|                |  | AUG - 5  |  | NSERVATION DIVISION  POST OFFICE BOX 2498 (ATE LAND OFFICE BOXEDING INTO FE, NEW MEXICO 87501                     |   | M C-108<br>ised 7-1-81                               |
|----------------|--|--|--|---|---|--|
| APPLICA        | ITION FOR AUT                                  | OF COMPERMALI  | - Constitution of the control of the |   | - ,   |  |
| I.             | Purpose:<br>Applicat                           | Second SANTAction qualifies fo   | or administ  | Pressure Mainten<br>rative approval?  | ance X Disposal   | Storage  |
| II.            | Operator:                                      | C&C Stockfar   |  |   |   |  |
|                | Address: _                                     | 713 W. Harr  |  | Lovington, NM   |   |  |
|                | Contact par                                    | rty: Roland E.   | . Caudill  |   | Phone: 505-396-5  | 605  |
| III.           | Well data:                                     | Complete the da<br>proposed for in   | ita require<br>njection.   | Additional sheets   | side of this form f<br>may be attached if   | or each well<br>necessary.                           |
| IV.            | Is this an<br>If yes, giv                      | expansion of an<br>ve the Division o   | existing p<br>order numbe  | roject? X yes<br>r authorizing the  | project SWD-27  |  |
| ٧.             | injection w                                    | well with a one-h  | alf mile r   | s and leases with<br>adius circle draw<br>l's area of revie   | in two miles of any<br>n around each propo<br>w.  | proposed<br>sed injection                            |
| VI.            | penetrate well's type                          | the proposed injo<br>e, construction,  | ection zone<br>date drill  | <ul> <li>Such data shal</li> </ul>  | ord within the area<br>l include a descrip<br>th, record of compl<br>ing detail.  | tion of each   |
| VII.           | Attach data                                    | a on the proposed  | l operation  | , including:  |   |  |
|                | 2. Whe 3. Pro 4. Sou 5. If                     | ether the system opposed average ar urces and an apportion for injection is for at or within one | is open or<br>ad maximum<br>opriate and<br>mation if<br>disposal<br>mile of the<br>formation   | closed; injection pressur alysis of injecti other than rcinje purposes into a z e proposed well, water (may be me | lume of fluids to be; on fluid and compat cted produced water one not productive attach a chemical a asured or inferred | ibility with<br>; and<br>of oil or gas<br>nalysis of |
| VIII.          | detail, ged<br>bottom of a<br>total disad      | ological name, thall underground solved solids conc<br>zone as well as a                         | nicknass, a<br>sources of<br>centrations   | nd depth. Give t<br>drinking water (a<br>of 10,000 mg/l o   | ne including approp<br>he geologic name, a<br>quifers containing<br>r less) cverlying t<br>immediately underly          | nd depth to<br>waters with<br>he proposed            |
| IX.            | Describe th                                    | he proposed stime  | lation pro   | gram, if any.   |   |  |
| х.             |  | ropriate logging<br>ivision they need  |  |   | (If wall logs have  | been filed   |
| XI.            | available a                                    |  | thin one m   | ile of any inject   | more fresh water we<br>ion or disposal wel  |  |
| XII.           | examined av                                    | vailable geologic  | and engin  | eering data and f   | statement that the ind no evidence of 1 zone and any unde   | open faults  |
| XIII.          | Applicants                                     | must complete th   | ne "Proof o  | f Notice" section   | on the reverse sid  | e of this form.                                      |
| XIV            | Certificat                                     | ion  |  |   |   |  |
|                | to the hest                                    | t of my knowledge  | and belie  | f_  | his application is<br>le Vice Preside   |  |
|                | Signature:                                     | Roland E.  | Candil   | / D   | le Vice Preside   |  |
| submi<br>of th | ne informatio<br>tted, it neo<br>ne earlier so | on required under<br>ed not be duplica   | Sections<br>ated and re<br>VIII, X,  | VI, VIII, X, and submitted. Pleas XI, all were  | XI above has been p<br>e show the date and<br>e submitted u <b>p</b> or   | reviously<br>circumstance                            |
|                |  |  |  |   | py to the appropria   | te Division  |

### III. WELL DATA

- A. The following well data must be submitted for each injection well covered by this application. The data must be both in tabular and schematic form and shall include:
  - (1) Lease name; Well No.; location by Section, Township, and Range; and footage location within the section.
  - (2) Each casing string used with its size, setting depth, sacks of cement used, hole size, top of cement, and how such top was determined.
  - (3) A description of the tubing to be used including its size, lining material, and setting depth.
  - (4) The name, model, and setting depth of the packer used or a description of any other seal system or assembly used.

Division District offices have supplies of Well Data Sheets which may be used or which may be used as models for this purpose. Applicants for several identical wells may submit a "typical data sheet" rather than submitting the data for each well.

- B. The following must be submitted for each injection well covered by this application. All items must be addressed for the initial well. Responses for additional wells need be shown only when different. Information shown on schematics need not be repeated.
  - (1) The name of the injection formation and, if applicable, the field or pool name.
  - (2) The injection interval and whether it is perforated or open-hole.
  - (3) State if the well was drilled for injection or, if not, the original purpose of the well.
  - (4) Give the depths of any other perforated intervals and detail on the sacks of cement or bridge plugs used to seal off such perforations.
  - (5) Give the depth to and name of the next higher and next lower oil or gas zone in the area of the well, if any.

## XIV. PROOF OF NOTICE

All applicants must furnish proof that a copy of the application has been furnished, by certified or registered mail, to the owner of the surface of the land on which the well is to be located and to each leasehold operator within one-half mile of the well location.

Where an application is subject to administrative approval, a proof of publication must be submitted. Such proof shall consist of a copy of the legal advertisement which was published in the county in which the well is located. The contents of such advertisement must include:

- (1) The name, address, phone number, and contact party for the applicant;
- (2) the intended purpose of the injection well; with the exact location of single wells or the section, township, and range location of multiple wells;
- (3) the formation name and depth with expected maximum injection rates and pressures; and
- (4) a notation that interested parties must file objections or requests for hearing with the Oil Conservation Division, P. O. Box 2088, Santa Fe, New Mexico 87501 within 15 days.
  - NO ACTION WILL BE TAKEN ON THE APPLICATION UNTIL PROPER PROOF OF NOTICE HAS BEEN SUBMITTED.

NOTICE: Surface owners or offset operators must file any objections or requests for hearing of administrative applications within 15 days from the date this application was mailed to them.

• SENDER: Complete Items 1, 2, 3, and 4.

Add your address in the "RETURN TO" space on reverse. 3811, July 1982 (CONSULT POSTMASTER FOR FEES) 1. The tollowing service is requested (check one). Show to whom and date delivered .....  $\hfill\square$  Show to whom, date, and address of delivery .. RESTRICTED DELIVERY....

(The restricted delivery fee is charged in addition to the return receipt fee.) TOTAL \$. 3. ARTICLE ADDRESSED TO: P.O. fraver 1828 midLAND, Texas 79701 ARTICLE NUMBER 4. TYPE OF SERVICE: ☐ INSURED REGISTERED □ cop CERTIFIED 444210473 EXPRESS MAIL (Always obtain signature of addresses or agent) I have received the article described above. SIGNATURE DAddressee Authorized agent POSTMARK DATE OF DELIVERY B. ADDRESSEE'S ADDRESS (Only # mg REZ X-WPLOTES. 7. UNABLE TO DELIVER BECAUSE: # GPO: 1982-379-593 SENDER: Complete Items 1, 2, 3, and 4.
 Add your address in the "RETURN TO" space on reverse. (CONSULT POSTMASTER FOR FEES) 3811, July 1982 1. The following service is requested (check one). Show to whom and date delivered .....  $\square$  Show to whom, date, and address of delivery .. RESTRICTED DELIVERY...

(The restricted delivery tee is charged in addition to the return receipt fee.) TOTAL \$ MOBIL Prod. Tex. & N. Mex, P.O. Box 1800 3. ARTICLE ADDRESSED TO: Hobbs, N. Mex. 88240 ARTICLE NUMBER 4. TYPE OF SERVICE: ☐ INSURED PEGISTERED □ coo **CERTIFIED** DEPRESS MAIL (Always obtain signature of addresses or agent) I have received the article described above. Addresses Addresses age SIGNATURE POSTMARK DATE OF DELIVERY 6. ADDRESSEE'S ADDRESS (Only II requests 78. EMPLOYEE'S INITIALS 7. UNABLE TO DELIVER BECAUSE: 2-3-87

