District I

1625 N. French Dr., Hobbs, NM 88240

District II

Date:

03/23/2006

Phone:

(505)394-2581

State of New Mexico Energy, Minerals & Natural Resources

Form C-104 Reformatted July 20, 2001

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1301 W. Grand Avenue, Artesia, NM 88210 Oil Conservation Division District III 1000 Rio Brazos Rd., Aztec, NM 87410 1220 South St. Francis Dr. District IV Santa Fe, NM 87505 ☐ AMENDED REPORT 1220 S. St. Francis Dr., Santa Fe, NM 87505 REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT ² OGRID Number 19797 ¹ Operator name and Address Yale E. Key, Inc. dba Key Energy Services, Inc. ³ Reason for Filing Code/ Effective Date Sale Skim Oil-03/23/2006 2006 162 BBLS ⁶ Pool Code ⁵ Pool Name ⁴ API Number 96121 SWD San Andres 30 - 025-10500 ⁹ Well Number ⁷ Property Code ⁸ Property Name Christmas SWD-606 28410 ¹⁰ Surface Location East/West line North/South Feet from the County Ul or lot no. Section Township Range Lot.Idn Feet from the **22S** 330 ft. Line 2310 East Lea 28 37E North 11 Bottom Hole Location UL or lot Lot Idn | Feet from the | North/South line | Feet from the | East/West line Section Township Range County no. 15 C-129 Permit Number ¹⁶ C-129 Effective Date ¹⁷ C-129 Expiration Date 12 Lse Code 13 Producing Method **Gas Connection** Code Date III. Oil and Gas Transporters ²² POD ULSTR Location ¹⁹ Transporter Name 20 POD 21 O/G ¹⁸ Transporter and Description **OGRID** and Address JENEX OPERATING COMPANY 215019 2816488 **PO BOX 308** HOBBS NM 88241-0308 IV. Produced Water ²³ POD ²⁴ POD ULSTR Location and Description V. Well Completion Data 25 Spud Date 26 Ready Date ²⁷ TD 28 PBTD ²⁹ Perforations 30 DHC, MC 31 Hole Size 32 Casing & Tubing Size 33 Depth Set 34 Sacks Cement VI. Well Test Data 35 Date New Oil 36 Gas Delivery Date 37 Test Date 38 Test Length 39 Tbg. Pressure 40 Csg. Pressure ⁴³ Water 44 Gas 41 Choke Size 42 Oil 45 AOF 46 Test Method ⁴⁷ I hereby certify that the rules of the Oil Conservation Division have OIL CONSERVATION DIVISION been complied with and that the information given above is true and complete to the best of my knowledge and belief. Signature: Approved by: Title: Printed name: RHONDA PASCHAL OC FIELD REPRESENTATIVE IVSTAFF MANAGER Title: Approval Date: Clerk