

30-015-21638

F-23-195-28c

I.T. Properties

D.R.V. STATE #1

Tops

T. SALT - 950'

B. SALT - 1380'

T. S.A. - 2690'

T. GLORIA - 4255'

T. Wolfcamp - 8315'

T. Morrow - 10,810'

* SET 10 SX surface Plug.

* Perforate 5 1/2" casing @ 462'

Squeeze 100' cement Plug
inside + outside 5 1/2" casing. TAG

* Perforate 5 1/2" casing at 2850'. Squeeze 100' cement Plug
inside + outside 5 1/2" casing. TAG

* Perforate 5 1/2" casing at 5766'. Squeeze 100' cement Plug
inside + outside 5 1/2" casing. TAG

* Run + set CIBP w/35' cement at 8766'.

* Run + set CIBP w/35' cement at 10,925'.



= Perfs 8866' - 8902'

* Brine gel between all Plugs



= Perfs 11,025' - 47'

5 1/2" casing

11,553'

T.O.C

6880' Temp. Survey

* Erect dry hole marker

cut + level all pits

cut + remove all Deadmen.

Remove junk from location.
cover + fill in cell.

BEFORE EXAMINER CATANACHI
OIL CONSERVATION DIVISION

OLD EXHIBIT NO. 1

CASE NO: 12459

30-015-21638

F-23-195-28c

I.T. Properties

D.R.V. STATE #1

Tops

T. SALT - 950'

B. SALT - 1380'

T. S.N. - 2690'

T. Gloria - 4255'

T. Wolfcamp - 8815'

T. Morrow - 10,810'

12 3/4" casing
417' circ.

8 5/8" casing
2800'
Toc - 541'
emp. survey

= Perfs 8866' - 8902'

= Perfs 11,025' - 47'

5 1/2" casing
11,553'

Toc.
6880' Temp. Survey

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

State of New Mexico
Energy, Minerals and Natural Resources Department

RECEIVED
Form C-104
Revised 1-1-89
See Instructions
at Bottom of Page

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

OIL CONSERVATION DIVISION

RECEIVED
Santa Fe, New Mexico 87504-2088

JAN 15 '91

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

O. C. D.
ARTESIA, OFFICE

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

| | |
|---|--------------|
| Operator I. T. Properties | Well API No. |
| Address 3502 Yachtclub Ct., Arlington, Texas 76016 | |
| Reason(s) for Filing (Check proper box) New Well <input type="checkbox"/> Change in Transporter of: <input type="checkbox"/> Other (Please explain) <input checked="" type="checkbox"/> TA Recompletion <input type="checkbox"/> Oil <input type="checkbox"/> Dry Gas Change in Operator <input checked="" type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/> | |
| If change of operator give name and address of previous operator DeKalb Energy Company, 1625 Broadway, Denver CO 80202 | |

II. DESCRIPTION OF WELL AND LEASE

| | | | | |
|--|---------------|--|--|-----------------------|
| Lease Name DHY State <u>TX</u> | Well No. 1 | Pool Name, Including Formation <u>H. W. Winchester Wellcamp</u> | Kind of Lease State, Federal or Fee | Lease No. NM-00059 |
| Location Unit Letter <u>F</u> : <u>1980</u> Feet From The <u>NORTH</u> Line and <u>1980</u> Feet From The <u>WEST</u> Line Section <u>23</u> Township <u>19</u> Range <u>28 East</u> , NMPM, Eddy County | | | | |

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

| | | |
|--|--|--------------------------|
| Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> <u>Narado Ref. Co.</u> | Address (Give address to which approved copy of this form is to be sent) <u>Box 159 Artesia, NM 88212</u> | |
| Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> <u>EL Paso Natural Gas Company</u> | Address (Give address to which approved copy of this form is to be sent) <u>PO Box 1492, EL Paso, Texas 79978</u> | |
| If well produces oil or liquids, give location of tanks. Unit <u>F</u> Sec. <u>23</u> Twp. <u>19</u> Rge. <u>28</u> | Is gas actually connected? <u>yes</u> | When? <u>12-16-76</u> |

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

| | | | | | | | | |
|------------------------------------|-----------------------------|----------|-----------------|----------|--------|-------------------|------------|------------|
| Designate Type of Completion - (X) | Oil Well | Gas Well | New Well | Workover | Deepen | Plug Back | Same Res'v | Diff Res'v |
| Date Spudded | Date Compl. Ready to Prod. | | Total Depth | | | P.B.T.D. | | |
| Elevations (DF, RKB, RT, GR, etc.) | Name of Producing Formation | | Top Oil/Gas Pay | | | Tubing Depth | | |
| Perforations | | | | | | Depth Casing Shoe | | |