| orm 3                   | <ul> <li>SENDER: Complete items 1, 2, 3, an<br/>Add your address in the "P<br/>space on reverse.</li> </ul>   | d 4.<br>Beturn to''  |
|-------------------------|---|--|
| 38 Form 3611, July 1982 | (CONSULT POSTMASTER FO<br>1. The following service is requested (check of   | •  |
| ly 19                   | Show to whom and date delivered   |  |
| 8                       | Show to whom, date, and address of de   | ,  |
|                         | 2. Li RESTRICTED DELIVERY   | Htion  |
|                         | 3. ARTICLE ADDRESSED TO:  | TOTAL \$   |
|                         | SKELTON DIL<br>POBOX 176  |  |
|                         | 110965, N. Mex. 88240   | ARTICLE NUMBER   |
|                         | REGISTERED INSURED  |  |
|                         | □CERTIFIED □COD ₽   | 144210474  |
|                         | (Always obtain signature of address   |  |
|                         | I have received the article described above.  | :  |
|                         | SIGNATURE LAddressee LAutho   | rized agent  |
|                         | Dablue of   | ellow  |
|                         | DATE OF DELIVERY  | POSTMARK<br>(may be an reverse side)   |
| æ                       | 6. ADDRESSEE'S ADDRESS (Only If requested)  |  |
| RETURN RECEI            |   |  |
| REC                     | 7. UNABLE TO DELIVER BECAUSE:   | 7a. EMPLOYEE'S<br>INITIALS   |
| Ě                       | 7-7-87/   |  |
| -7.                     |   | ± GPO: 1982-379-593  |
|                         |   |  |
| 70 1                    | <del>.</del>  |  |
| PS Form 3               | SENDER: Complete Items 1, 2, 3, an Add your address in the "F space on reverse.   | d 4.<br>Leturn to''  |
| PS Form 3811,           | Add your address in the "F<br>space on reverse.<br>(CONSULT POSTMASTER FO   | RETURN TO"   |
| ے                       | Add your address in the "F space on reverse.  (CONSULT POSTMASTER FO  1. The following service is requested (check  | RETURN TO''  R FEES)  One).  |
| PS Form 3811, July 1982 | Add your address in the "F space on reverse.  (CONSULT POSTMASTER FO  1. The following service is requested (check  Show to whom and date delivered   | RETURN TO''  R FEES)  one).  |
| ے                       | Add your address in the "F space on reverse.  (CONSULT POSTMASTER FO  1. The following service is requested (check  Show to whom and date delivered  Show to whom, date, and address of de  RESTRICTED DELIVERY   | IR FEES) one)  |
| ے                       | Add your address in the "F space on reverse.  (CONSULT POSTMASTER FO  1. The following service is requested (check  Show to whom and date delivered  Show to whom, date, and address of de  | REFURN TO''  REFEES)  one).  thivery.  stillon   |
| ے                       | Add your address in the "F space on reverse.  (CONSULT POSTMASTER FO  1. The following service is requested (check  Show to whom and date delivered  Show to whom, date, and address of de  RESTRICTED DELIVERY   | IR FEES) one)  |
| ے                       | Add your address in the "F space on reverse.  (CONSULT POSTMASTER FO  1. The following service is requested (check  Show to whom and date delivered   | IR FEES) one).  Hivery   |
| ے                       | Add your address in the "F space on reverse.  (CONSULT POSTMASTER FO  1. The following service is requested (check  Show to whom and date delivered  Show to whom, date, and address of de  2. RESTRICTED DELIVERY  (The restricted delivery fee is charged in address to the return receipt fee.)  3. ARTICLE ADDRESSED TO:  American (ometra P. 0. Box 1749  Midland, Texas 797                                 | RETURN TO"  REFEES) one)   |
| ے                       | Add your address in the "F space on reverse.  (CONSULT POSTMASTER FO  1. The following service is requested (check  Show to whom and date delivered  Show to whom, date, and address of de  RESTRICTED DELIVERY.  (The restricted delivery fee is charged in address the return receipt fee.)  3. ARTICLE ADDRESSED TO:  American (ometra Polac 1749  Midland, Texas 797  4. TYPE OF SERVICE:  REGISTERED INSURED | IR FEES) one).  Hivery   |
| ے                       | Add your address in the "F space on reverse.  (CONSULT POSTMASTER FO  1. The following service is requested (check  Show to whom and date delivered   | REFURN TO"  REFEES) one).  Shery  Short  TOTAL \$  ARTICLE NUMBER  |
| ے                       | Add your address in the "F space on reverse.  (CONSULT POSTMASTER FO  1. The following service is requested (check  Show to whom and date delivered   | REFURN TO"  REFEES) one).  Shery  Short  TOTAL \$  ARTICLE NUMBER  |
| ے                       | Add your address in the "F space on reverse.  (CONSULT POSTMASTER FO  1. The following service is requested (check  Show to whom and date delivered   | REFURN TO"  REFEES) one).  Shery  Short  TOTAL \$  ARTICLE NUMBER  |
| ے                       | Add your address in the "F space on reverse.  (CONSULT POSTMASTER FO  1. The following service is requested (check  Show to whom and date delivered   | IR FEES) one).  Ill rees) one).  Ill rees) one).  Ill rees)  Ill r |
| ے                       | Add your address in the "F space on reverse.  (CONSULT POSTMASTER FO  1. The following service is requested (check  Show to whom and date delivered   | REFURN TO"  REFEES)  one).  thery  thery  TOTAL \$  ARTICLE NUMBER  CYYJOY72  RESER OF AGENT!  POSTMARK  |
| ے                       | Add your address in the "F space on reverse.  (CONSULT POSTMASTER FO  1. The following service is requested (check  Show to whom and date delivered   | IR FEES) one).  If were  |
| July 1982               | Add your address in the "F space on reverse.  (CONSULT POSTMASTER FO  1. The following service is requested (check  Show to whom and date delivered   | REFURN TO"  REFEES)  one).  thery  thery  TOTAL \$  ARTICLE NUMBER  CYYJOY72  RESER OF AGENT!  POSTMARK  |
| July 1982               | Add your address in the "F space on reverse.  (CONSULT POSTMASTER FO  1. The following service is requested (check  Show to whom and date delivered   | REFERS) one).  Shery   |
| ے                       | Add your address in the "F space on reverse.  (CONSULT POSTMASTER FO  1. The following service is requested (check  Show to whom and date delivered   | IR FEES) one).  IN FEES) ONE  IN FEES  IN FE |

4 GPO 1082.370.503

|   | 3                       |
|---|-------------------------|
|   | T                       |
|   | · š                     |
| 1 | PS Form 3811, July 1982 |
| } | 2                       |
| 1 | <b>:</b> []             |
| 1 | Ş                       |
| • | 2                       |
|   | 8                       |
|   | , -                     |

| SENDER: Complete items 1, 2, 3, and 4.     Add your address in the "RETURN space on reverse."  |                   |
|--|-------------------|
| CONSULT POSTMASTER FOR FE  | ES)               |
| 1. The following service is requested (check one).   |                   |
| Show to whom and date delivered  |                   |
| Show to whom, date, and address of delivery  | ···               |
| RESTRICTED DELIVERY  (The restricted delivery fee is charged in addition to the return receipt fee.)   |                   |
| 101  | AL \$             |
| 3. ARTICLE ADDRESSED TO:<br>Bass Enterprises<br>P.O. Box 1760<br>Midland, Texas 7970:  | 2                 |
| 4. TYPE OF SERVICE:  | ARTICLE NUMBER    |
| REGISTERED INSURED COD 45  | 142047/           |
| EXPRESS MAIL (Always obtain signature of address   | see or agent)     |
| 1 have received the article described above.  SIGNATURE Addressee Author  5. DATE OF MELIVERY  2 - 3 - 87  6. ADDRESSEE'S ADDRESS (Only If required) |                   |
| 7. UNABLE TO DELIVER BECAUSE:  | CAN MARKS         |
| V =  | . 000- 1082-179-5 |

| ၓ                       | e CCNDCD. Complete Name 4 0 C on   |                                      |
|-------------------------|--|--------------------------------------|
| PS Form 3811, July 1982 | SENDER: Complete items 1, 2, 3, an Add your address in the "F space on reverse.                | RETURN TO"                           |
| 811                     | (CONSULT POSTMASTER FO   | R FEES)                              |
| ŗ                       | 1. The following service is requested (check   | one).                                |
| y 18                    | Show to whom and date delivered  |                                      |
| 82                      | Show to whom, date, and address of de  | livery                               |
|                         | RESTRICTED DELIVERY (The restricted delivery fee is charged in add to the return receipt fee.) | tition                               |
|                         |  | TOTAL \$                             |
|                         | 3. ARTICLE ADDRESSED TO:<br>Texaco frod Ine,<br>P.O. Box 728<br>Hobbs N.M. 88240               |                                      |
|                         | 4. TYPE OF SÉRVICE:  REGISTERED INSURED COD EXPRESS MAIL                                       | ARTICLE NUMBER                       |
|                         | (Always obtain signature of addre  | ssee or agent)                       |
|                         | I have received the article described above.  SIGNATURE Addressee Authority  Biog Farry        | orized agent                         |
| İ                       | DATE OF DELIVERY   | POSTMARK<br>(may be on reverse side) |
| RETUR                   | 6. ADDRESSEE'S ADDRESS (Only If requested)   |                                      |
| RETURN RECEIP           | 7. UNABLE TO DELIVER BECAUSE:  | 7a. EMPLOYEE'S<br>Initials           |
|                         |  | # GPO: 1982-379-5                    |

## STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

| 80. 00 COPIES SEC | 61760 |   |
|-------------------|-------|---|
| DISTRIBUTI        | OM    |   |
| SANTA FE          |       |   |
| FILE              |       |   |
| U.S.O.S.          |       |   |
| LAND OFFICE       |       | <u>.                                     </u> |
| TRANSPORTER       | OIL   |   |
|                   | GAS   |   |
| OPERATOR          |       |   |
| PRORATION OF      | HC K  |   |

# OIL CONSERVATION DIVISION P. O. BOX 2088 SANTA FE, NEW MEXICO 87501

Form C-104 Revised 10-01-7B Format 06-01-83 Page 1

Separate Forms C-104 must be filed for each pool in multiply completed walls.

