| •  |  |  |   |  |  |  |  |  |  |  |  |
|--|--|--|---|--|--|--|--|--|--|--|--|
| Form 3160-5<br>(February 2005)   | UNITED STATE<br>ARTMENT OF THE I   |  | (   | OCD Hob  | FORM APPROVED<br>OMB No 1004-0137<br>Expires March 31, 2007  |  |  |  |  |  |  |
|  | EAU OF LAND MAN  |  |   |  | 5. Lease Serial No.<br>NM-33955  |  |  |  |  |  |  |
|  | OTICES AND REPC<br>orm for proposals t<br>Ise Form 3160-3 (A   | o drill or to  | re-enter an   | s.   | 6. If Indian, Allottee or  | Tribe Name   |  |  |  |  |  |
| a de la companya de   | IN TRIPLICATE - Other  |  |   |  | 7. If Unit of CA/Agreen  | nent, Name and/or No.  |  |  |  |  |  |
| 1. Type of Well  |  | /  |   |  | 8. Well Name and No.   |  |  |  |  |  |  |
| Oil Well Gas W   | ell Other  |  |   |  | Beatz "23" No. 1<br>9 API Well No.   | / *  |  |  |  |  |  |
| Fasken Oil and Ranch, Ltd.<br>3a Address   |  | 3b. Phone No. (  | unclude area cou  | de)  | 30-025-26414 10. Field and Pool or Ex  | kploratory Area  |  |  |  |  |  |
| 303 West Wall St , Suite 1800, Midland, TX 7970  |  | 432-687-1777   | Salt Lake; Bone Spring                                  |  |  |  |  |  |  |  |  |
| 4. Location of Well ( <i>Footage</i> , <i>Sec.</i> , <i>T.</i> , <i>F</i><br>Unit K, 1980' FSL & 1980' FWL, Sec. 23, T205, 1   | R., M, or Survey Description,<br>R32E  | )  |   |  | <ol> <li>Country or Parish, S<br/>Lea, New Mexico</li> </ol>   | state  |  |  |  |  |  |
| 12. CHEC   | K THE APPROPRIATE BO   | X(ES) TO INDI  | CATE NATURE   | E OF NOTIO   | CE, REPORT OR OTHE   | R DATA   |  |  |  |  |  |
| TYPE OF SUBMISSION   |  |  | TY  | PE OF ACT  | ION  |  |  |  |  |  |  |
| Notice of Intent   | Acıdıze  |  | re Treat  | Recl   | Production (Start/Resume) Water Shut-Off Reclamation Well Integrity  |  |  |  |  |  |  |
| Subsequent Report  | Casing Repair  | _  | Construction<br>nd Abandon                              |  | omplete<br>porarily Abandon  | Other Set a temporary  |  |  |  |  |  |
| Final Abandonment Notice   | Convert to Injection   | Plug F   | Back  | Wate   | er Disposal  |  |  |  |  |  |  |
| Fasken Oil and Ranch, Ltd. has com<br>Whitlock with the Bureau of Land Mi<br>Gas Oil Ratio Test that was submitte<br>our tests. As requested on our Sund<br>to justify the installation and mainter  | Abandonment Notices must<br>final inspection.)<br>npleted the 30 day test to<br>anagement was notified p<br>ed to the New Mexico Oil<br>dry Notice dated 8-3-09, F | be filed only after<br>verify if there is<br>prior to the start<br>Conservation D  | er all requirement<br>enough gas vo<br>of the test. Cha | ts, including<br>olume to jus<br>arts showir<br>hed. Gas y | reclamation, have been<br>stify the installation of a<br>ng the gas volumes du<br>/olumes were between<br>from this well as it doe | completed and the operator has<br>a permanent meter run. Duncan<br>ring the test and a copy of the<br>9 MCFPD and 11 MCFPD during<br>es not produce economic volumes |  |  |  |  |  |
|  |  | APR 2  | EIVED<br>8 2010<br>SOCD                                 |  | AP   | D FOR RECORD<br>PR 2 1 2010<br>VIES Kristof<br>OF LAND MANAGEMENT<br>SBAD FIELD OFFICE   |  |  |  |  |  |
| 14 I hereby certify that the foregoing is t<br>Name (Printed/Typed)  | rue and correct  | · · · · · · · · · · · · · · · · · · ·  | Title Regulate  | ory Analysi  | t  |  |  |  |  |  |  |
|  |  |  |   |  |  |  |  |  |  |  |  |
| Signature Rim Lynn   |  |  | Date 03/12/20   |  |  |  |  |  |  |  |  |
|  | THIS SPACE   | FOR FEDE   | KAL OR ST   | AIEOF  | FICE USE   | TARE MARRIE  |  |  |  |  |  |
| Approved by  | ĒĞ   | 4/29/1   | O THE C.  | REP REP  | FICE USE   | Date   |  |  |  |  |  |
| Conditions of approval, if any, are attached<br>that the applicant holds legal or equitable to<br>entitle the applicant to conduct operations  | itle to those rights in the subject thereon  | ect lease which wo   | ould Office   |  |  |  |  |  |  |  |  |
| Title 18 U S C Section 1001 and Title 43 fictitious or fraudulent statements or representations of the statements of the | USC Section 1212, make it esentations as to any matter w   | a crime for any period and period | erson knowingly a                                       | and willfully  | to make to any departmen   | t or agency of the United States any false,  |  |  |  |  |  |

~

(Instructions on page 2)