TUBING, CASING AND CEMENTING RECORD

| | | | |
|-----------|----------------------|-----------|--------------|
| HOLE SIZE | CASING & TUBING SIZE | DEPTH SET | SACKS CEMENT |
| | | | |
| | | | |
| | | | |

V. TEST DATA AND REQUEST FOR ALLOWABLE

OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours.)

| | | | |
|--------------------------------|-----------------|---|------------|
| Date First New Oil Run To Tank | Date of Test | Producing Method (Flow, pump, gas lift, etc.) | |
| Length of Test | Tubing Pressure | Casing Pressure | Choke Size |
| Actual Prod. During Test | Oil - Bbls. | Water - Bbls. | Gas- MCF |

GAS WELL

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

VI. OPERATOR CERTIFICATE OF COMPLIANCE

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

Signature
K. W. Chen

Printed Name
K. W. Chen

Title

Date
January 7, 1991

Telephone No.
(817) 572-3915

OIL CONSERVATION DIVISION

MAR - 4 1991

Date Approved

By
M. A. Williams

Title
SUPERVISOR, DISTRICT II

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

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

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

OIL CONSERVATION DIVISION

2040 Pacheco St.
Santa Fe, 87505

WELL API NO.

30-015-21638

5. Indicate Type of Lease

STATE ☒

FEE ☐

6. State Oil & Gas Lease No.

NM-00059

7. Lease Name or Unit Agreement Name

DHY STATE #1

8. Well No.

1

9. Pool name or Wildcat

Wotcamp/Morrow

SUNDRY NOTICES AND REPORTS ON WELLS
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE 'APPLICATION FOR PERMIT' (FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well:

OIL
WELL ☐

GAS
WELL ☒

OTHER

2. Name of Operator

I.T. Properties

3. Address of Operator

3502 Yachtclub Ct., Arlington, TX, 76016

4. Well Location

Unit Letter F : _____ Feet From The _____ Line and _____ Feet From The _____ Line

Section

23

Township

19S

Range

28E

NMPM

Eddy

County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)

11.

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐

PLUG AND ABANDON ☐

TEMPORARILY ABANDON ☐

CHANGE PLANS ☐

PULL OR ALTER CASING ☐

OTHER: _____ ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☒

ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐

PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

OTHER: _____ ☐

12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

11/20/95 Rig up, Remove tubing & packer. Redress. Found 6 holes in tubing. Replace same. R1# tubing and packer. Rerun packer leakage test. OK. RD.
12/10/95 Keltie Services run test & submit report.

RECEIVED

SEP 19 1996

OIL CON.

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

SIGNATURE

H.W. Chen

TITLE

President

DATE

9/16/96

TYPE OR PRINT NAME

H.W. CHEN

TELEPHONE NO. 817-572-3915

(This space for State Use)

APPROVED BY

Randy Smith

TITLE

Deputy Oil & Gas Inspector

DATE

10-6-96

CONDITIONS OF APPROVAL, IF ANY:

Hebert, Lyn

From: Stubblefield, Mike
Sent: Monday, June 12, 2000 10:43 AM
To: Hebert, Lyn
Subject: RE: Wells to be plugged

LYN,

THE LEGAL LOCATION FOR THE I.T. PROPERTIES DHY ST. #1
IS F-23-19S-28E.

MIKE S.

From: Hebert, Lyn
Sent: Friday, June 09, 2000 4:24 PM
To: Stubblefield, Mike
Subject: Wells to be plugged

Mike, I'm starting to work on the paperwork for the 2nd group of wells. That hearing should be either July 13 or July 27, probably the 27th. Anyway, I could not find a well location of the I. T. Properties well, API # 30-015-21638, F-23-19-28 DHY State #1. Do you have that information? Thank you.