# REQUEST FOR ALLOWABLE AND

| I.  | AUTHORIZA         | TION TO TRANS                         | PORT OIL AND NA      | TURAL GAS                       |  |                   |
|---|-------------------|---------------------------------------|----------------------|---------------------------------|--|-------------------|
| Operator  |                   |                                       |                      |                                 |  |                   |
| C&C STOCKFARMS IN   | IC.               |                                       | <del></del>          | <del></del>                     |  | ·                 |
|   |                   |                                       |                      |                                 |  |                   |
| 713 WEST HARRISON Reason(s) for filing (Check proper box) | I. LOVIN          | IGTON. N.M.                           |                      | ase explain)                    |  |                   |
| Now Well  | Change in Tro     | inaporter of:                         | Oluer (Fre           | use explain,                    |  |                   |
| Recompletion  | Oii               |                                       | ry Gas               |                                 |  |                   |
| X Change in Ownership                                     | Casinghe          | rad Gas 🔲 G                           | ondensate            |                                 | •  |                   |
|   |                   |                                       |                      | <del></del>                     |  |                   |
| If change of ownership give name VERI                     | DE GRAND          | E INC. P.                             | BOX 147,             | LOVINGTON                       | , N.M. 88260   | )                 |
| •   |                   |                                       |                      |                                 |  |                   |
| II. DESCRIPTION OF WELL AND LE                            |                   | ol Name, Including F                  |                      | 10.22 271 222                   |  |                   |
| Legse Name  |                   |                                       |                      | Kind of Lease<br>State, Federal | ** Fa-   | Lease No.         |
| AZTEC ST. CO.M  | $L_3$ $L_0$       | OVINGTON P                            | ENN                  | State, Pederal                  | FEE_   | _I <u>OG_4765</u> |
|   |                   | C                                     | 660                  |                                 | 7.7 L  | •                 |
| Unit Letter M : 600                                       | _ Feet From T     | he <u>SOUTH</u> LI                    | ne and <u>660</u>    | Feet From T                     | he West  |                   |
| Line of Section 1.8 Township                              | P 1.6S            | Range Q                               | 7E .NM               | IPM,                            | Lea  | County            |
|   |                   |                                       |                      |                                 |  | <del></del>       |
| III. DESIGNATION OF TRANSPORT                             | TER OF OIL        | AND NATURA                            |                      |                                 |  |                   |
| Name of Authorized Transporter of Oil                     | or Conde          | ensate 🔲                              | Address (Give addre  | ss to which approv              | ed copy of this form is  | to be sent)       |
|   | ·                 |                                       |                      |                                 |  |                   |
| Name of Authorized Transporter of Castnghe                | ead Gas 🔲         | ot Dry Gas 🗔                          | Address (Give addre  | ss to which approv              | ed copy of this form is  | to be sent)       |
|   | <del></del>       | T#0                                   | <u> </u>             |                                 | <del></del>  |                   |
| If well produces oil or liquids, que location of tanks.   | t Sec.            | Twp. Rge.                             | Is gas actually conn | ected? Whe                      | n  |                   |
| If this production is commingled with the                 | et from any o     | ther lease or pool,                   | give commingling or  | rder number:                    |  |                   |
| NOTE: Complete Parts IV and V on                          | reverse side      | if necessary                          |                      |                                 |  |                   |
|   |                   |                                       | 11                   |                                 |  |                   |
| VI. CERTIFICATE OF COMPLIANCE                             | 3                 |                                       | OIL                  | CONSERVAT                       | ION DIVISION   |                   |
| I hereby certify that the rules and regulations of        | f the Oil Conset  | rvation Division have                 | APPROVED             | •                               |  | . 19              |
| been complied with and that the information giv           | en is true and co | implete to the best of                |                      |                                 | <del></del>  | , 17              |
| my knowledge and belief.                                  |                   |                                       | BY                   |                                 | <del></del>  |                   |
|   |                   |                                       | TITLE                |                                 |  |                   |
| 11 1-0  | 1 (11             |                                       |                      |                                 |  |                   |
| Roland E Cand   |                   |                                       | II .                 |                                 | ompliance with RUL   |                   |
| (Signature)   | <del> </del>      |                                       | well, this form u    | ust be accompan                 | able for a newly dril<br>ied by a tebulation<br>iance with MULE !! | of the deviation  |
| Vice President (Tule)                                     |                   |                                       | 15                   | of this form mus                | t be filled out compl  |                   |
| 1_15_87   |                   |                                       | ()                   |                                 | III. and VI for cha  | nges of owner.    |
| (Date)  |                   | · · · · · · · · · · · · · · · · · · · |                      |                                 | n or other such chan   |                   |

## STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

| wa, at Comits ACCEIVED | 1           |    |
|------------------------|-------------|----|
| DISTRIBUTION           | 1-          |    |
| SANTA FE               |             |    |
| FILE                   |             |    |
| U.S.G.S.               |             |    |
| LAND OFFICE            |             |    |
|                        | <del></del> | ┿━ |

| MB. ST COMICE ACCEIVED  DISTRIBUTION     | OIL COI                     | VSERVATION<br>P. O. BOX 2088 | DIVISION              |             |                               | Form C-103          |
|--|-----------------------------|------------------------------|-----------------------|-------------|-------------------------------|---------------------|
| SANTA FE                                 | SANTA                       | FE, NEW MEX                  | ICO 87501             |             |                               | Revised 10-1-78     |
| V.S.G.S.                                 | 4                           |                              |                       | [           | 5a. Indicate Type o           | of Lease            |
| LAND OFFICE                              | 4                           |                              |                       |             | State 🕮                       | Fee X               |
| OPERATOR .                               | j                           |                              |                       |             | 5. State Oil & Gas<br>OG-4765 |                     |
| SUNDR                                    | RY NOTICES AND RE           | PORTS ON WELLS               | DIFFERENT RESERVOIR.  |             |                               |                     |
| 1. OIL GAS []                            | 0.11                        |                              | 7                     | -           | 7. Unit Agreement             | Name                |
| well well well 2. Name of Operator       | OTHER- SALT WA              | ter disposa                  | L                     |             | 8. Farm or Lease 1            | Jame                |
| C&C Stockfarms Inc                       |                             |                              |                       | İ           | Aztec St.                     |                     |
| 3. Address of Operator                   |                             | <del></del>                  |                       |             | 9. Well No.                   |                     |
| 713 W. Harrison L                        | ovington, NM 8              | 8260                         |                       |             | 3                             |                     |
| 4. Location of Well  UNIT LETTER         | 660                         | South                        | 660                   |             | 10. Field and Pool            | , or Wildcat        |
|  |                             |                              |                       | EET FROM    |                               |                     |
| THE West LINE, SECT                      | 18 TOWNS                    | 16S                          | 37E                   | NМРМ.       |                               |                     |
|  |                             | Show whether DF, RT,         | GR, etc.)             |             | 12. County                    |                     |
|  | 3844                        | .5 G.R.                      |                       |             | Lea                           |                     |
| 16. Check                                | Appropriate Box To          | Indicate Nature              | of Notice, Repor      | t or Othe   | er Data                       |                     |
| NOTICE OF II                             | NTENTION TO:                |                              | SUBSE                 | EQUENT      | REPORT OF:                    |                     |
| PERFORM REMEDIAL WORK                    | PLUG AND                    |                              | AL WORK               |             | Attentu                       | G CASING            |
| TEMPORARILY ABANDON                      | PEGG AND                    |                              | NCE DRILLING OPNS.    | H           |                               | D ABANDONMENT       |
| PULL OR ALTER CASING                     | CHANGE PI                   | <del></del> -1               | TEST AND CEMENT JOB   | Ħ           |                               | - 1944004MERT       |
| Extend inje                              | ction zones                 | ОТН                          | ER                    |             |                               |                     |
| OTHER                                    | CCION ZONES                 |                              |                       |             |                               |                     |
| 17. Describe Proposed or Completed O     | perations (Clearly state al | pertinent details, and       | give pertinent dates. | including e | stimated date of st           | arting any proposed |
| work) SEE RULE 1103.                     |                             |                              |                       | _           |                               |                     |
| Since the wel                            | l has already               | been perfor                  | ated in the           | Penns       | ylvania zo                    | ones, we            |
| propose to drill o                       | ut the cement               | and cast ir                  | on bridge p           | lug.        | Then spot                     | 1,000               |
| gallons acid to in                       | sure perforati              | ons are ope                  | n. Replace            | tubin       | g and pack                    | er and              |
| resume injection.                        |                             |                              |                       |             |                               |                     |
|  |                             |                              |                       |             |                               |                     |
|  |                             |                              |                       |             |                               |                     |
|  |                             |                              |                       |             |                               |                     |
|  |                             |                              |                       |             |                               |                     |
|  |                             | •                            |                       |             |                               |                     |
|  |                             |                              |                       |             |                               |                     |
|  |                             |                              |                       |             |                               |                     |
|  |                             |                              |                       |             |                               |                     |
|  |                             |                              |                       |             |                               |                     |
|  |                             |                              |                       |             |                               |                     |
| 18.1 hereby certify that the information | above is true and complet   | e to the best of my kno      | wledge and belief.    |             |                               |                     |
| 11 1-1                                   | 7 1/11                      |                              |                       |             |                               |                     |
| DIENED Koland E, C                       | andill_                     | TITLE Vice Pr                | <u>esident</u>        |             | DATE                          | D <b>-</b> 87       |
|  | <del> </del>                |                              |                       |             |                               |                     |
|  |                             |                              |                       |             |                               |                     |

