

District I  
PO Box 1980, Hobbs, NM 88241-1980  
District II  
PO Drawer DD, Artesia, NM 88211-0719  
District III  
1000 Rio Brans Rd., Aztec, NM 87410  
District IV  
PO Box 2088, Santa Fe, NM 87504-2088

State of New Mexico  
Energy, Minerals & Natural Resources Department

Form C-104  
10-1004

OIL CONSERVATION DIVISION  
PO Box 2088  
Santa Fe, NM 87504-2088

OCD Exhibit: 1-A  
Case No.: 13163  
Date: 11-7-03

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

Operator name and Address SABA ENERGY OF TEXAS, INCORPORATED 1603 S.E. 19th STREET, SUITE 202 EDMOND, OK 73013		OGRID Number 34703
		Reason for Filing Code OCT 01 1995
API Number 30-025 28480	Pool Name SAN SIMON STRAWN	Pool Code 96342
Property Code 007995	Property Name SAN SIMON 5 STATE	Well Number 2

II. Surface Location

UL or lot no. G	Section 5	Township 22S	Range 35E	Lot Idn	Feet from the 1980	North/South Line North	Feet from the 1980	East/West line East	County Lea
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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
Lee Code S	Producing Method Code F	Gas Connection Date 7-8-86	C-129 Permit Number	C-129 Effective Date	C-129 Expiration Date				

III. Oil and Gas Transporters

Transporter OGRID	Transporter Name and Address	POD	O/G	POD ULSTR Location and Description
22507	Texaco Trading & Transportation, Inc.	1932910	O	
9171	GPM Gas Corp	1932930	G	

IV. Produced Water

POD 1932950	POD ULSTR Location and Description
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V. Well Completion Data

Spud Date	Ready Date	TD	PBTD	Perforations
Hole Size	Casing & Tubing Size	Depth Set	Sacks Cement	

VI. Well Test Data

Date New Oil	Gas Delivery Date	Test Date	Test Length	Tbg. Pressure	Csg. Pressure
Choke Size	Oil	Water	Gas	AOF	Test Method

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: <u>Bradley T. Katzung</u> Printed name: <u>BRADLEY T. KATZUNG</u> Title: <u>PRESIDENT</u> Date: <u>9-29-95</u> Phone: <u>405-340-3600</u>		OIL CONSERVATION DIVISION Approved by: <u>George Mullen</u> Title: <u>Reg. Affairs Specialist</u> Approval Date: <u>DEC 08 1995</u>
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If this is a change of operator fill in the OGRID number and name of the previous operator OGRID # <u>015025</u> <u>George Mullen</u> <u>George Mullen</u> <u>Reg. Affairs Specialist</u> <u>7-14-95</u> Previous Operator Signature Printed Name Title Date Mitchell Energy Corporation, P.O. Box 4000, The Woodlands, Texas 77387-4000			
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**New Mexico Oil Conservation Division  
C-104 Instructions**

**IF THIS IS AN AMENDED REPORT, CHECK THE BOX LABELED "AMENDED REPORT" AT THE TOP OF THIS DOCUMENT**

**Report all gas volumes at 15.025 PSIA at 60°.  
Report all oil volumes to the nearest whole barrel.**

**A request for allowable for a newly drilled or deepened well must be accompanied by a tabulation of the deviation tests conducted in accordance with Rule 111.**

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

**Fill out only sections I, II, III, IV, and the operator certifications for changes of operator, property name, well number, transporter, or other such changes.**

**A separate C-104 must be filed for each pool in a multiple completion.**

**Improperly filled out or incomplete forms may be returned to operators unapproved.**

1. Operator's name and address
2. Operator's OGRID number. If you do not have one it will be assigned and filled in by the District office.
3. Reason for filing code from the following table:  

NW	New Well
RC	Recompletion
CH	Change of Operator
AO	Add oil/condensate transporter
CO	Change oil/condensate transporter
AG	Add gas transporter
CG	Change gas transporter
RT	Request for test allowable (include volume requested)

