep	SCREEN 32. DEPTH	375 Seel 375 Seel 375 Seel 300 Seeks 30. SIZE 2 3/8 ACID, SHOT, F	TOP 78 TOP 38 TUBI DEPTH 10058 RACTURE, CEM AMOUNT 500 CAL	DO DO NG REC	AMOUNT PULLED ORD PACKER SET 19058 DUEEZE, ETC. ND MATERIAL USED Actid
CASING SIZE 13 3/8 8 5/8 5 ½ 29. SIZE	WEIGHT LE 46 26 ▲ 32 17	CAS 3./FT. DEPTH 363 3770 10325 D V S LINER RECORD BOTTOM	SING RECORD (Rep	SCREEN 32. DEPTH	375 Seel 375 Seel 375 Seel 300 Seeks 30. SIZE 2 3/8	TOP 78 TOP 38 TUBI DEPTH 10058 RACTURE, CEM AMOUNT 500 CAL	DO DO NG REC	AMOUNT PULLED ORD PACKER SET 10058 DUEEZE, ETC. ND MATERIAL USED
28. CASING SIZE 13 3/8 8 5/8 5 ½ 29. SIZE	WEIGHT LE 46 26 ▲ 32 17	CAS 3./FT. DEPTH 363 3770 10325 D V S LINER RECORD BOTTOM	SING RECORD (Rep	SCREEN 32. DEPTH	375 Seel 375 Seel 375 Seel 300 Seeks 30. SIZE 2 3/8 ACID, SHOT, F	TOP 78 TOP 38 TUBI DEPTH 10058 RACTURE, CEM AMOUNT 500 CAL	DO DO NG REC	AMOUNT PULLED ORD PACKER SET 19058 DUEEZE, ETC. ND MATERIAL USED Actid
CASING SIZE 13 3/8 8 5/8 5 29. SIZE 31. Perforation Record (WEIGHT LE 46 26 ▲ 32 17	CAS 3./FT. DEPTH 363 3770 10325 D V S LINER RECORD BOTTOM	SING RECORD (Rep H SET HOL 17 17 11 7 7 SACKS CEMENT	SCREEN 32. DEPTH 1008	375 Seel 375 Seel 375 Seel 300 Seeks 30. SIZE 2 3/8 ACID, SHOT, F	TOP 78 TOP 38 TUBI DEPTH 10058 RACTURE, CEM AMOUNT 500 CAL	DO DO NG REC	AMOUNT PULLED ORD PACKER SET 19058 DUEEZE, ETC. ND MATERIAL USED Actid
CASING SIZE 13 3/8 8 5/8 5 ½ 29. SIZE 31. Perforation Record (WEIGHT LE	CAS 3./FT. DEPTH 363 3770 10325 D V S LINER RECORD BOTTOM	SING RECORD (Rep H SET HOL 17 11 7 7 SACKS CEMENT PROD	SCREEN 32. DEPTH 1008	375 Seel 375 Seel 375 Seel 300 Seeks 300 Seeks 30. SIZE 2 3/8 ACID, SHOT, F INTERVAL -101 58 -101 58	Circula Tap 25 Top 78 TOP 38 TUBI DEPTH 10058 RACTURE, CEM AMOUNT 500 Cal. 2000 Cal	NG REC	AMOUNT PULLED ORD PACKER SET 10058 DUEEZE, ETC. ND MATERIAL USED AGIG
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INSTRUCTIONS

This form is to be filed with the appropriate District Office of the Commission not later than 20 days after the completion of any newly-drilled or deepened well. It shall be accompanied by one copy of all electrical and radio-activity logs run on the well and a summary of all special tests conducted, including drill stem tests. All depths reported shall be measured depths. In the case of directionally drilled wells, true vertical depths shall also be reported. For multiple completions, Items 30 through 34 shall be reported for each zone. The form is to be filed in quintuplicate except on state land, where six copies are required. See Rule 1105.