| OPERATOR    |   | ETASE                                   | -                       |                     |
|-------------|---|---|-------------------------|---------------------|
| CEC STO     | CKEAFAS INC.                            | AZTEC STATE COM<br>SECTION              | TOWNSHIP                | RANGE               |
|             | 60 FSL: 660FWL                          |   | 16S                     | 37E                 |
|             | <u> </u>                                |   |                         |                     |
| Schem       | atie                                    |   | bular Data              |                     |
|             | a                                       | Surface Chaing                          | •                       |                     |
| 5 15963 II  | Cementer 10 surga                       | de Size 13-3/8" "                       | Cemented with           | n <u>450</u> s      |
|             |   | TOC Surface                             | feet determined by      | observation         |
|             | Surgace 442'                            | Hole size <u>17-1/2"</u>                |                         |                     |
|             |   | Intermediate Casing                     |                         |                     |
|             |   | Size 8-5/8 "                            | Cemented with           | n 1,700 s           |
|             |   | toc Surface                             |                         |                     |
|             |   | Hole size 12-1/4"                       |                         |                     |
|             |   |   |                         |                     |
|             |   | Long string                             | C 1 1 311               | 100                 |
|             | Titermediate 4,203                      | Size <u>5-1/2</u> "                     |                         |                     |
| - 11        | 1,7403                                  | TOC 7,500                               |                         | Logs                |
|             |   | Hole size                               |                         |                     |
|             |   | Total depth <u>11,374</u> !             |                         |                     |
|             | Toc 7500'                               | Injection interval                      |                         |                     |
|             | 100 ,500                                | 10,230 feet to (perforated or open-hol  | e. indicate which)      | _ feet              |
|             |   | .,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | .,                      |                     |
|             |   |   |                         |                     |
|             |   |   |                         |                     |
|             | PACKER Set 10,                          | ,050'                                   |                         | ·                   |
|             |   | ·                                       |                         |                     |
|             |   |   | •                       |                     |
|             | PATD                                    | 1.145                                   |                         |                     |
|             | PBTD 11                                 | ,                                       |                         |                     |
|             | , TD , 11                               | ,374°                                   |                         |                     |
|             | . 12                                    |   |                         |                     |
|             |   |   |                         |                     |
|             | 2.2.01                                  |   | _                       |                     |
| Tubing size | 2-7/8" line                             | ed with <u>Tiberglas</u> (mater         | S<br>Sial)              | set in a            |
|             | el "R"                                  | packer at                               | 10,050                  | feet                |
|             | nd and model)<br>any other casing-tubio | ng seal).                               |                         |                     |
| Other Date  | ,                                       |   |                         |                     |
|             | the injection formation                 | n Wolfcamp                              |                         |                     |
|             |   | icable) Undesignated                    |                         |                     |
|             |   | injection? / Yes                        |                         |                     |
|             |   | e well originally drilled?              |                         | duction             |
| 11 00, 1    | of what hathose was en                  | c ners drag                             |                         |                     |
|             | -11 sure base conform                   | ted in any other zone(s)?               | List all such per       | Corated interve     |
| and give    | plugging detail (sack                   | s of cement or bridge plug              | j(s) usea) <u>11,21</u> | <u>9.10.11,3381</u> |
| 1-1/2       | " CIRP 0 11,160'                        | With 20 cement on to                    | op To be                | drilled or          |
|             | ·                                       |   |                         |                     |
| 5. Give the | depth to and name of                    | any overlying and/or under              | rlyimy oil or gos z     | ones (pools) is     |
| thin are    | n. <u>Yates-3,220<b>'</b>;Sa</u> i      | n Andres-4,900':Glor                    | <u>leta-o.312';</u>     |                     |
|             |   | .590':Abo-8.2051:str                    |                         |                     |
|             |   | een found to have co                    | <u>mercial duanti</u>   | ries of Oll         |
| ges in      | this field.                             |   |                         |                     |

| STATE OF NEW                     |   |                                       |                            |                |                  |                    |             |                 | Revised                 | 10-1-78                   |
|----------------------------------|---|---------------------------------------|----------------------------|----------------|------------------|--------------------|-------------|-----------------|-------------------------|---------------------------|
| ENERGY AND MINERAL               | S DEPARTMEN   | T OIL                                 | CONSI                      | EDVA           | TION D           | IVISI              | ON          | ,               |                         |                           |
| MO. 07 COMICO RECE               |   | OIL                                   |                            | . O. BO        |                  | 1 4 121            | ON          | 1               | dicate Typ              |                           |
| SANTA FE                         | <u> </u>  | S 0                                   |                            |                | A 2000<br>MEXICO | 8750               | 1           |                 | ate XX                  | Fee [ ]                   |
| FILE                             |   | .,,                                   |                            | -, 146.00      |                  |                    | •           | ſ               |                         | us Leston No.             |
| U.S.G.1.                         |   | WELL COMPL                            | ·<br>IO MOLT B             | <br>R RECC     | MPLETIO          | <br>N REPO         | ORT AND     | LOG             | G-476                   | Server ere <del>ere</del> |
| LAND DFFICE                      |   | HLLL COM L                            | LIIONO                     | I ILCC         | JIM 22 110       |                    | <b></b>     |                 |                         |                           |
| OPERATOR                         |   |                                       |                            | -              |                  |                    |             |                 | 777777                  | THIIII                    |
| IG. TYPE OF WELL                 |   |                                       |                            |                |                  |                    |             | 7. Un           | lt Agreeme              | nt Name                   |
|                                  |   | LL GAS                                | ر ا                        | DRY            | OTHER            |                    |             |                 | rm or Leas              | a Name                    |
| b. TYPE OF COMPLE                | an 🗀  | PLU:                                  | ده ( <del>س</del> اه       | ,, <u> </u>    |                  |                    |             | 1               |                         |                           |
| 2. Name of Operator              | ER DEEP   | EN BAC                                | K DI                       | SVA.           | OTHER            |                    | <del></del> | A A             | ztec S                  | State Com                 |
| i                                | 0.2   | ~                                     |                            |                |                  |                    |             | ". "            | .1 140.                 |                           |
| Walnoco                          | Ull & Gas   | s Company                             |                            |                |                  |                    |             | <u></u>         | teld and Pa             | ool, or Wildcat           |
| 1                                | th Quit   | ta 1600                               | Mar+a                      | m              |                  | <b>0</b> 0000      | 5 1.00      | l               |                         | •                         |
| 4. Location of Well              | in, but   | te 1500.                              | noust                      | on, T          | exas             | 77002              | 4707        |                 | 177777                  | ington-Fenn               |
|                                  |   |                                       |                            |                |                  |                    |             |                 |                         |                           |
| UNIT LETTER M                    |   | 600                                   |                            | Sout           | h                | 660                |             |                 | //////                  |                           |
| ONLY CETTEN                      | LOCATED   | , , , , , , , , , , , , , , , , , , , | PHOM THE                   |                | IIIII            | XXXX               | 17777       | 6.81 7777       | onut <b>y</b><br>777777 | 74//4/44/                 |
| we West                          | w. 18   | 1W0 7 6 C -                           | <sub>ст</sub> Э <b>л</b> п | 7              |                  |                    |             | .I. [[[[]]      | ea                      |                           |
| THE West LINE OF                 | 16. Date T.D.   | Reached 17, Date                      | e Compl. (R                | eady to I      | rod.) 18.        | ZZZZZ<br>Elevation | is (DF, RK. | B, RT, GR, etc. | / 19. Elev              | . Cashinghead             |
| 11-17-81                         |   | 1                                     | 2-8-82                     |                | i                |                    | L. 38       |                 |                         |                           |
| 20. Total Depth                  | 21. PI  | ug Back T.D.                          | 22.                        | If Multipi     | e Compl., Ho     |                    | Intervals   | Rotary Tools    | , , , ,                 | able Tools                |
| 11,375                           |   | 11,360'                               | - 1                        | Many           |                  |                    | Drilled By  |                 | :                       |                           |
| 24, Producing Interval(          | s), of this comple  | tion - Top, Hotto                     | m, Name                    | <del>,</del> , |                  |                    |             |                 | 25. W                   | as Directional Survey     |
| 11,187'-1<br>Tennsy              | 1,338'<br>lvania (3   | Strawn)                               |                            |                |                  |                    |             |                 | "                       |                           |
| 26. Type Electric and (          | Other Logs Run  |                                       | <del></del>                |                |                  |                    |             |                 | 27, Was W               | ell Cored                 |
| ļ                                |   |                                       |                            |                |                  |                    |             |                 |                         |                           |
| 28.                              | an, a garantingga, a samah higin pempan aga an saman ang an | CA                                    | SING RECO                  | )RD (Per       | ort all string   | s sot in w         | voll)       |                 |                         |                           |
| CASING SIZE                      | WEIGHT LE   | ./FT. DEPT                            | HSET                       | ног            | E SIZE           | -                  | CEMENTI     | NG RECORD       |                         | AMOUNT PULLED             |
| 13-3/8"                          | ·   |                                       | 442                        | 17             | 7불#              | 450                | )_gx        |                 |                         |                           |
| 8 <b>-5/</b> 8"                  |   |                                       | 103'                       | 1.             | 2 <u>]</u> "     |                    |             |                 |                         |                           |
| 5- <sup>1</sup> / <sub>2</sub> " |   |                                       | 374                        |                |                  | 400                | <u></u>     |                 |                         |                           |
| 2-7/8"                           |   |                                       | 013                        | <u> </u>       |                  | NONe               |             | <del></del>     |                         |                           |
| 29.                              |   | LINER RECORD                          | <del></del>                |                |                  | 30.                |             | TUBINO          | RECORD                  |                           |
| SIZE                             | 70P   | воттом                                | SACKS C                    | EMENT          | SCREEN           |                    | SIZE        | DEPTHS          | ET                      | PACKER SET                |
|                                  |   |                                       | <del></del>                |                |                  |                    |             |                 |                         |                           |
| <u> </u>                         |   | <del></del>                           | <u> </u>                   |                | T                | 1612 6             |             | 571105 651161   |                         | 7                         |
| 11. Perforation Record           | (intervat, stre an  | a numoerj                             |                            |                | 32.              |                    |             | CTURE, CEHEN    |                         |                           |
| 11.187                           | -11,338'  |                                       |                            |                | DEFIN            | INTERV             | 'AL -       | AMOUNT AF       | ID KIND M               | ATERIAL USED              |
|                                  | • • •   |                                       |                            |                |                  |                    |             |                 |                         |                           |
|                                  |   | -                                     |                            |                |                  |                    |             |                 |                         |                           |
|                                  |   |                                       |                            |                |                  |                    |             |                 |                         |                           |
| .a3.                             |   |                                       |                            | PROD           | UCTION           |                    |             |                 |                         |                           |
| Cate First Freduction            | frod  | uction Method (Flo                    | owing, gas i               | lift, pump     | ing Size an      | d type pu          | imp)        | Well            | Status (Pr              | od. or Shut-in)           |
|                                  |   |                                       |                            |                |                  |                    |             |                 |                         |                           |
| Date of Test                     | Hours Tested  | Choke Size                            | Prod'n.<br>Test Pe         |                | Oil - Bbl.       | Ga:                | s - MCF     | Water — Ub      | l. Gas                  | a Oil Ratto               |
| :<br>                            |   |                                       |                            | <u> </u>       |                  |                    | <b></b>     | 1               | ,                       |                           |
| t low Tubing Press.              | Caning Pressu   | Calculated 2<br>Hour Hate             | (4- OH + H                 | sbl.           | Gas = )          | AC)                | Water       | Hul.            | Oll Grov                | dry API (Com.)            |
| 14. Disposition of Gas           | Cold need to to   | at annual ment                        | <b>&gt;</b>                |                |                  |                    | l           | Transition      | 1                       |                           |
| . 4. Prinhonition of Ods         | Course more jor ju  | es, venicu, ric.)                     |                            |                |                  |                    |             | Test Witner     | nea by                  |                           |
| of List of Attachments           |   |                                       |                            |                |                  |                    |             |                 |                         |                           |
| ,                                |   |                                       |                            |                |                  |                    |             |                 |                         |                           |
| 16. I hereby reinfy that         | the information   | shown on both sid                     | es of this fe              | om is tru      | e and comple     | te to the          | best of my  | knowledge and   | belief.                 |                           |
|                                  |   |                                       | •                          |                |                  |                    |             | ~               | •                       |                           |
| Steven                           |   |                                       | <b></b>                    |                |                  |                    |             |                 |                         |                           |
| SIGNED                           |   |                                       | TIT                        | L.E            |                  |                    |             | DATE            |                         |                           |

