	INITE	D STATES			FC	ORM APPROVED		
Fc.m 3160-5 (August 1999)		OF THE INTERIOR	. OCD-HOE	L C		1B NO. 1004-0135 s: November 30, 2000		
	BUREAU OF LA	ND MANAGEMEN		0 (L) (C)	5. Lease Seri			
SUNDRY NOTICES AND REPORTS ON WELLS					NM 14164 V			
	Do not use this form for abandoned well. Use For				6. If Indian, A	Allottee or Tribe Name		
	SUBMIT IN TRIPLICATE -	Other instructions	on reverse side	<u> </u>	7. If Unit or (	CA/Agreement, Name and	/or No.	
					• • • • • • •			
	Gas Well Other				8. Well Name CR "8" FEI	e and No. DERAL #2 1		
2. Name of Operator Chevron Mil	DCONTINENT, L.P.				9. API Well 1	No		
3a. Address			3b. Phone No. (include ar	ea code)	30-025-37	047		
15 Smith Roa			432-687-7375			Pool, or Exploratory Area A; MORROW (GAS)	1 -	
	Footage, Sec., T., R., M., or Survey L N 8, T-24S, R-35E	Description			CINIA RUJA	A; MORROW (GAS)		
990' FNL, 13					11. County of LEA	r Parish, State		
12.	CHECK APPROPRIATE	BOX(ES) TO IND	ICATE NATURE OF	NOTICE, REP	ORT, OR OT	HER DATA		
TYPE	OF SUBMISSION		TY	PE OF ACTION	N			
	otice of Intent	Acidize	Deepen	Production	(Start/Resume)	Water Shut-Off		
-		Alter Casing	Fracture Treat	Reclamatio	n	Well Integrity		
Su	bsequent Report	Casing Repair	New Construction	Recomplet	ie i	Other		
Fi	nal Abandonment Notice	Change Plans	Plug and Abandon	Temporari	ly Abandon	······		
Lawrence of the second		Convert to Injection	on 📃 Plug Back	X Water Dis	oosal	<b></b>		
Chevror	is to deepen directionally or recomp nd under which the work will be per pletion of the involved operations. I an completed. Final Abandooment I at the final site is ready for final inspo- n requests approval see attached inform	to dispose o				tops	201 0 1 2 5 6 7 8 9 70 7	
					0 505	Stars?	2	
Any que	estions and/or commo			•	7a @ 505-	-394-1224.		
		Hora	in via e-	mail				
		fr	m operato					
		ory	grand loos	Minh.				
				MI E	1			
				5/1/0	·/			
14. I hereby certify Name (Printed/I	that the foregoing is true and correct <sup>(yped)</sup> BEWNY NAU		Title GAS 0	MEASUR	EMER	+ SPEC.		
Laun			Date 4/	610	7 A	PPROVEL	5	
		S SPACE FOR FED	ERAL OR STATE OF	FICE USE				
Approved by			Title	<u> </u>	I	MAY 1 2007	<b>┿</b> │	
certify that the appli which would entitle	val, if any, are attached. Approval of icant holds legal or equitable title to the applicant to conduct operations to	those rights in the subj	ect lease		Ŵ	ESLEY W. INGRAM		
Title 18 U.S.C. Sect States any false, fict	tion 1001, and Title 43 U.S.C. Section titious or fraudulent statements or rep	on 1212, makes it a crime presentations as to any m	e for any person knowingly matter within its jurisdiction.	and willfully to m	akd to any depa	HOLLOW LNOWL timent or agency of the U	nited	
	GWW							

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Form 3160-5 (August 1999)	-	D STATES OF THE INTERIOR			ОМ	RM APPROVED B NO. 1004-0135
-		ND MANAGEMEN	OCD-HO	BBS	5. Lease Seria	November 30, 2000
	SUNDRY NOTICES	AND REPORTS O			5. Lease Seria NM 14164	11 NO.
	Do not use this form for					llottee or Tribe Name
a	bandoned well. Use Form					
SUE	BMIT IN TRIPLICATE -	Other instructions	on reverse side		7. If Unit or C	A/Agreement, Name and/or No
. Type of Well Oil Well X Gas	s Well Other				8. Well Name CR "8" FED	
. Name of Operator	WITHING 10					
a. Address	NTINENT, L.P.		3b. Phone No. (include a	rea code)	9. API Well N	
	Midland Texas 7970	5	432-687-7375	,	30.025-370 10. Field and	Pool, or Exploratory Area
Location of Well (Footo	age, Sec., T., R., M., or Survey I	Description)				; MORROW (GAS)
UL-B, SECTION 8 990' FNL, 1330'					11. County or	Parish, State
10	CHECK APPROPRIATE					
TYPE OF :	SUBMISSION			PE OF ACTIO	N	
Notice o	of Intent	Acidize	Deepen	Producti	on (Start/Resume)	Water Shut-Off
		Alter Casing	Fracture Treat	Reclama	tion	Well Integrity
Subsequ	aent Report	Casing Repair	New Construction	Recomp	lete	Other
Final Al	bandonment Notice	Change Plans	Plug and Abandon	Tempora	arily Abandon	
		Convert to Injection	n Plug Back	X Water D	isposal	
determined that the	final site is ready for final insp	ection.)				ompleted, and the operator has
14. I hereby certify that t Name (Printed/Typed	the foregoing is true and correct BEWNY NAVI	Ą	Title GAS	Мензи	RE MEN	+ SPEC.
Danna	Mains		Date 4	6/0	27	
	TH	S SPACE FOR FEL	ERAL OR STATE O	FFICÉ USE		
Approved by			Title	_	D	Pate
certify that the applicant	if any, are attached. Approval holds legal or equitable title to applicant to conduct operations	o those rights in the subj			• •	
	1001, and Title 43 U.S.C. Sections or fraudulent statements or re				make to any depar	tment or agency of the United