INDICATE FORMATION TOPS IN CONFORMANCE WITH GEOGRAPHICAL SECTION OF STATE

Southeastern New Mexico

Northwestern New Mexico

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T.	Anhy _1/54	T.	Canyon	Τ.	Ojo Alamo	T.	Penn. "B"
T.	Salt	T.	Strawn10084	T.	Kirtland-Fruitland	T.	Penn. "C"
B.	Salt	T.	Atoka	T.	Pictured Cliffs	T.	Penn. "D"
T.	Yates 2483	T.	Miss	T.	Cliff House	T.	Leadville
T.	7 Rivers	Ţ,	Devonian	T.	Menefee	T.	Madison
T.	Queen 3298	T.	Silurian	T.	Point Lookout	T.	Elbert
T.	Grayburg	T.	Montoya	T.	Mancos	T.	McCracken
T.	San Andres 3734	T.	Simpson	T.	Gallup	T.	Ignacio Qtzte
T.	Glorieta 5158	т.	McKee	Bas	se Greenhorn	T.	Granite
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FORMATION RECORD (Attach additional sheets if necessary)

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NEW MEXICO OIL CONSERVATION COMMISSION Supersedes Old C-104 and C-110 ' REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS tional Petroleum Corporation e 308, Kidland, Texas Other (Please explain) Oil Fire Cas and address of previous owner ____ 0 1/1 Weil No. | Pool Name, Inculation Formation of Person & William Please of a mine . I. DESCRIPTION OF WELL AND LEASE T P State State, Federal or Fee Location Feet From The South Line of Section 11 , Township 11 S Range 33 5 County 1. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Address (Give address to which approved copy of this form is to be sent) 201 Wall Bldg. Suite 308. Midlanda Texas

Address (Give address to which approved copy of this form is to be sent) Permian Oil Transport Name of Authorized Transporter of Casinghead Gas or Dry Gas Warren Petroleum Corporation 201 Wall Ridg. Suite 303, Midland, Terms
Is gas actually connected? When If well produces oil or liquids, 11 118 33% Approval received If this production is commingled with that from any other lease or pool, give commingling order number: 7. COMPLETION DATA Oil Well Gas Well New Well P'ug Back | Same Resty Diff Resty Designate Type of Completion - (X) Date Compl. Ready to Prod. Date Spudded otal Depth 9-16-66 11-9-66 10325 10175 Name of Producing Formation Top Oil/Gas Pay Tubing Depth Penn 10085 10058 Begley 10085-95, 10114-16, 10120-30, 10137-43, 10156-58, 2 Holes Per Ft. 10325 TUBING, CASING, AND CEMENTING RECORD CASING & TUBING SIZE HOLE SIZE SACKS CEMENT 13 3/8 48# 8 5/8 24 & 32 375 Sacks Ciculated 11 24 & 32 3770 300 Sacks- Top 2500 7 7/8 17# 10325 1060 Secks Top 7800 DV Tool 4712 300 Sacks Top 3000 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) OIL WELL Producing Method (Flow, pump, gas lift, etc.) Date First New Oil Run To Tanks Date of Test 11-10-66 Flow 11-13-66 Choke Size Length of Test ubing Pressure Cusing Pressure 24 Hrs 450 PSI 20/64 Packer Actual Prod. During Test 432 216 **GAS WELL** Actual Prod. Test-MCF/D Length of Test Bbls. Condensate/MMCF Gravity of Condensate Testing Method (pitot, back pr.) Tubing Pressure Casing Pressure Choke Size CERTIFICATE OF COMPLIANCE OIL CONSERVATION COMMISSION APPROVED 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. 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 Sections I, II, III, and VI only 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 multiply

List Of Divission Test Sunset International Petroleum Corporation T P State # 1 Les County, New Mexico

〒001-1、8401-1、13301-3/4、18301-1、21001-2、22801-1 3/4、23201-1 3/4、26901-1 3/4。 3025-2 1、3300-21、3690-1、37601-1、42101-1 3/4、45651-1 3/4、50351-1 3/4、54601-1 3/4 57901-1 3/4、61601-1、66401-3/4、70901-3/4、74801-1、78101-1、80001-11、81601-3/4、84001-1、87101-3/4、89601-1、92901-1、94951-1、97501-1、162001-3/4、103201-1。

I hereby swear that slope tests listed above are those taken at depth given during the drilling of the Sunset International Petroleum Corporation T P State # 1, 2050 From South Line, 550 From West Line, S 11, TWP 118, RGE 33E. Lea County, New Mexico.

BY	Denver	Grand
	Signature	
Title	District Production	on Superindent
Sunset	International Petr	releum Corporation
	(Company Nas	Be)
261 19	il Mdg. Suite 308	Midland, Texas

The State Of Texas

County Of Texas Hockley

Before me, the undersigned authority, on this day personally appeared

Denver Gravitt known to me to be the person whose name is subscribed to the
above instrument, who being by me duly sworn on oath states that he is duly authorized
to make the above report and that he has knowledge of the facts stated therein
and that said report is true and correct, and that tests mentioned above are correct.