# Affidavit of Publication

| STATE OF NEW MEXICO | )     |
|---------------------|-------|
|                     | ) ss. |
| COUNTY OF LEA       | )     |

deposes and says that he is Adv. Lirector of THE LOVINGTON DAILY LEADER, a daily newspaper of general paid circulation published in the English language at Lovington, Lea County, New Mexico; that said newspaper has been so published in such county continuously and uninterruptedly for a period in excess of Twenty-six (26) consecutive weeks next prior to the first publication of the notice hereto attached as hereinafter shown; and that said newspaper is in all things duly qualified to publish legal notices within the meaning of Chapter 167 of the 1937 Session Laws of the State of New Mexico.

| That the notice which is hereto attached, entitled   |
|--|
| Legal Notice   |
| 20701 100100   |
|  |
|  |
| and numbered in the                                  |
|  |
|  |
| County, New Mexico, was published in a regular and   |
| entire issue of THE LOVINGTON DAILY LEADER and       |
| not in any supplement thereof, once each week on the |
|  |
| same day of the week, for three (3)                  |
| consecutive weeks, beginning with the issue of       |
|  |
| Pebruary 3 1987                                      |
|  |
| and ending with the issue of                         |
| February 17 19 7                                     |
| , 20111111111111111111111111111111111111             |
| And that the cost of publishing said notice is the   |
|  |
| sum of \$15.51                                       |
| which sum has been (Paid) (Newscal) as Court Costs   |
| to an interest of the court costs                    |
| Jeyce Clemens  |
|  |
| Subscribed and sworn to before me this 20th          |
| day of February 19.27                                |
| Mr Jean Lemin  |
|  |
| Notary Public, Lea County, New Mexico                |
| My Commission Expires Sept. 28 19 90                 |
| My Commission Expires                                |

#### **LEGAL NOTICE**

Notice of application for fluid injection Well Permit C&C Stockfarms Inc. 713 W. Harrison, Lovington, NM 88260, (505)896-5605 Reland Caudill (POC) has applied to the ell conservation division for a permit to include the Pennsylvania zones of the Astes State Com Well No. 3 into selements injection. The well is located 669 FSL, 690 FWL, Sec 18; Twp 168; Bus 27E, Lee County, N. Mex. (8 miles SE of Lovington). Astec State Com No. 3 has a proposed injection depth rate and pressure as follows: 10,230, to 11,375; 500-1200 BW/dey, and gravity feed for pressure. Interested parties must file objection or requests for hearing with the oil conservation division, P.O. Box 2088, Santa Pe, N. Mex. 87501, within 15 days.

Published in the Lovington Daily Leader February 3, 10, and 17, 1987.

| F 44 F   |  | MIN  |   |
|--|--|--|---|
| U.S. G.S.                                      | AUTHORIZATION TO TR.                       | ANTONT OUT AND MATURALE  | (   |
| LAND OFFICE                                    |  |  |   |
| THANSPORTER OIL                                | ļ  |  |   |
| GAS  | . 1  |  |   |
| OPERATOR                                       |  |  |   |
| PRORATION OFFICE                               |  |  |   |
| Operator                                       | .2   |  |   |
| BASS ENTERPH                                   | RISES PRODUCTION                           | Co.  | <u> </u>                                  |
| Address 7 ~ /                                  | 1  | •  |   |
| DOX 2760, NI                                   | 1<br>IDLAND, TX 79702                      |  |   |
| 1.7  |  | Other (Please explain)   | FIG. BATTON NAME OF                       |
| New Well                                       | Change in Transporter of: Oil Dry G        | FLARSD ACTE  | GAS MUST NOT BE                           |
| Thange in Ownership                            | OII Cry G                                  | UNLESS AN F  | SCEPTION TO RAOTE                         |
| Thinge III Ownership                           | Charlinghedd Gds Conde                     | HI CHTAINING   | 2 24 7 10 14 3 10 K-\$036                 |
| change of ownership give name                  |  |  |   |
| nd address of previous owner                   |  |  |   |
| AFCORDATION OF HIS A AND                       | LEICE                                      |  | n   |
| DESCRIPTION OF WELL AND                        | Lease No. Well No. Pool Mr.                | ame, Including Formation R-65  | Kind of Lease                             |
| 21   | 1 1 .                                      | IBAST LOUINGTON PENN   | 1   |
| MONTEITH                                       | 21.25 /A   1 YYOK /A                       | IBAST LOVINGION LENN   |   |
|  | ,    |  | <i>T</i> •                                |
| Unit Letter P : 8                              | 10 Feet From The South Li                  | ne and OOO Feet From   | n The EAST                                |
| Line of Section 13 To                          | ownship 16-5 Range                         | 31-F   | LEA County                                |
| Elife of decign 72                             | wastip 16 5 Acade                          | 7 1467 16,   | LEA Count                                 |
| JESIGNATION OF TRANSPOR                        | TER OF OUL AND NATURAL G.                  | A S  |   |
| Name of Authorized Transporter of Of           | TER OF OIL AND NATURAL GA                  | Address (Give address to which app   | roved copy of this form is to be sent)    |
|  | •  |  | (11 8831/2                                |
| Tame of Authorized Transporter of Co           | PIPE LINE CO. asinghed Gas or Pry Gas      | Address (Give address to which app   | roved copy of this form is to be sent)    |
|  |  |  |   |
| ! we!! groduces oil or !!quids,                | Unit Sec. Twp. Ege.                        | Is gas actually connected?   | When                                      |
| give location of tanks.                        | G 13 16-5 36-8                             |  |   |
| this production is commingled w                | ith that from any other lease or pool,     |  |   |
| OMPLETION DATA                                 | , o 15255 or poor,                         | Eliza committee de la committe |   |
|  | Oil Well Gas Well                          | New Well Workover Deepen   | Flug Back   Same Peats, Diff. Res         |
| Designate Type of Completi                     | $X \downarrow X$                           | X  |   |
| ate Spudded                                    | Date Compl. Ready to Prod.                 | Total Depth  | P.B.T.D.                                  |
| AUG. 2,1980  levations (DF, RKB, RT, GR, etc., | Oc 7. 8, 1980  Name of Producing Formation | 11, 390  | //, 327'                                  |
|  |  | Total Depth  11, 390  Top Oil/Gus Pay  | //, 327' Publing Depth                    |
| 3850.7'GL 3868.7' KA                           | S PENN.                                    | 11,165'  | 1/1/22                                    |
| erforations                                    |  |  | Depth Casing Shoe                         |
| 11,181'-11,264'                                |  |  | 11,390'                                   |
|  | TUBING, CASING, AN                         | D CEMENTING RECORD   |   |
| HOLE SIZE                                      | CASING & TUBING SIZE                       | DEPTH SET  | SACKS CEMENT                              |
| <u> 15"</u><br>11"                             | 11 3/4 °<br>8 5/3"                         | 352.07'  | 300 C1"E" - CIRC.                         |
| 11"  | 8 5/3"                                     | 4925.00'   | 2201 SKS- 2 STAGE - C11<br>840 C1 "H"     |
| 7 7/8 "  | 51/2"                                      | 11389,52'  | 840 C1 "H"                                |
| 51/2" C3G                                      | 2 3/8"                                     | 11/22,01'  | <u>i</u>                                  |
| EST DATA AND REQUEST F                         |  |  | il and must be equal to or exceed top all |
| II, WELL                                       |  | epth or be for full 24 hours)  | 17.                                       |
| ate First New Oll Run To Tanks                 | Date of Test                               | Producing Method (Flow, pump, gas  | tift, etc.)                               |
| OCT. 8, 1980                                   | OCT. 21, 1980 Tubing Pressure              | FLOWING Casing Pressure  |   |
| ength of Test                                  | Tubing Pressure                            |  | Choke Size                                |
| 8 HRS  | 1/75                                       | PACKER   | VARIOUS<br>Gan-MCF                        |
| ctual Prod. During Test                        | Oil-Bble.                                  | Water - Bble.  | Į.  |
|  | 200  | NONE   | 440                                       |
|  |  |  |   |
| AS WELL  | Langth of Table                            | Bhle Condenant Augs  | Security of Conditions                    |
| Catual Prod. Test-MOF/D                        | Length of Test                             | Bble. Condensate/MMCF  | Gravity of Condensate                     |

