

Submit 3 Copies to Appropriate District
Office
District I
1625 N French Dr., Hobbs, NM 88240
District II
1301 W. Grand Ave., Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM
87505

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
May 27, 2004

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

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)		WELL API NO. 30-025-35954 /
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other <input type="checkbox"/> LPG Storage <input checked="" type="checkbox"/>		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator Western Refining Company, LP		6. State Oil & Gas Lease No.
3. Address of Operator PO Box 1345 Jal, New Mexico 88252		7. Lease Name or Unit Agreement Name State LPG Storage Well /
4. Well Location Unit Letter <u>M</u> : <u>450</u> feet from the <u>South</u> line and <u>780</u> feet from the <u>West</u> line / Section <u>32</u> Township <u>23S</u> Range <u>37E</u> NMPM Lea County		8. Well Number 1 /
11. Elevation (Show whether DR, RKB, RT, GR, etc.)		9. OGRID Number 248440 /
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/>		10. Pool name or Wildcat Salado /
Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____		
Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____		

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input checked="" type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: <input type="checkbox"/>	

13. 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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

The following activities were completed:

1-13-09

Perforated tubing with 80 holes from 1800 ft to 1804 ft.

1-17-09

Perforated tubing with 96 holes from 1796 ft. to 1800 ft.

Well one was put into service after perforating tubing on January 13, 2009. After operating well 1 for the next several days, it was determined that well 1 was not taking enough brine water.

We moved up hole another 4 feet and perforated the tubing between 1796 and 1800 feet. The well was put into service and is currently working within its normal parameters.

Well Diameter

Sonar to 1750 FT. = 29,049.5 Barrels per cubic ft.

Overfill Cavern (Controlled) 6-26-01= 1796 FT. 201,013 barrel per cubic ft.

201,013-29,049.5= 171,963.5 barrels in 46 feet of height.

171,963.5/46 ft= 3,738.34 barrels per cubic ft.

3,738.34 * 5.615= 20,990.779 cubic feet per foot.

RECEIVED

JAN 27 2009

HOBBSOCD

Diameter Calculation

Volume/.785=radius

20,990.7791/.785= sqrt. (26,739.846)=163.523 ft.

Diameter= **81.76 ft.**

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines ☐, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

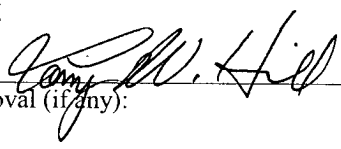
SIGNATURE _____ TITLE Manager DATE 1-27-09

Type or print name Ken Parker

E-mail address: ken.parker@wnr.com

Telephone No. 575-395-2632

For State Use Only

APPROVED BY:  TITLE **DISTRICT 1 SUPERVISOR** DATE **1 JAN 27 2009**
Conditions of Approval (if any):