If for any other reason write that reason in this box.
4. The API number of this well
5. The name of the pool for this completion
6. The pool code for this pool
7. The property code for this completion
8. The property name (well name) for this completion
9. The well number for this completion
10. The surface location of this completion **NOTE: If the United States government survey designates a Lot Number for this location use that number in the 'UL or lot no.' box. Otherwise use the OCD unit letter.**
11. The bottom hole location of this completion
12. Lease code from the following table:  

F	Federal
S	State
P	Fee
J	Jicarilla
N	Navajo
U	Ute Mountain Ute
I	Other Indian Tribe
13. The producing method code from the following table:  

F	Flowing
P	Pumping or other artificial lift
14. MO/DA/YR that this completion was first connected to a gas transporter
15. The permit number from the District approved C-129 for this completion
16. MO/DA/YR of the C-129 approval for this completion
17. MO/DA/YR of the expiration of C-129 approval for this completion
18. The gas or oil transporter's OGRID number
19. Name and address of the transporter of the product
20. The number assigned to the POD from which this product will be transported by this transporter. If this is a new well or recompletion and this POD has no number the district office will assign a number and write it here.
21. Product code from the following table:  

O	Oil
G	Gas

22. The ULSTR location of this POD if it is different from the well completion location and a short description of the POD (Example: "Battery A", "Jones CPD", etc.)
23. The POD number of the storage from which water is moved from this property. If this is a new well or recompletion and this POD has no number the district office will assign a number and write it here.
24. The ULSTR location of this POD if it is different from the well completion location and a short description of the POD (Example: "Battery A Water Tank", "Jones CPD Water Tank", etc.)
25. MO/DA/YR drilling commenced
26. MO/DA/YR this completion was ready to produce
27. Total vertical depth of the well
28. Plugback vertical depth
29. Top and bottom perforation in this completion or casing shoe and TD if openhole
30. Inside diameter of the well bore
31. Outside diameter of the casing and tubing
32. Depth of casing and tubing. If a casing liner show top and bottom.
33. Number of sacks of cement used per casing string

**The following test data is for an oil well it must be from a test conducted only after the total volume of load oil is recovered.**

34. MO/DA/YR that new oil was first produced
35. MO/DA/YR that gas was first produced into a pipeline
36. MO/DA/YR that the following test was completed
37. Length in hours of the test
38. Flowing tubing pressure - oil wells  
Shut-in tubing pressure - gas wells
39. Flowing casing pressure - oil wells  
Shut-in casing pressure - gas wells
40. Diameter of the choke used in the test
41. Barrels of oil produced during the test
42. Barrels of water produced during the test
43. MCF of gas produced during the test
44. Gas well calculated absolute open flow in MCF/D
45. The method used to test the well:  

F	Flowing
P	Pumping
S	Swabbing

If other method please write it in.
46. The signature, printed name, and title of the person authorized to make this report, the date this report was signed, and the telephone number to call for questions about this report
47. The previous operator's name, the signature, printed name, and title of the previous operator's representative authorized to verify that the previous operator no longer operates this completion, and the date this report was signed by that person

200 80 110

Submit 3 Copies To Appropriate District  
Office  
District I  
1625 N. French Dr., Hobbs, NM 88240  
District II  
1301 W. Grand Ave., Artesia, NM 88210  
District III  
1000 Rio Brazos Rd., 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-103  
Revised March 25, 1999

OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

WELL API NO. 30-025-28480
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. 018031
7. Lease Name or Unit Agreement Name:  San Simon 5 State
8. Well No. #2
8. Pool name or Wildcat San Simon-Strawn
10. Elevation (Show whether DR, RKB, RT, GR, etc.) 3641 RKB

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" (FORM C-101) FOR SUCH  
PROPOSALS.)

1. Type of Well:  
Oil Well ☒ Gas Well ☐ Other ☐

2. Name of Operator  
Saba Energy of Texas, Inc.

3. Address of Operator: 3000 Wilcrest, Ste. 220; Houston, Texas 77042

4. Well Location  
Unit Letter G : 1980 feet from the NORTH line and 1980 feet from the EAST line  
Section 5 Township 22 S Range 35 E NMPM County LEA

11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐

TEMPORARILY ABANDON ☒ CHANGE PLANS ☐

PULL OR ALTER CASING ☐ MULTIPLE COMPLETION ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

OTHER: ☐

12. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompilation.