| TURG   |                | WELL             | . COMPL                   | ETION O      | RREC           | PMPLE TIC                              | THR              | LPOPT A               | ep ces                                | State T                               | 1 121                                 |
|--|----------------|------------------|---------------------------|--------------|----------------|--|------------------|-----------------------|---------------------------------------|---------------------------------------|---------------------------------------|
| u.s.c.s.   | -              | .                |                           |              |                |  |                  |                       | 1                                     |                                       | i N a a.                              |
| LAND OFFICE  |                |                  |                           |              |                |  |                  |                       | }                                     |                                       | Mark Market                           |
| OPERATOR   |                |                  |                           |              |                |  |                  |                       | }                                     | minn                                  | Hillihinin                            |
| In. TYPE OF WELL                                   |                |                  |                           |              | ·              |  |                  |                       |                                       |                                       | re tent Same                          |
|  |                | 해 []             | G A 5                     | $\Box$       | ٢١             |  |                  |                       | ı                                     |                                       |                                       |
| b. TYPE OF COMPLE                                  | TION '         | wiii( <u>A</u> ) | GAS<br>WEILL              | L_J          | ORY []         | отщи                                   |                  |                       |                                       | ii, 1 arm or                          | Leona Dana                            |
| NEW X NOT  |                | ٢٦               | PLUG<br>BACK              | [ DI         | SVA.           |  |                  |                       |                                       |                                       |                                       |
| 2. Name of Operator                                | <u> </u>       | DEEPENL          | BACK                      | L_ / AE      | SVA. L         | ОТНЕЯ                                  |                  |                       |                                       | 7. Well 110.                          | TEITH                                 |
|  |                |                  | Pean                      |              | Co             |  |                  |                       |                                       |                                       | 2                                     |
| Bass EN<br>3. Address of Operator                  | TERPK          | 1565.            | TRUDO                     | C//014       |                |  |                  |                       |                                       | 19, Fiel 15                           | 2<br>md Poet, or Wildcat              |
| Box 276  | - 1            | 10/0-            | . D 7                     | 'v 7         | 970            | ,                                      |                  |                       |                                       | ر ہے ہے                               |                                       |
| 4 Location of Well                                 | 0, ///         | DLAN             | <u> </u>                  |              | 1101           | ·                                      |                  |                       |                                       | 7777                                  | OVINGTON PENN                         |
| ,, 200   |                |                  |                           | :            |                |  |                  |                       |                                       |                                       |                                       |
| UNIT LETTER  |                | 1980             |                           |              | NORT           |  |                  | 510                   |                                       |                                       |                                       |
| UNIT LETTER  | LOCATED        |                  | FEET F                    | ROM THE _Z   | v vie i        | 777777                                 | 777°             | 77777                 | LLLLLI                                | Land Country                          | 77777474                              |
| 60   | / 3            |                  | / <                       | . 3/./       | e _            |  |                  |                       | . / / / / / / / /                     | 1                                     | (1///////                             |
| THE EAST LINE OF                                   | 16, Date T     | .D. heuched      | 1 17. Date                | Conal. IR    | eady to l      | ////////////////////////////////////// | ///<br>.vot.t    | ations (DF            | XXXXXXX<br>RAB. RT. (                 | R, etc.) 10                           | Fiev. Cashinahood                     |
|  |                |                  | I                         |              |                |  |                  |                       |                                       |                                       |                                       |
| 10-14-80<br>20. Total Depth                        | 121            | . Flug Back      | T.D.                      | 22.          | f Multipl      | e Comul Н                              | <u>د د</u><br>٥٧ | 23. Interv            | uls Rotor                             | y Tools                               | . Cable Tools                         |
| 11 1 -1 1  | -              | , , , , ,        | 1201                      |              | Many           | 161 #                                  |                  | Prille                | 1 Ry                                  | 11 11 11                              | /                                     |
| 20. Total Depth  11, 475  24. Producing Interval(s | o), of this co | mpletion -       | Tu <sub>k</sub> , Isotton | , Name       |                | GLE                                    |                  | 1                     | 7,0-                                  | 11,413                                | 25. Was Directional Survey            |
|  | ,,             |                  |                           |              |                | •                                      |                  |                       |                                       |                                       | Made                                  |
| 11, 322'-  | 11.302         | PF.              | 2 N                       |              |                |  |                  |                       |                                       | }                                     | No                                    |
| 26. Type Electric and C                            |                |                  |                           | <del>'</del> | <del>(</del> . |  |                  | <del></del>           |                                       | 27. 1                                 | flas Well Cored                       |
|  |                |                  |                           |              |                |  |                  |                       |                                       | 1.7.                                  | No                                    |
| DT-SFL,  | CN-FD          |                  | C A S                     | INC RECO     | DD /Pas        | ort all string                         |                  | :11)                  |                                       |                                       | 770                                   |
| 28.  | WEIGHT         | L8./FT.          | T                         | ····         |                |  | 15 561           |                       |                                       |                                       |                                       |
| CASING SIZE  | 1              | 12 00            | DEPTH                     |              |                | E SIZE                                 | <del> </del>     |                       | NTING REC                             |                                       | AMOUNT PULLED                         |
| 85/8"  |                |                  |                           | .64'         |                | 15"                                    | 1                |                       | 3 61 "                                |                                       | NONE                                  |
|  |                | 324              | 4,925                     |              |                | 11"                                    | 1                |                       | C/ "C                                 |                                       | NONE                                  |
| 5 1/2 4  |                | 7 <b>st</b>      | 11,474                    |              |                |  | 12               | 00 343                | C1 "h                                 | / " <u> </u>                          | NONE                                  |
| 2 3/8" TAG   | 4.             | 7#               | ///220                    | ,            | 3,             | 2"059                                  |                  | <del>_</del><br>  30. |                                       |                                       |                                       |
| 29.  |                |                  |                           | SAGVE 5      |                |  |                  | <del> </del>          |                                       | UBING REC                             |                                       |
| SIZE   | • TOP          |                  | MOTTC                     | SACKS C      | EMENI          | SCREEN                                 | <del></del> -    | 2 3/8"                |                                       | PTH SET                               | PACKER SET                            |
| NONE   |                |                  |                           |              |                |  |                  | 2 18                  |                                       | ,226                                  | 1/,222'                               |
| 31. Perforation Record                             | Untarval cir   | and numb         | uz l                      | !            |                | 1 22                                   | A C I            | D SUAT E              | DACTURE                               | CENEUT CO                             | )                                     |
|  |                |                  |                           |              |                | 20.                                    |                  |                       | · · · · · · · · · · · · · · · · · · · |                                       | DUEEZE, ETC.                          |
| 11,322'- 11,3                                      | 393'.          | JEVENT           | TEEN                      | rv GR        | Am.            | <del></del>                            |                  | ERVAL                 | + ·                                   |                                       | ND MATERIAL USED                      |
| SSB-II CHAR  | 26 E s.        |                  |                           |              |                | 11,222                                 | //,              | 393'                  |                                       |                                       | ame 0 20% DS-                         |
|  |                |                  |                           |              |                |  |                  |                       | 30 ACIZ                               | 5 4 34 A                              | BALL SEALERS.                         |
|  |                |                  |                           |              |                |  |                  |                       | ļ                                     |                                       |                                       |
| 33.  |                |                  |                           |              | PROD           | UCTION                                 |                  |                       | L                                     | <del></del>                           |                                       |
| Date First Production                              |                | roduction h      | dethod (Flor              | cing, gas l  |                | ing = Size a                           | nd ty            | ne pump)              |                                       | Well Statu                            | is (Prod. or Shut-in)                 |
|  | j              |                  |                           | **           | - '            |  |                  |                       |                                       | Dean                                  | ULING                                 |
| DEC. 24, /   | Hours Test     | led CI           | lioke Size                | Frod'n.      | For            | Cil - Bbl.                             |                  | Gas = MC              | F Wate                                | r = Bbl.                              | Gus - Oil Rutto                       |
| 1  | 1              |                  |                           | Torret Lor   | rlod 1         |  |                  | 1                     | I .                                   |                                       | · · · · · · · · · · · · · · · · · · · |
| 12-25-80<br>Flow Tubing Press.                     | Casing Fre     | essure Co        | alculated 24              | - Oil - B    |                |  | MOL              | 1                     | ater – Bbl.                           | Tou                                   | /6/7<br>  Gravity = API (Corr.)       |
| <b>}</b>   |                | 1 116            | out Rate                  | 1            |                | ŀ                                      |                  |                       | ,                                     | ì                                     |                                       |
| 600-650<br>34. Disposition of Gas (                | Sold, used f   | or fuel, vent    | ed, etc.)                 | 1 / 7        | <u> </u>       |  |                  |                       | Tesi                                  | Witnessed I                           | 46.4<br>By                            |
| SOLD   | ·              |                  | -                         |              |                |  |                  |                       |                                       | <b>-</b>                              | •                                     |
| 35. List of Attachments                            |                |                  |                           |              |                |  |                  |                       |                                       | · · · · · · · · · · · · · · · · · · · |                                       |
| ONE (1) EA   | CH ABO         | ove Lo           | 65                        |              |                |  |                  |                       |                                       |                                       |                                       |
| 36. I hereby certify that                          |                |                  |                           | s of this fe | orm is tru     | e and compl                            | ete to           | the best of           | my knowled                            | ge and belie                          |                                       |
|  |                |                  |                           |              |                |  |                  | _                     |                                       |                                       | •                                     |
| SIGNED Jd.   | p 21/1         | x f )            | γ.                        | <b></b>      | //             | ( ).                                   | _/               | 1. 11                 | 16                                    | ( )                                   | an 7 1981                             |
| SIGNED   | v. pra         | <del></del>      |                           | TIT          | LE             | · · · · · · · · ·                      |                  | ,                     |                                       | DATE                                  | 1,01                                  |
|  |                |                  |                           |              |                |  |                  |                       |                                       | •                                     |                                       |
|  |                |                  |                           |              |                |  |                  |                       |                                       |                                       |                                       |
| \  | 1 4011         | of Pressule      | •                         |              | Casina I       | - Consen                               |                  |                       | <del> </del>                          |                                       | **                                    |
| <u> </u>   |                | _ \              |                           |              |                |  |                  |                       | Choke Siz                             | • \                                   | · <del></del>                         |
|  |                |                  |                           |              |                |  |                  |                       |                                       |                                       |                                       |