Subscribed And Sworn to Before Me. This the 14 Day Of Hovember, 1966

E. Nathlun Swinst

Netury Public In And For Kockley County

E. Kathleen Burnett Notary Public In And For Hockley County, Texas

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NEW MEXICO OIL CONSERVATION ACCURATION ACCUR	DISTRIBUTION SANTA FE	_			
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OTHER OTHER TO DESCRIBE PROPOSED OF Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103. Drilled 7 7/8s TD 16325t. Ran 51s 17f Casing Set @ 10325t. D V Tool Set @ 4712t. Cemanted with 530 sacks Incor Cl.C- 530 sacks 1 to 1 Dimix from 10325t to estimated top 7800t. Above D V Tool Cemented with 300 sacks incor Cl.C with 1st 101. Flux down 2FR 10-29-66. WOC to SMM 11-4-66. Drilled out D V Tool Circulated on bottom @ 10286t or float collar. Perforated 2 holes per ft. 10276tto 10284t. Acidized with 500 gal. 2500PSI. Swabbing 8 gal. eil, 2 bbl. water per hr. 18. I hereby criffy that the information share is true and complete to the beat of my knowledge and belief. District Supt. 11-6-66	PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING	
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1493.16. Ban 72 . Cemented with 209	Jts. 24ê J55 Casi Saske and 100 Sad	1994.751. Float Shoe &	# ## 37 Jts. 32 # HAO Casing Float Collar Set # 3779: bloride. Top commt 2530:. on 9-27-66.
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18. I hereby centify that the information	on above is true and complete	to the best of my knowledge and belief.	
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17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1703. Drilled 17½ hole 366° TD. Ban 363° 13 3/8" 46% Casing. Comented Mittl 375 calsum chirelde. By Hallibuston. Circulated good coment. W O C 12:30 FM to 12:37 AM 9-16 to 9-17-66. Tested pipe 4:38 to 5:38 AM 9-17-66 with 1000 PSI OK. Start drilling from under 13 3/8" casing with 7 7/8" hole & 6 AM 9-17-66.	TEMPORARILY ABANDON	COMMENCE DRILLING OPNS.	PLUG AND ABANDONMENT
17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE : 103. Drilled 17½ hole 366 TD. Bam 363: 13 3/8 46# Casing. Comented with 375 anches with 25 calsum chiroide. By Mallibuston. Circulated good coment. W 0 C 12:39 PM to 12:39 AM 9-16 to 9-17-66. Tested pipe 4:30 to 5:30 AM 9-17-66 with 1000 PSI OK. Start drilling from under 13 3/8" casing with 7 7/8" hole & 6 AM 9-17-66.	F1		FLUG AND ABANDONMENT
Drilled 172" hole 366. TD. Han 363: 13 3/8" 46# Casing. Comented Water 375 sacks with 2% calsum chiroide. By Hallibuston. Circulated good coment. W 0 C 12:30 PM to 12:30 AM 9-16 to 9-17-66. Tested pipe 4:30 to 5:30 AM 9-17-66 with 1000 PSI OK. Start drilling from under 13 3/8" casing with 7 7/8" hole & 6 AM 9-17-66.	F-1	CHANGE PLANS CASING TEST AND CEMENT JOB	PLUG AND ABANDONMENT
Drilled 172" hole 366. TD. Han 363: 13 3/8" 46# Casing. Comented Water 375 sacks with 2% calsum chiroide. By Hallibuston. Circulated good coment. W 0 C 12:30 PM to 12:30 AM 9-16 to 9-17-66. Tested pipe 4:30 to 5:30 AM 9-17-66 with 1000 PSI OK. Start drilling from under 13 3/8" casing with 7 7/8" hole & 6 AM 9-17-66.	PULL OR ALTER CASING	CHANGE PLANS CASING TEST AND CEMENT JOB	PLUG AND ABANDONMENT
Description of the second of t	other 17. Describe Proposed or Completed work) SEE RULE 1103.	Operations (Clearly state all pertinent details, and give pertinent dates, included	ling estimated date of starting any proposed
Description of the second of t	PULL OR ALTER CASING OTHER 17. Describe Proposed or Completed work) SEE RULE 1103. Drilled 172 hole 36 calsum chiroide. By to 9-17-66. Tested 1	Operations (Clearly state all pertinent details, and give pertinent dates, included TD. Han 363: 13 3/8" 48% Casing. Comented Wallibuston. Circulated good coment. V C 12: 12: 12: 4:38 to 5:38 AN 9-17-66 with 1000 PSI OR.	ling estimated date of starting any proposed 111 375 anaka with 25 38 PM to 12130 AM 9.16
DATE 7-88-00	other 17. Describe Proposed or Completed work) SEE RULE 1103. Drilled 172 hole 36 calsum chiroide. By	Operations (Clearly state all pertinent details, and give pertinent dates, included TD. Han 363: 13 3/8" 48% Casing. Comented Wallibuston. Circulated good coment. V C 12: 12: 12: 4:38 to 5:38 AN 9-17-66 with 1000 PSI OR.	ling estimated date of starting any proposed the 375 anaka with 25 38 PM to 12130 AM 6.16
	other 17. Describe Proposed or Completed work) SEE RULE 1103. Drilled 172 hole 36 calsum chiroide. By to 9-17-66. Tested 1 under 13 3/8 casing	Operations (Clearly state all pertinent details, and give pertinent dates, included to the pertinent dates, included the perti	th 375 make with 25 38 PM to 12137 AM 9-16 Start drilling from