3/19/99 TT

Carroll, Rand

From: Stubblefield, Mike
Sent: Friday, March 19, 1999 11:23 AM
To: Carroll, Rand
Subject: SHOW CAUSE HEARING

3-19-99

I.T. PROPERTIES
3502 YACHCLUB CT
ARLINGTON, TEXAS
76106

①

RE: 30-015-21638
F-23-19-28 DHY STATE #1

DEAR RAND CARROLL,

ON OCTOBER 30, 1996 THE DHY STATE #1 A DUAL GAS WELL COMPLETION FAILED A SCHEDULED PACKER LEAKAGE TEST. A REPAIR LETTER WAS SENT TO THE OPERATOR FOLLOWING THE PACKER LEAKAGE TEST FAILURE AND REPAIR OF WELL WAS REQUESTED WITHIN 30 DAYS. JULY 9, 1998 I CALLED AND TALKED TO MR. WENDLE CHEW AND REQUESTED WELL BE REPAIRED. DECEMBER 4, 1998 I SENT I.T. PROPERTIES A CERTIFIED LETTER REQUESTING WELL BE REPAIRED OR PROPERLY TEMPORILY ABANDONED. THIS CERTIFIED LETTER WAS NOT EXCEPTED AND WAS RETURNED TO ME. JANUARY 7, 1999 I CALLED MR. WENDLE CHEW AND INFORMED HIM THAT THE PERIOD TO RUN PACKER LEAKAGE TEST ON DUAL GAS COMPLETIONS HAD ENDED OCTOBER 15, 1998 AND WE HAD NOT RECEIVED INFORMATION OF ANY PACKER LEAKAGE TEST RUN ON THE WELL. HE STATED HE HAD NOT REPAIRED THE WELL AND THEREFORE DID NOT RUN PACKER LEAKAGE TEST. I INFORMED MR. CHEW THAT THE WELL NEEDED TO BE REPAIRED OR PROPERLY ABANDONED IN COMPLIANCE WITH RULE 201 B. I GAVE HIM UNTIL JANUARY 28, 1999 TO START REPAIR. THIS WELL HAS BEEN INSPECTED AT DIFFERENT TIMES AND WAS SHUT-IN WAITING ON REPAIR. I SHOW LAST PRODUCTION FOR THE DHY ST. #1 ON ONGARD TO BE OCTOBER 10, 1997. I BELIEVE THAT DUE TO THE FAILURE OF INTERGITY IN THE WELLBORE THAT THERE MAY BE UNAUTHORIZED COMMINGLING DOWNHOLE AND UNNECESSARY WASTE OF RESERVOIR ENERGY. TO PREVENT WASTE AND PROTECT CORRELATIVE RIGHTS I RECOMMEND THAT THE DHY STATE #1 BE PROPERLY PLUGGED AND ABANDONED.

SINCERELY,

MIKE STUBBLEFIELD FIELD REP. 2

OIL AND GAS PRODUCERS

| FIELD & RESERVOIR | COUNTY | Number of | | APPROXIMATE MONTHLY | |
|---|----------|-----------|--------|--------------------------------------|---------|
| | | Wells | Leases | PRODUCTION - NEW MEXICO Oil-Bbls. | Gas-MCF |
| HUFF, JACK | | | | | |
| MIDLAND, TX 79710-0190, Box 50190; 915 683-9231; Fax 915 683-9255; Owner Jack Huff; Opns. Mgr. Chris Huff; Off. Mgr. Nancy Roys. | | | | | |
| SE Oil | | | | | |
| Eumont Yates-Seven Rivers- Queen | Lea | 1 | 1 | 163 | 1.335 |
| SE Gas | | | | | |
| Eumont Yates-Seven Rivers-Queen | Lea | 2 | 1 | — | 11.291 |
| Jalmat Tansill Yates- Seven Rivers | Lea | 1 | 1 | — | 3.760 |
| HUNT OIL COMPANY | | | | | |
| DALLAS, TX 75202, 1445 Ross at Field; 214 978-8000; Fax 214 978-8888. MIDLAND, TX 79702, Box 1350; 915 684-8093; Fax 915 684-0652. | | | | | |
| SE Gas | | | | | |
| Antelope Ridge-Atoka | Lea | 1 | 1 | 10 | 7.255 |
| Antelope Ridge-Morrow | Lea | 1 | 1 | 10 | 7.255 |
| Foor Ranch-Pre Permian | Chaves | 1 | 1 | — | 21.471 |
| Foor Ranch-Wolfcamp | Chaves | 1 | 1 | 1 | 3.165 |
| Frontier Hills-Strawn | Eddy | 1 | 1 | 34 | 24.418 |
| I T PROPERTIES | | | | | |
| ARLINGTON, TX 76013, 3214 W. Park Row. | | | | | |
| SE Gas | | | | | |
| Siegest Draw, Wolfcamp | Eddy | 1 | 1 | — | 81 |
| J C WELL SERVICE | | | | | |
| FARMINGTON, NM 87499, Box 51 | | | | | |
| NW Oil | | | | | |
| Salt Creek-Dakota | San Juan | 7 | 2 | 506 | — |
| Verde-Gallup | San Juan | 8 | 1 | 32 | — |
| J D R LTD. | | | | | |
| ARTESIA, NM 88210, 811 Bullock Ave. | | | | | |
| SE Oil | | | | | |
| Empire Yates-Seven Rivers | Eddy | 18 | 1 | 130 | — |
| J & G ENTERPRISES LTD., CO. | | | | | |
| ARTESIA, NM 88211-0100, Box 100; 505 746-9680. | | | | | |
| SE Oil | | | | | |
| Airstrip, North- Bone Spring | Lea | 1 | 1 | — | — |
| Scharb-Bone Springs | Lea | 3 | 1 | — | — |
| Scharb-Wolfcamp | Lea | 1 | 1 | — | — |
| JPH OIL PRODUCERS | | | | | |
| HOBBS, NM 88241, Box 755. | | | | | |
| SE Oil | | | | | |
| Bagley, North-Permo Pennsylvanian | Lea | 7 | 6 | 696 | 1.257 |