| PILE U.S. O.*. LAND OFFICE OFFICE                  | wi                              | ELL COMPLET                              | ION OR RE        | COMPLETIC         | N REPO            | ORT AND LO                          |                      | 4765                                    |
|--|---------------------------------|--|------------------|-------------------|-------------------|-------------------------------------|----------------------|---|
| I IO. TYPE OF WILL                                 | OII WILL                        | TX 545.                                  | DRY [            | 01454             |                   |                                     | 7. (m)               | Agrico cert Liene                       |
| b. Type of Couple  MEW X WOLL  2. Name of Operator |                                 | Thus DACH                                |                  |                   |                   |                                     |                      | nnzoil State                            |
| ,  | nergy Corpor                    | ation                                    |                  |                   |                   |                                     | Δ                    |   |
| 3. Address of Operator                             |                                 |  |                  |                   |                   | <del></del>                         | L L                  | ld and Foch or Vilneat Lovington (Penn) |
| 4. Lecation of Well                                | ks Building,                    | Midland, T                               | 79701            |                   |                   |                                     | /77/7                | COMMISSION (PENN)                       |
| UNIT CETTERE                                       | LOCATED6                        | 60 , , , , , , , , , , , , , , , , , , , | м ты. <u>We</u>  | st_line A.        | ·198              | 0                                   |                      |   |
| North LINE C.                                      | 18 TW                           |  |                  |                   |                   |                                     | Lea                  |   |
| 8-22-81  | 9-30-81                         |  |                  | - 1               | 3864 ' I          |                                     | 7, UN, <b>e</b> tc./ | 3864 ·                                  |
| 20. retal Depth.                                   | 21. Plug                        | 1,378                                    | Many             | Hiple Compl., H   |                   | Intervals   E                       | •                    | Coble Tools                             |
| 24. Properties in en olga                          | <u>ू र्ट्स में इंटर विका</u>    | : - Top, Bottom, I                       | l'anie           |                   |                   |                                     |                      | 25. Was Directional Euro<br>Made        |
|  | 1,374'(Strawi                   | 1)                                       |                  | ····              |                   |                                     | ·                    | No                                      |
| SWN & Guard  |                                 |  |                  |                   | ·                 |                                     |                      | 7, Was Vell Cored No                    |
| 1 2 8.   |                                 | <del>-</del>                             |                  | Report all string | s set in v        |                                     |                      |   |
| 13-378"  | 54.5#                           | T. DEPTH 5                               |                  | 17½ 11            | 475               | SX CL"C"                            | RECORD               | AMOUNT PULLE                            |
| 8-5/8"   | 24# & 32                        | 1  | ,                | 111               |                   |                                     | ite, 250             | sx CL"H" Neat                           |
| 43"  | 11.6#                           | 11,473                                   |                  | 7-7/8"            |                   | sx Howco L                          |                      |   |
| 29.  |                                 | ER RECORD                                |                  | <del></del>       | 30.               |                                     | TUBING               | PECOED                                  |
| SIZE   | 105                             |  | ACKS CEMEN       | T SCREEN          |                   | SIZE                                | DEPTH SE             |   |
|  |                                 |  |                  |                   |                   | 2-3/8"                              | 11,338'              | NA NA                                   |
| 31. Perforation Becord (                           | interval, size and n            | umber)                                   |                  | 32.               | ACID, S           | HOT, FRACTU                         | RE, CLMENT           | SQUEEZE, ETC.                           |
| 11,336' to<br>21 holes<br>.34" holes               | 11,374'                         |  | •                | 11,336            | to 11 to 11 to 11 | 1,374 250<br>1,374 250<br>1,374 500 | gals 15<br>O gals 1  | 5% DS-30<br>5% NEFE & 10,000            |
| 33.  |                                 |  |                  | ODUCTION          |                   |                                     |                      |   |
| Date Parel Production 1-6-82                       |                                 | on Method <i>(Flawin</i><br>od Pump      | ig, gas líft, pi | mping - Size a    | nd type pi        | imp)                                | i                    | itatus (Prod. or Škut-in)<br>UCING      |
| Dote of Test                                       | Hours Tested                    | Choke Size                               | Prod'n, For      | OII - Bbl.        | Ga:               | s = MCF                             | Water - Bbl.         | Gos - Oil Rotto                         |
| 3-9-82   | 24                              | NA J                                     | Test Period      | 60                |                   | 160                                 | .0                   | 2667                                    |
| Flow Tubing Press.                                 | Casiny Pressure                 | How Rate                                 | Oil Hbl.         | Gas —             | MC1               | Woter - E                           |                      | Oil Gravity - API (Corr.) 43°           |
| Sold   | sold, used for fuel,            | vented, etc.)                            |                  |                   |                   |                                     | Test Witness         | •                                       |
| 35. List of Attachments                            |                                 |  |                  | <del></del>       |                   |                                     | James                | Stewart                                 |
| 36. Thereby certify that                           | the information sho             | un on both sides o                       | f this form is   | true and comple   | te to the         | hest of righnou                     | oledge and b         | cliej.                                  |
| SIGNED LOS   | $n \stackrel{\checkmark}{\sim}$ | Jaudis                                   | CA TITLE         | Engineer          | <u> </u>          |                                     | . DATE               | 3-26-82                                 |
| 1 0011114 100111111 12-1                           |                                 |  | • • •            | •                 |                   |                                     |                      |   |
| . CERTIFICATE                                      | OF COMPLIAN                     | CE                                       |                  |                   |                   | OIL CONSE                           | RVATION              | DIVISION                                |
|  |                                 |  |                  |                   |                   | _ ∆PR                               | 1 1992               | . 19                                    |
| I hereby critify th                                | nat the rules end               | regulations of th                        | o Oll Conse      | rvation   AP      | PROVE             |                                     | 11104                |   |

|   |   | 4.15 |     |      | , - |      |
|---|---|------|-----|------|-----|------|
| 1 | 1 |      | Con | 1111 |     | 11/4 |