DISTRIBUTION		NEW M	EXICO OIL CONS	ERVATION COMMISSI	ON	Form C-101	•
SANTA FE						Revised 1-1-6	
FILE			Δ^{-1}	3 3 36			Type of Lease
U,S.G.S.			VI	3 06		STATE	
LAND OFFICE						.5. State Oil	& Gas Lease No.
OPERATOR							
	ON FOR PE	RMIT TO D	RILL, DEEPEN	, OR PLUG BACK			
la. Type of Work						7. Unit Agre	ement Name
DRILL X	7		DEEPEN	PLU	G BACK	<u>-</u>	
b. Type of Well						8, Farm or L	
OIL KELL CAS WELL	ОТН	ER		SINGLE L	ZONE Z		. State
2. Name of Operator						9. Well No.	•
	t Interi	lationa	l Petroleu	m Corporation	a		1
3, Address of Operator						I _	d Pool, or Wildcat
	all Bldc	. Suit	e 308, M1	dland, Texas		NA Ba	gley
4. Location of Well unit LET	TER L	LOCA	TED 550	FEET FROM THE	IL LINE		
		.Th		44		MMM	
AND FEET FRO	Sout	LINE	or sec. 11	TWP. 115 RGE.	33E HMPM	VIIIII	mmmiiiii
						12. County	
		1111111			444444	Lea	ШИИ
		m		iiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii		7117111	
				19. Proposed Depth	19A. Formatio		20. Rotary or C.T.
				10,300	Pennsyl	vania	Rotary
21. Elevations (Show whether L	r, Ki, etc.)	Blan!	Status Plug. Bond	21B. Drilling Contracto	"Unknown	22. Approx	. Date Work will start
		PTGI	NO C	Bids Request	Ced	pepten	ber 9, 1966
23.		PR	OPOSED CASING	ND CEMENT PROGRAM	ı	:	
							+
2175 05 1101 5	T SIZE OF	CACINIC	WEIGHT DED TO	OT CETTING DED-			FOT TO 5
SIZE OF HOLE	SIZE OF		WEIGHT PER FO				EST. TOP
17-1/2	13-	3/8	48	330	3	00	Circ.
17-1/2 11-1/4	13-	3/8 5/8	48 28 & 32	330 4250	3	00	† ·
17-1/2	13-	3/8	48	330	3	00	Circ.
17-1/2 11-1/4	13- 8- 5-	3/8 -5/8 -1/2	48 28 & 32 17#	330 4250 10,300	SUBSECTION OF THE SECTION OF THE SEC	00	Circ. 3196
17-1/2 11-1/4	13- 8- 5-	3/8 -5/8 -1/2	48 28 & 32 17#	330 4250 10,300	SUBSECTION OF THE SECTION OF THE SEC	00	Circ. 3196
17-1/2 11-1/4 7-7/8	* Will	3/8 -5/8 -1/2 be fur:	48 28 & 32 17#	330 4250 10,300 n available	Solution of the second of the	00	Circ. 3196 7411
17-1/2 11-1/4 7-7/8	Will PROPOSED PRINTER PROGRAM.	3/8 -5/8 -1/2 be fur:	48 28 & 32 17# nished when	330 4250 10,300 n available DRILL! EXPIRES 12	Solution of the second of the	00	Circ. 3196 7411
17-1/2 11-1/4	Will PROPOSED PRINTER PROGRAM.	3/8 -5/8 -1/2 be fur:	48 28 & 32 17# nished when	330 4250 10,300 n available DRILL! EXPIRES 12	Solution of the second of the	OO OO OO OO OO OO OO OO OO OO OO OO OO	Circ. 3196 7411
17-1/2 11-1/4 7-7/8	Will PROPOSED PRINTER PROGRAM.	3/8 -5/8 -1/2 be fur:	48 28 & 32 17# nished when	330 4250 10,300 n available DRILL! EXPIRES 12	Solution of the second of the	OO OO OO OO OO OO OO OO OO OO OO OO OO	Circ. 3196 7411