3502 Yachtclub Ct
760116

817/572-3915
478-9257

I. T. PROPERTIES
3502 Yachtclub Ct.
Arlington, Texas 76016
(817) 572-3915; Fax (817) 478-1925

November 17, 1992

Ms. Dianne Richardson
Oil Conservation Division
P. O. Box 2088
Santa Fe, New Mexico 87501

Re: Double SS #1, Unit N Sec 26, T24, R36E
Double SS #2, Unit C Sec 35, T24, R36E

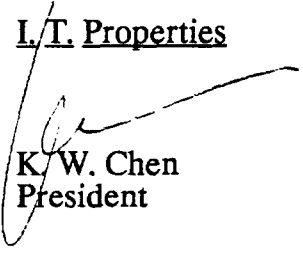
Dear Ms. Richardson,

Enclosed please find an origianl blanket bond for State of New Mexico.

Please inform your Hobbs District Office so that they can issue the C104 to us as soon as possible.

Very truly yours,

I. T. Properties



K. W. Chen
President



November 16, 1992

Ms. Diane Richardson
Oil Conservation Commission
P.O. Box 2088
Santa Fe, New Mexico 87501

Re: K.W. Chen DBA: I.T. Properties
Bond No. 58 54 63
Blanket Plugging Bond

Dear Diane:

You should be receiving the captioned bond via overnight mail from Mr. Chen.

It is our understanding that the blanket bond will take the place of all the single well bonds you currently have on file.

We ask that a release be issued to the surety company on the bonds listed below.

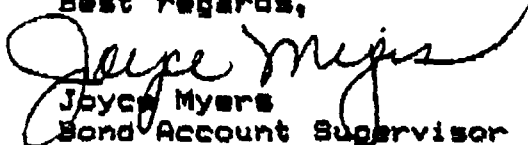
Bond No. B02847 Single well DHY "B" State #1
Bond No. B02848 Single well DHY State I #1
Bond No. B03119 Single well Siegrast State H 1980

We ask also that you copy Mr. Chen on all the releases.

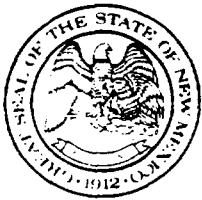
Please let us know if you have any questions.

Thank you for your time and cooperation.

Best regards,


Joyce Myers
Bond Account Supervisor

cc: Mr. Wendell Chen
I.T. Properties



STATE OF NEW MEXICO
ENERGY, MINERALS AND NATURAL RESOURCES DEPARTMENT

OIL CONSERVATION DIVISION

November 17, 1992



BRUCE KING
GOVERNOR

ANITA LOCKWOOD
CABINET SECRETARY

POST OFFICE BOX 2088
STATE LAND OFFICE BUILDING
SANTA FE, NEW MEXICO 87504
(505) 827-5800

I. T. Properties
3502 Yachtclub Ct.
Arlington, Texas 76016

Attention: K. W. Chen

Re: \$50,000 Blanket Plugging Bond
K. W. Chen, dba I. T. Properties,
Principal
Gulf Insurance Co., Surety
Bond No. 58 54 63

Dear Mr. Chen:

The Oil Conservation Division hereby approves the above-referenced
plugging bond effective this date.