Water Production & disposal Information

In order to process your disposal request, the following information must be completed:

1. Name of formations producing water on the lease
CINTA ROJA; MORROW (CAS)
2. Amount of water produced from all formations in barrels per day
1-BBL OF WATER PER day
3. Attach a current water analysis of produced water from all zones showing at least the total dissolved solids, ph, and the concentrations of chlorides and sulfates. ( one sample will suffice if the water is commingled )
4. How water is stored on the lease. WATER TANK
5. How water is moved to the disposal facility. TRANSport
6. Identify the Disposal Facility by :
A. Facility operators name. Nabors Will Services L.T.D
B. Name of facility or well name & number. STATE AB SWD Well-#1
C. Type of facility or well (WDW) (WIW) etc. Water Disposal Well
D. Location by 1/4 1/4 section 3 township 195 range 37F.

7. Attach a copy of the State issued permit for the Disposal Facility.

Submit to this office, 414 West Taylor, Hobbs, NM 88240, the above required information on a Sundry Notice 3160-5. Submit 1 original and 5 copies, within the required time frame. (This form may be used as an attachment to the Sundry Notice.) Call me at 505-393-3612 if you need to further discuss this matter.



PHONE (325) 673-7001 • 2111 BEECHWOOD • ABILENE, TX 79603

PHONE (505) 393-2326 + 101 E MARLAND + HOBBS, NM 88240

ANALYTICAL RESULTS FOR ARAPAHOE ATTN: CORY SMITH P.O. BOX 1127 HOBBS, NM 88241 FAX TO: (505) 393-6374

Receiving Date: 03/22/07 Reporting Date: 03/27/07 Project Owner: CHEVRON USA Project Name: PRODUCED WATER TANK Project Location: CR FEDERAL 8 BATTERY Sampling Date: 03/21/07 Sample Type: WATER Sample Condition: COOL & INTACT Sample Received By: LB Analyzed By: HM

		Na	Са	Mg	к	Conductivity	T-Alkalinity
LAB NUMBER	SAMPLE ID	(mg/L)	(mg/L)	(mg/L)	(mg/L)	( <i>u</i> S/cm)	(mgCaCO <sub>3</sub> /L)
ANALYSIS DATE:		03/27/07	03/27/07	03/27/07	03/27/07	03/26/07	03/26/07
H12377-1	PRODUCED WATER	7733	739	153	247	36700	176
	TANK						
Quality Control		NR	47.9	53.2	1.95	1391	NR
True Value QC		NR	50.0	50.0	2.00	1413	NR
% Recovery		NR	95.8	106	97.7	98.4	NR
Relative Percer	nt Difference	NR	5.5	1.5	1.0	0.9	NR
METHODS:		SM	3500-Ca-D	3500-Mg E	8049	120.1	310.1
		CI	SO₄	CO₃	HCO3	pН	TDS
		(mg/L)	(mg/L)	(mg/L)	(mg/L)	(s.u.)	(mg/L)
ANALYSIS DATE:		03/26/07	03/27/07	03/26/07	03/26/07	03/26/07	03/27/07
H12377-1	PRODUCED WATER	13196	809	0.0	215	6.63	24600
	TANK						
Quality Control		490	23.5	NR	854	6.93	NR
True Value QC		500	25.0	NR	1000	7.00	NR
% Recovery		98	94	NR	85.4	99	NR
Relative Percent Difference		0.0	6.2	NR	0.0	0.1	NR
METHODS:	<u> </u>	SM4500-CI-B	375.4	310.1	310.1	150.1	160.1
INETHODS:		SIVI4000-01-D	310,4	510.1	310.1	100.1	100

Morene

03-27-07 Date

PLEASE NOTE: Liability and Damages. Cardinal's liability and client's exclusive remedy for any claim arising, whether based in contract or tort, shall be limited to the amount paid by client for analyses. All claims, including those for negligence and any other cause whatsoever shall be deemed waived unless made in writing and received by Cardinal within thirty (30) days after completion of the applicable service. I have event shall Cardinal be liable for incidental or consequential damages, including, without limitation, business interruptions, loss of use, or loss of profits incurred by client, its subsidiarics, affiliates or successors arising out of or related to the performance of services hereunder by Cardinal, regardless of whether such claim is based upon any of the above-stated reasons or otherwise.