N. 1 1CO OIL CONSERVATION COMMISSION WELL LOCATION AND ACREAGE DEDICATION PLAT All distances must be from the puter boundaries of the Section.

		All distances must be	 	es of the Section.		
		l Petroleum	T. P.			Well No.
Unit Letter	Section 11	Township 11S	Range 33E	County	ea	
Actual Footage Loc 550 !		West	2050		South	
Ground Level Elev:	Producing For	mation	Pool	feet from the	Dedi	cated Acreage:
Est.		lvanian	North B			Acres
1. Outline th	e acreage dedica	ted to the subject w	ell by colored pen-	cil of hachure	marks on the pl	at below.
	an one lease is	dedicated to the we	l, outline each and	l identify the	ownership there	of (both as to working
3. If more tha	an one lease of d	ifferent ownership is	dedicated to the w	ell, have the i	interests of all	owners been consoli-
dated by c	communitization, u	mitization, force-pool	ing. etc?			
Yes	☐ No If an	nswer is "yes," type	of consolidation		· · · · · · · · · · · · · · · · · · ·	
		owners and tract des	criptions which hav	ve actually be	en consolidated.	(Use reverse side of
	f necessary.)	ed to the well until a	l interests have be	en canaalidat	od (by complete	tization, unitization,
						roved by the Commis-
sion.					1	· · · · · · · · · · · · · · · · · · ·
	1				CE	RTIFICATION
	ĺ		ì		I hereby certify	that the information con-
·	l I		i		1	s true and complete to the wledge and belief.
	!		i ,			
					Name	
	ŀ	,		<i>A</i> 1	Position	rozen
	j I	1 \ /			Engi	neer
		(x,y)			1	tern'l Pet. Cro
	1				Septembe	r 2, 1966
			-			•
	\ \		U I		I hereby certi	fy that the well location
_550 			03456		1	plat was platted from field
				·	1	I surveys made by me or vision, and that the same
2050	1 /		CA CAN S		is true and c	orrect to the best of my belief.
	+		18 V2 8	화		
	i I	1385	THE STATE OF		Date Surveyed	
	1		E 27/2012 19/1/19/	'	9-6	-66
			665180881818		Registered Profe	
	1.	·			John	ow but
0 330 660	90 1820 1680 198	0 200		1111	Certificate No.	671
	19EV 199U 196	00. 281C 40 200	0 1500 1000 .	80Q.	<u> </u>	U 4 b

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

NEW XICO OIL CONSERVATION COMMISSION WELL LOCATION AND ACREAGE DEDICATION PLAT

All distances must be from the outer boundaries of the Section. Well No. Operator Lease ; T. P. State Sunret International 1 C Unit Letter Section Township Romge County 33E 11 **11**S Lea Actual Footage Location of Well: 550 West 2050 feet from the line and feet from the line Ground Level Elev: Producing Formation Pool Dedicated Acreage: Est. Pennsylvanian North Bagley 80 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? If answer is "yes," type of consolidation _ Yes ☐ No 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 Commis-CERTIFICATION I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief. Company Sunset Intern'l Pet. Crop. September 2, 1966 I hereby certify that the well location .550₄₀ 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 2050 knowledge and belief. Date Surveye Registered Professional Engineer and/or Land Surveyor Certificate No.