Sincerely,

William J. Lemay
WILLIAM J. LEMAY,
Director

dr/

cc: Oil Conservation Division
Hobbs, Artesia, Aztec

Burk Luebbehusen Ray & Co.
300 Oil & Gas Building
Fort Worth, Texas 76102



IMPORTANT NOTICE

To obtain information or make a complaint:

You may contact your Agent.

You may call Gulf Group's toll-free telephone number for information or to make a complaint at

1-800-241-7034

You may contact the Texas Department of Insurance to obtain information on companies, coverages, rights or complaints at

1-800-252-3439

You may write the Texas Department of Insurance

P.O. Box 149104

Austin, TX 78714-9104

FAX # (512) 475-1771

PREMIUM OR CLAIM DISPUTES:

Should you have a dispute concerning your premium or about a claim you should contact the agent or the company first. If the dispute is not resolved, you may contact the Texas Department of Insurance.

ATTACH THIS NOTICE TO YOUR POLICY: This notice is for information only and does not become a part or condition of the attached document.

AVISO IMPORTANTE

Para obtener informacion o para someter una queja:

Puede comunicarse con su Agente.

Usted puede llamar al numero de telefono gratis de Gulf Group para informacion o para someter una queja al

1-800-241-7034

Puede comunicarse con el Departamento de Seguros de Texas para obtener informacion acerca de companias, coberturas, derechos o quejas al

1-800-252-3439

Puede escribir al Departamento de Seguros de Texas

P. O. Box 149104

Austin, TX 78714-9104

FAX # (512) 475-1771

DISPUTAS SOBRE PRIMAS O RECLAMOS: Si tiene una disputa concerniente a su prima o a un reclamo, debe comunicarse con el agente o la compania primero. Si no se resuelve la disputa, puede entonces comunicarse con el departamento (TDI).

UNA ESTE AVISO A SU POLIZA: Este aviso es solo para proposito de informacion y no se convierte en parte o condicion del documento adjunto.

EXPRESS

1178366070

QUESTIONS? CALL 800-238-5365 TOLL FREE

AIRBILL
PACKAGE
TRACKING NUMBER

1178366070

RECIPIENT'S COPY

| | | | |
|--|--|--|--|
| From (Your Name) Please Print | | Date | |
| Your Phone Number (Very Important) | | To (Recipient's Name) Please Print | |
| Company | | Company | |
| Street Address | | Exact Street Address (We Cannot Deliver to P.O. Boxes or P.O. Zip Codes) | |
| City | | City | |
| State | | State | |
| ZIP Required | | ZIP Required | |
| Department/Floor No. | | Department/Floor No. | |
| Your Internal Billing Reference Information (First 24 characters will appear on invoice) | | If Hold for Pick-Up, Print FedEx Address Here | |
| Payment 1 <input type="checkbox"/> Bill Sender 2 <input type="checkbox"/> Bill Recipient's FedEx Acct. No. 3 <input type="checkbox"/> Bill 3rd Party FedEx Acct. No. 4 <input type="checkbox"/> Bill Credit Card | | City | |
| 5 <input type="checkbox"/> Cash/Check | | State | |
| 6 <input type="checkbox"/> Check | | ZIP Required | |
| 7 <input type="checkbox"/> SERVICES (Check only one box) | | 8 <input type="checkbox"/> DELIVERY AND SPECIAL HANDLING (Check services required) | |
| 9 <input type="checkbox"/> Priority Overnight (Delivery by next business morning) | | 10 <input type="checkbox"/> Standard Overnight (Delivery by next business afternoon) | |
| 11 <input type="checkbox"/> YOUR PACKAGING | | 12 <input type="checkbox"/> YOUR PACKAGING | |
| 13 <input type="checkbox"/> FEDEX LETTER | | 14 <input type="checkbox"/> FEDEX LETTER | |
| 15 <input type="checkbox"/> FEDEX PAK * | | 16 <input type="checkbox"/> FEDEX PAK * | |
| 17 <input type="checkbox"/> FEDEX BOX | | 18 <input type="checkbox"/> FEDEX BOX | |
| 19 <input type="checkbox"/> FEDEX TUBE | | 20 <input type="checkbox"/> FEDEX TUBE | |
| 21 <input type="checkbox"/> ECONOMY (Two-Day Delivery by next business day) | | 22 <input type="checkbox"/> ECONOMY (Two-Day Delivery by next business day) | |
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| 97 <input type="checkbox"/> FEDEX TUBE | | 98 <input type="checkbox"/> FEDEX TUBE | |
| 99 <input type="checkbox"/> FEDEX TUBE | | 100 <input type="checkbox"/> FEDEX TUBE | |

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