Submit 3 Copies To Appropriate District	State of New Mexico			Form C-103		
Office <u>District I</u>	Energy, Mineral	s and Nat	ural Resources	WELL API NO	May 27,	, 2004
1625 N. French Dr., Hobbs, NM 88240 District II	OIL CONSERVATION DIVISION			30-025-34734		
1301 W. Grand Ave., Artesia, NM 88210	1220 South St. Francis Dr.			5. Indicate Type of Lease		
District III 1000 Rio Brazos Rd., Aztec, NM 87410	Santa Fe, NM 87505			6. State Oil & C	FEE X	——
<u>District IV</u> 1220 S. St. Francis Dr., Santa Fe, NM	Salita 1	·C, 14141 C	7505	o. State Oil & C	ias Lease No.	
87505	CONTRACTOR (NY XY (F) Y		7 Jase Nome	or Unit Agraement No	
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				7. Lease Name or Unit Agreement Name PICAYUNE		
PROPOSALS.) 1. Type of Well: Oil Well X Gas Well Other				8. Well Number 1		
2. Name of Operator Capataz Operating, Inc.				9. OGRID Number 03659		
3. Address of Operator P.O. Box 10549, Midland, TX 79702				10. Pool name or Wildcat House;Blinebry, H Tubb, H Drinkard, H Abo		
4. Well Location	177.77.02			House, Dimeor	, II I uoo, II Diilika	14, 11
	1980feet from the	South	line and	980feet fr	om the East	line
Section 11	Township 20		ange 38E	NMPM	CountyLea	
	11. Elevation (Show w	hether DI	R, RKB, RT, GR, etc	.)		
Pit or Below-grade Tank Application o	3575' GR					
Pit typeDepth to Groundw		earest fresh	water well Dis	stance from nearest su	rface water	
Pit Liner Thickness: mil				onstruction Material_		
	Appropriate Box to I		Jature of Notice	Report or Other	r Data	
		ildicate i				
	ITENTION TO:	. —		SEQUENT RE		. 🗂
PERFORM REMEDIAL WORK	PLUG AND ABANDOI CHANGE PLANS	N 🗆	REMEDIAL WOR	ak ⊔ BILLING OPNS.□	ALTERING CASING P AND A	' L.
TEMPORARILY ABANDON DULL OR ALTER CASING	MULTIPLE COMPL		CASING/CEMEN			
	11102111 22 001111 2					r oz 1
OTHER: 13. Describe proposed or comp	lated apprations (Clear	ly state all	OTHER: DHC B	linebry, Tubb, Drin	kard, Abo tes, including estimate	d date
of starting any proposed wo	ork). SEE RULE 1103.	ry state an For Multir	pertinent details, and ble Completions: A	ttach wellbore diag	ram of proposed comp	letion
or recompletion.		· · ·	•	_		
	·					
Pool Names: House; Blinebry S, BLINEBRY 5962-63,72-73,6004-	House; Tubb, House; D	rinkard, l	House; Abo 24-25 33-35 40-43 .	& 6151-56' 1 isnf		
TUBB 6728-31,38-40,49-51	,54-56,61-76,80-82 & 6	778-86' 4	jspf	or or or a jopa		
DRINKARD 7051-55, 65-67, 72-7	6 & 7078-90' 1 jspf			1 55 56 61		
ABO 7346-48,54.5,71,82,8	4-90,7426-28,34-38,50- 610-16,36-40,42-44,54-5	51,55-64,7 58.63-65.7	2-76,7501,3-8,10-1 5 & 7586-92' 1 ispi	4,55-56,61, f	·	
0+-00,01-03,23-27,7					,	
The allocation method will be as for Oil Alloc% Gas A		x 47 MC	F x 55 BW			
Blinebry 8 36 13	28 15 27					
Tubb 12,5 57 31	66 40 73		•	· 6		
Drinkard 0 0 3 Abo 1.5 7 0	0 0 0 0 <u>0</u> 0					
Abo $\frac{1.5}{22} \frac{5.7}{100} \frac{0}{47} \frac{0}{10}$	$\frac{0}{00}$ $\frac{0}{55}$ $\frac{0}{100}$		No.			
					•	
Downhole commingling will no recommend to the commingling will not recommend to the comming will not rec	luce the value of the pool	ls.		DHC Order No.	376b	
Thereby certify that the information	above is true and comple	te to the h	est of my knowledg			elow-
I hereby certify that the information grade tank has been will be constructed or	closed according to NMOCD	guidelines [], a general permit [or an (attached) altern	native OCD-approved plan	ı 🔲.
SIGNATURE	·	TITLE Ag			DATE 07/26/2006	
<u> </u>				-	.1	0000
Type or print name H. Scott Davis	1	E-mail ac	ldress:Capataz1@sl	beglobal.net T	elephone No. (432)620	
For State Use Only				PACKALES MANAGE	* NOV 222	2006
APPROVED BY:	v. Wink of	GFHEED R	EPRESENTATIVE I	No com a ser	_DATE	_
Conditions of Approval (if any):						