2000

1500

1000

500

1320-1650

NEW MEXICO OIL CONSERVATION COMMISSION WELL LOCATION AND ACREAGE DEDICATION PLAT

Form C-17? Supersedes C-128 Effective 1-1-65

All distances must be from the outer boundaries of the Section. Well No. Operator Crown Central Petroleum Corporation T. P. State Unit Letter Section County 118 33E Lea Actual Footage Location of Well: 550 2050 West feet from the line and line Ground Level Elev. Producing Formation Dedicated Acreage: 4243 Pennsylvanian North Bagley Permo Penn 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. CERTIFICATION I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief. к. Kirby <u>Petroleum Engineer</u> Crown Central Petroleum Corb. November 13, 1984 I hereby certify that the well location ەكك 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. 2050 Date Surveyed Registered Professional Engineer and/or Land Surveyor Certificate No. 660 1320 1650 1980 2310 2000 1500

WILL LOCATION AND ACREAGE DEDICATION PLAT

HOBBS OFFICE S.C. C.
All distances must be from the outer boundaries of the Section

		All matances made de tro	ar die outer boundersea o	tild because.		
Operator	an Galacia and an Araga (Madella). 	ni Potroleum	oc II ce gall se	33' 44		Well No.
Unit Letter	Section	Township	Ronge	County		
3.	22	11S	333	Ica		
Actual Footage Loc	cation of Well:	· 			1	
<u> </u>	feet from the	West line and	2050 _{fe}	et from the	<u> </u>	line
Ground Level Elev:			Pool Tarken Dag	7~~*	Dedico	ated Acreage; 80
Dot. 4.	AAN hours	/ivanion	Borth Bag	70Ã		Acres
2. If more the interest an	nan one lease is nd royalty).	dedicated to the well,	outline each and id	entify the owners	nip thereof	(both as to working
dated by one Yes If answer this form in No alloware.	No If a is "no;" list the if necessary.)	lifferent ownership is dunitization, force-pooling inswer is "yes," type of owners and tract descrated to the well until all or until a non-standard	g. etc? consolidation iptions which have a interests have been	actually been cons	communit	Use reverse side of ization, unitization,
	ł		!		CER	TIFICATION
	1		 	tain	ed herein is	that the information con- true and complete to the ledge and belief.
	 			Positi Compo	Decin Try Tot Int	Frazin cern'l Pet. Ci
550_o. ↑ 2050	The state of the s			short note und is	wn on this pl es of actual er my superv	that the well location at was plotted from field surveys made by me or ision, and that the same rect to the best of my elief.
				Regis	Surveyed tered Profess r Land Surve	sional Engineer yor
0 330 660	190 1320 1650 19	80, 2310 2640 2000	1500 1000	Certifi	icate No.	

District 1

1625 N. French Dr., Hobbs, NM 88240

District II

1301 W. Grand Avenue, Artesia, NM 88210

District III

1000 Rio Brazos Rd., Aztec, NM 87410

District IV

State of New Mexico
Energy, Minerals & Natural Resources Department
OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

Form C-102

Revised June 10, 2003

Submit to Appropriate District Office

State Lease - 4 Copies

Fee Lease - 3 Copies

1220 S. St. Francis	Dr., Santa Fe	e, NM 87505						!		ENDED RI	EPORT
			WELL LO	OCATIO	ON AND AC	REAGE DEDI	CATION PL	AT			
30-025-218	API Number	r	382	' Pool Code 20		agley;PermoPenn	' Pool Na North	me			
Property (Code	T. P. 11	State		' Property N	Vame			001	Well Number	
' OGRID	No.	Chesane	ake Operat	ing Inc	Operator !	Varne		· i	4243	* Elevation	
14/1/2		Спозиро	and Operat	ing, mo.	¹⁰ Surface	Location			1		
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	Eas	st/West line		County
L	11	118	33E		2050	South	550	West		Lea	
			¹¹ B	ottom H	ole Location	If Different Fr	om Surface				
UL or lot no.	Section	Township	Range			North/South line	Feet from the	Ea	st/West line		County
Dedicated Acres	Joint o	r Infill "	Consolidation	Code " O	rder No.	1	L	<u> </u>	***		

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 **OPERATOR CERTIFICATION** I hereby certify that the information contained herein true and complete to the best of my knowledge and Brenda Coffman Printed Name Regulatory Analyst bcoffman@chkenergy.com Title and E-mail Address 03/14/2005 Date 18 SURVEYOR CERTIFICATION I hereby certify that the well location shown on this plat 550 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. Date of Survey Signature and Seal of Professional Surveyor: Certificate Number