INTENT TO PERFORM A MECHANICAL INTEGRITY TEST BY JANUARY 11, 2002.

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

SIGNATURE Saba Energy of Texas, Inc. TITLE Secretary DATE 12/19/01

Type or print name Susan M. Whalen

Telephone No. (805) 347-8700

(This space for State use)

APPROVED BY

Conditions of approval, if any:

OCD Exhibit: 1-6  
Case No.: 13163  
Date: 11-7-03

DATE

State of New Mexico  
Energy, Minerals and Natural ResourcesOIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505WELL API NO.  
30-025-28480

5. Indicate Type of Lease

STATE ☒ FEE ☐

6. State Oil &amp; Gas Lease No.

018031

7. Lease Name or Unit Agreement Name:

San Simon 5 St

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" (FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well:

Oil Well ☐ Gas Well ☒ Other ☐

2. Name of Operator Greka Energy

Saba Energy of TX Inc

8. Well No.

2

3. Address of Operator Greka Energy, Suite 220, Houston, Tx 77042

3000 Wilcrest

9. Pool name or Wildcat

San Simon Wolfcamp

4. Well Location

Unit Letter EG : 1980 feet from the N line and 1980 feet from the E line

Section 5

Township 22S

Range 35E

NMPM

County Lea

10. Elevation (Show whether DR, RKB, RT, GR, etc.)  
3631 (GL)

## 11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

## NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☒TEMPORARILY ABANDON ☐ CHANGE PLANS ☐PULL OR ALTER CASING ☐ MULTIPLE COMPLETION ☐OTHER: ☐

## SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐CASING TEST AND CEMENT JOB ☐OTHER: ☐

12. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompilation.

See attached well bore schematic.

Attempt to sting out of pkr. If unsuccessful will cut tbg @ ~11550'.

Pump 25sx cmt plug @ 7" csg shoe @ 10975'. (10674' - 11070')

Pump 25sx cmt plug @ 7950' in cased hole.

Pump 25sx cmt plug @ 9 5/8" csg shoe @ 5750'. (5597' - 5800')

Cut 7" csg @ TOC, ~5200'. POH csg. Pump 25sx cmt plug @ stub. (5097' - 5200')

Pump 25sx cmt plug @ 1800' @ salt zone.

Pump 25sx cmt plug @ 13 3/8" csg shoe @ 1075'. (1022' - 1125')

Pump 13sx cmt plug @ surf. (0' - 60')

Cut off wellhead and install deadman marker

OCD Exhibit: 1-CCase No.: 13163Date: 11-7-03WELL MUST BE IN COMPLIANCE  
WITH RULE 202 BY

4/15/02

I hereby certify that the information above

SIGNATURE

TITLE

HEAD FOREMAN

DATE

2-12-02

Type or print name Tracy Headstream

Telephone No. (505) 390-7462

(This space for State use)

APPROVED BY

ORIGINAL SIGNED BY

H. L. WILLIAMS

DATE

Conditions of approval, if any:

DISTRICT SUPERVISOR/GENERAL MANAGER

THE COMMISSION MUST BE NOTIFIED 24  
HOURS PRIOR TO THE BEGINNING OF  
PLANNING OPERATIONS FOR THE CAGS

FEB 12 2002

## PLUGGING & ABANDONMENT WORKSHEET

**(3 STRING CSNG)**

OPERATOR GREY ENERGY

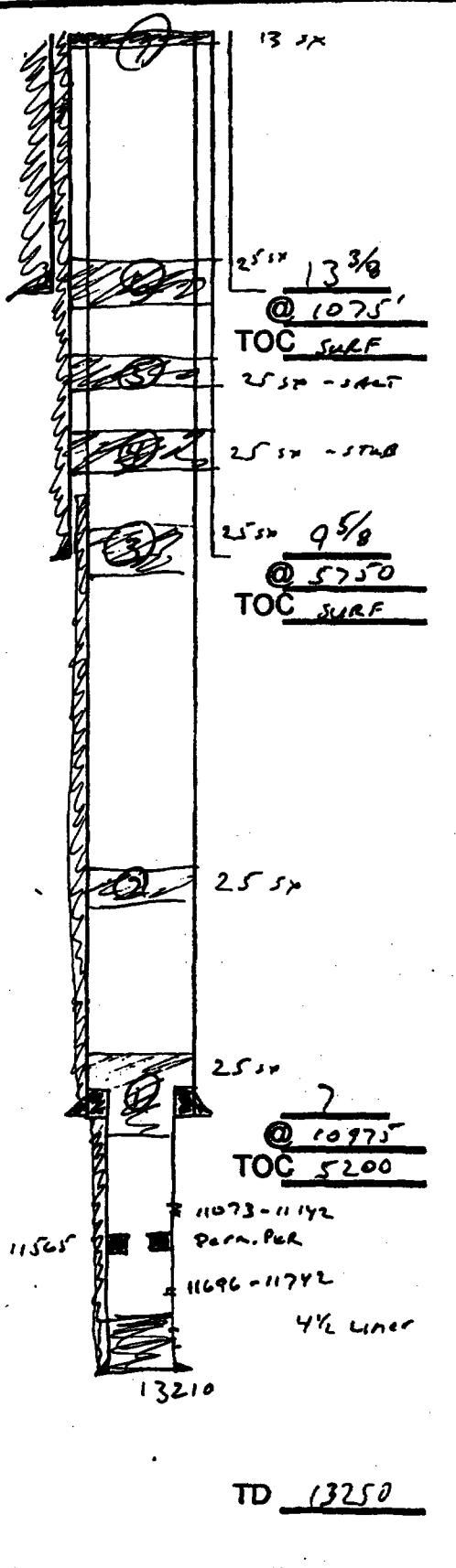
LEASENAME SAN SIMON 555

SECT 5 TWN 225 RNG 35E

FROM 1980 NSL 1980 EWL

TD: 13250 FORMATION @ TD

PBTD: 13210 FORMATION @ PBTD



	SIZE	SET @	TOC	TOC DETERMINED BY	
SURFACE	13 3/8	1075	SURF	CIRC	
INTMED 1	9 5/8	5750	SURF	CIRC	
INTMED 2					
PROD	7	10975	5200	CALC	
	SIZE	TOP	BOT	TOC	DETERMINED BY
LINER 1	4 1/2	10688	13247	10688	CALC
LINER 2					
	CUT & PULL @			TOP - BOTTOM	
INTMED 1			PERFS	11073 - 11742	
INTMED 2			OPENSOLE	0 -	
PROD	2" @ 5200'				

**\* REQUIRED PLUGS DISTRICT I**

MUSTLER (ANYED)	
YATES	
QUEEN	
GRAYBURG	
SAN ANDRES	
CAPTAIN REEF	
DELAWARE	
BELL CANYON	
CHERRY CANYON	
BRIGHT CANYON	
BONE SPRING	
GLORIETA	
SLINGERBY	
TUBB	
DRINKARD	
ARO	
WC	
PENN	
STRAWN	
ATOKA	
MOORROW	
ACON	
DEVONMAN	

[illegible]

Proposed

KB: 20'

GL: 3621'

SAN SIMON 5 ST #2  
Sec 5, T22S, R35E  
Lea County, NM

13 3/8" 61# K-55 @ 1075'

cmtd w/965 sx CI C to surf

9 5/8" 36# & 40# K-55 @ 5750'

cmtd w/3350 sx Line & CI C to surf

2 3/8" 4.7# L-80 U NuLok & N-80 EUE tbg

w/Otis Perma-Lach pkr & nipples @ 11600'

7" 23# S-95 @ 10975'

cmtd w/700 sx Line & CI H

Perfs: 11073-142' (Wolfcamp)

Perfs: 11696-742' (Strawn)

Perfs: 12758-946' (Morrow) squeezed

4 1/2" 13.5# N-80 @ 13247' (top @ 10688') cmtd w/475 sx CI H

FBR @ 10673'

Oris Perma-lach pkr @ 11580'

11565

50 sx squeeze TOC @ 12500'

PBTD: 13210'

TD: 13250'

"X" nipple @ 11579

11/5/94  
25PF