| 147 11 27                               | , (  | Company or Ope  | erator)  |                     |  |  | 33. , e 18.  | (Lease  | )                |   |  |
|---|--|---|--|---------------------|--|--|--|---|------------------|---|--|
| Well No                                 |  | , in  | ¼ of   | ?<br>               | .1/4, of Sec   | ) (1)<br>1                                       | , T  | for"  | , R              | , , , , , , , , , , , , , , , , , , ,   |  |
| Ç, 144 t                                |  |   |  |                     | Pool   | <b>.</b>   | <i>127</i> 5   |   |                  | Count                                   |  |
| Well is                                 | <b>300</b>   | feet from.  | Berth  |                     | lin  | e and  | 3374   | feet fro                                      | om               | li,                                     |  |
|   | 3 () 3 ( ) ( ) ( ) ( ) ( ) ( ) ( )   | -   |  |                     |  |  |  |   |                  | •                                       |  |
| Deilling Con                            | manaad   | November  | • 3  | <i>011</i> <b>u</b> | 10 SZ  | Drilling   | was Completed  | [mob  | ,} <u>}</u>      | , 19                                    |  |
| Drining Con                             | Ilina Contract   |   | bre Deti   | Jjv                 | g Comp   |  | , was Completed  |   |                  | , 17                                    |  |
| vame of Di                              | ining Contract   | .or   | Tolan, (   | λ <sub>ε</sub> "]   | tions.   | ****-  |  | •••••••                                       |                  | *************************************** |  |
| Address                                 |  | Terriols<br>Vyvvog vog  | <del>Tivor</del>   | 3/4                 | 1971   | ··········                                       |  |   |                  | e kept confidential un                  |  |
| Elevation abo                           | ove sea level at   | LTop of Tubi  | ng Head<br>10  | ••••••              |  | ••••••   | The in   | formation give                                | n is to b        | e kept confidential un                  |  |
| *************************************** |  |   | , 13   |                     |  |  |  |   |                  |   |  |
|   | 53 606   |   | n an effective   |                     | IL SAND  |  |  |   |                  |   |  |
| No. 1, from                             | 11.52.50   |   | 13,33<br>to  | O                   |  | No. 4,   | from   |   | to               |   |  |
| No. 2, from                             |  | 1   | 0  | •••••               |  | No. 5,   | from   | ······  | to               |   |  |
|   |  |   |  |                     |  |  |  |   |                  |   |  |
| ·                                       |  |   |  |                     |  |  |  |   |                  |   |  |
|   | _  |   |  |                     | RTANT V  | -  |  |   |                  |   |  |
|   | Mana.  |   | d elevation to   |                     |  |  |  |   |                  |   |  |
| •                                       |  |   |  |                     |  |  |  |   |                  |   |  |
|   |  |   |  |                     |  |  |  |   |                  |   |  |
| No. 3, from                             | •  |   | <b>t</b> o   | •••••               | •  | •  | •  | feet  | ••••••           |   |  |
| No. 4, from.                            |  |   | to   |                     | ·····  |  |  | feet  | ••••             |   |  |
|   |  |   |  |                     | CASING   | RECOR  | en.  |   |                  |   |  |
| <del></del>                             | WEIGH'   | T NEW   | or   |                     | <del></del>  | D OF   | CUT AND  |   |                  |   |  |
| SIZE                                    | PER FOO  |   |  | UNT                 | Si   | loe<br>  | PULLED FROM  | PERFORATIONS                                  |                  | PURPOSE                                 |  |
| 1 25 "                                  |  |   | 33   |                     | Em-25  |  | 11:05  | , (oc. *)                                     |                  | mileon Rodin                            |  |
| <del>3 4 /8+</del>                      | <del>ीक्ष के 3.8</del>   | \$ 15 m   | 508  | .5 `                | Contract of the Contract of th |  | (4.55%)  | N 11 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3      | C .              | A I b C d - produces                    |  |
| <del>8-5/8"</del><br>5-3 <b>/</b> 8"    | 10 to 3 to 3 to 3 to 3 to 3 to 3 to 3 to   | See a see a | 50kl<br>650  |                     | Pares.   |  | क्यर हैं<br>अस्त्रह  | *010<br>11,205 ~                              | 33<br>111955     | La Stoppen<br>Windhigh Sorth            |  |
| <del>8-8/8#</del><br>5-3/8*             | 3 .55 /  |   | بنديا  |                     |  |  |  | 1010<br>111,205 =                             | 3361L<br>8       | i de Sternen<br>19 de détant Sangt      |  |
| <del>8-5/8#</del><br>5-3 <del>/8*</del> | 3 .55 /  |   | 656  | 3,7                 | <u> इंग्लिस</u>  |  | Bons   | *012<br>(11,296 ~                             | 3301L            | 112 Strawe<br>112 Inchieu Serin         |  |
|   | 177  | Text  | 656)<br>MUDI   | DING                | LORAND CE  | MENT   |  | *019<br>(11,296 2                             | 1<br>35631.<br>8 | Lit Strain<br>Milation Syste            |  |
| SIZE OF HOLE                            | 3 .55 /  |   | 656  | DING                | LORGA<br>AND CE  |  | Bend<br>NG RECORD  | MUD<br>BRAVITY                                | 350.L<br>8       | AMOUNT OF MUD USED                      |  |
| SIZE OF                                 | SIZE OF  | WHERE   | MUDI<br>No. SACK<br>OF CEMEN   | DING                | AND CE   | EMENTI<br>ETHOD<br>USED                          | Bene  NG RECORD  | MUD<br>PRAVITY                                | 32010            | AMOUNT OF                               |  |
| SIZE OF                                 | SIZE OF  | WHERE   | MUDI<br>No. SACK<br>OF CEMEN   | DING                | AND CE   | EMENTI<br>ETHOD<br>USED                          | NG RECORD  | MUD<br>GRAVITY                                | 350310           | AMOUNT OF                               |  |
| SIZE OF                                 | SIZE OF CASING   | WHERE   | MUDI<br>No. SACK<br>OF CEMEN   | DING                | AND CE   | EMENTI<br>ETHOD<br>USED                          | Bene  NG RECORD  | MUD<br>GRAVITY                                | 33031.           | AMOUNT OF                               |  |
| SIZE OF                                 | SIZE OF CASING   | WHERE SET   | MUDI<br>No. SACK<br>OF CEMEN   | DING<br>ST          | AND CE   | EMENTI<br>ETHOD<br>USED<br>POOR                  | NG RECORD  Native Succession  2.7776   | MUD<br>PRAVITY                                | 350310           | AMOUNT OF                               |  |
| SIZE OF                                 | SIZE OF CASING   | WHERE SET   | MUDI<br>No. SACK<br>OF CEMEN   | DING<br>ST          | AND CE   | EMENTI<br>ETHOD<br>USED<br>POOR                  | NG RECORD  | MUD<br>PRAVITY                                | 350310           | AMOUNT OF                               |  |
| SIZE OF HOLE                            | SIZE OF CASING   | WHERE SET   | MUDI  NO. SACK OF CEMEN  3.0 Glas  A.CO Glas | DING                | AND CE   | EMENTI<br>ETHOD<br>USED                          | NG RECORD    Native   Section   Sect | MUD PRAVITY  C.3.  C.3.  CION  treated or sho | 33010            | AMOUNT OF                               |  |
| SIZE OF HOLE                            | SIZE OF CASING   | WHERE SET   | MUDI  No. SACK OF CEMEN  3. O Glas  1. CO  | OF:                 | AND CE   | EMENTI ETHOD USED POOR TOOK TION A or Gals 3.104 | NG RECORD    Mathy of State    | MUD PRAVITY                                   | 33010            | AMOUNT OF                               |  |
| SIZE OF HOLE                            | SIZE OF CASING C | WHERE SET 1999 (Record gals and   | MUDI  NO. SACK OF CEMEN  3: 0 Glass  1: 0  | OF:                 | AND CE   | EMENTI ETHOD USED POOR TOOK TION A or Gals 3.104 | NG RECORD    Native   Parties   Part | MUD PRAVITY                                   | 33010            | AMOUNT OF                               |  |
| SIZE OF HOLE                            | SIZE OF CASING C | WHERE SET   | MUDI  NO. SACK OF CEMEN  3: 0 Glass  1: 0  | OF:                 | AND CE   | EMENTI ETHOD USED POOR TOOK TION A or Gals 3.104 | NG RECORD    Mathy of State    | MUD PRAVITY                                   | 33010            | AMOUNT OF                               |  |
| SIZE OF HOLE                            | SIZE OF CASING C | WHERE SET 1999 (Record gals and   | MUDI  NO. SACK OF CEMEN  3: 0 Glass  1: 0  | OF:                 | AND CE   | EMENTI ETHOD USED POOR TOOK TION A or Gals 3.104 | NG RECORD    Mathy of State    | MUD PRAVITY                                   | 33010            | AMOUNT OF                               |  |
| SIZE OF HOLE  Acidis  Acidis            | SIZE OF CASING 3-5/8" 3 | WHERE SET 3001 hours have have also made gals Reg   | MUDI  NO. SACK OF CEMEN  3.0 Gas  1.00 clas  | OF:                 | AND CE  M  CLUST R  M   EMENTI ETHOD USED TOOK TION A or Gals 3204       | NG RECORD    Mathy of State    | MUD<br>BRAVITY                                | 13000 t.)        | AMOUNT OF MUD USED                      |  |

Deviation Survey, DST

Marie of the miller in miller

The erry centry that the explainable shows we had a sines of this from as they and complete to the first of my bounded, e and besief.

rirus Engineering Secretary

DATE 9-14-82