,

| · · · ·   |  | OPERATOR'   | C MDW                                |   |   |  |  |  |  |  |
|---|--|---|--------------------------------------|---|---|--|--|--|--|--|
| Form 3160-5<br>(Febre PECCEIVED DE  | UNITED STATI   |   | Expires: March 31, 2007              |   |   |  |  |  |  |  |
| DOL   | WHO OF LARD MAR  |   | 5. Lease Serial No.<br>NM-33955      |   |   |  |  |  |  |  |
| FASKERP BOLUSO THIS<br>RABED COLUSO THIS<br>RABED COMPONENT.  | NOTICES AND REP<br>form for proposals<br>Use Form 3160-3 (A      | er an<br>osals.   | 6. If Indian, Allottee or Tribe Name |   |   |  |  |  |  |  |
| SUBM  | IT IN TRIPLICATE - Othe  |   | 7. If Unit of CA/Agre                | ement, Name and/or No.  |   |  |  |  |  |  |
| 1. Type of Well   |  |   |                                      |   | ·   |  |  |  |  |  |
| Oil Well Gas V  | Well Other   |   |                                      | 8. Well Name and No.<br>Beatz "23" No. 1<br>9. API Well No.<br>30-025-26414 |   |  |  |  |  |  |
| 2. Name of Operator<br>Fasken Oil and Ranch, Ltd.   |  |   |                                      |   |   |  |  |  |  |  |
| 3a. Address<br>303 West Wall St., Suite 1800, Midland, TX 79  |  | 3b. Phone No. (include an 432-687-1777                    | ea code)                             | 10. Field and Pool or Exploratory Area<br>Salt Lake; Bone Spring            |   |  |  |  |  |  |
| 4. Location of Well (Foolage, Sec., T.,<br>1980' FSL & 1980' FWL, Unit Letter K, Sec. 23,   | <i>R.,M., or Survey Description</i><br>T20S, R32E                | <i>)</i>  |                                      | 11. Country or Parish,<br>Lea, New Mexico                                   |   |  |  |  |  |  |
| 12. CHEC  | CK THE APPROPRIATE BO  | X(ES) TO INDICATE NA                                      | TURE OF NOTIO                        | CE, REPORT OR OTH   | ER DATA   |  |  |  |  |  |
| TYPE OF SUBMISSION  |  |   | TYPE OF AC1                          | TION  |   |  |  |  |  |  |
| Notice of Intent  | Acıdize  | Deepen<br>Fracture Treat                                  | Reci                                 | uction (Start/Resume)<br>amation  | Water Shut-Off  |  |  |  |  |  |
| Subsequent Report   | Casing Repair  | New Construction  |                                      | omplete<br>porarily Abandon   | Other Set a temporary   |  |  |  |  |  |
| Final Abandonment Notice  | Convert to Injection   | Plug Back   |                                      | er Disposal   |   |  |  |  |  |  |
| determined that the site is ready for<br>Fasken Oil and Ranch, Ltd. request<br>justify the installation of a permanen                             | approval to set a tempora  | ry meter run to test the ga<br>me will be tested for 30 d | as volumes to ve<br>ays.             | erify if there is enough  | n volume to measure on a chart to   |  |  |  |  |  |
| SEE ATTACHE<br>CONDITIONS<br>SUBJECT TO<br>APPROVAL B   | OF APPROVAI<br>like  |   |                                      | 0<br>s/ JI<br>BUREAU (  | PROVED<br>CT 3 0 2009<br>D Whitlock Jr<br>DF LAND MANAGEMENT<br>SBAD FIELD OFFICE |  |  |  |  |  |
| 14. I hereby certify that the foregoing is tru<br>Name (Printed/Typed)  | ue and correct.  |   |                                      |   |   |  |  |  |  |  |
| Kim Tyson   |  | Title Regu  | Title Regulatory Analyst             |   |   |  |  |  |  |  |
| Signature Rim Lynn  |  | Date 10/2   | 3/2009                               | ·····   |   |  |  |  |  |  |
|   | THIS SPACE F   | OR FEDERAL OR   | STATE OFF                            | ICE USE   | STAPT MARKE   |  |  |  |  |  |
| Approved by   | ĒG   | 429/10 Title  |                                      |   | ite   |  |  |  |  |  |
| Conditions of approval, if any, are attached.<br>hat the applicant holds legal or equitable titl<br>ntitle the applicant to conduct operations th | e to those rights in the subject ereon.                          | lease which would Office                                  |                                      |   |   |  |  |  |  |  |
| Fitle 18 U.S.C. Section 1001 and Title 43 U<br>Ictitious or fraudulent statements or represe  | S.C Section 1212, make it a c<br>entations as to any matter with | rime for any person knowing<br>n its jurisdiction         | ly and willfully to                  | make to any department  | or agency of the United States any false,   |  |  |  |  |  |

ł

Instructions on page 2)

## Baetz 23 #1 NM33955

## Fasken OIL and Ranch, Ltd.

October 30, 2009

## **Condition of Approval for temporary meter run**

- 1. Report all volumes on MMS OGOR reports.
- 2. Comply with NTL-4A requirements

.

- 3. Subject to like approval from NMOCD
- 4. Flared/vented volumes will still require payment of royalties
- 5. Gas meter is to comply with Onshore Order #5 Measurement of Gas.
- 6. Notify BLM Hobbs Office at 575-393-3612 to witness gas meter calibration prior to start of test.



PM AM NOON 3 9 б MIDNIGHT MIDNIGHT 9 3 p Agg AM SA URDAY MONDRY و NOON a AM PM 3 م 9 MIDNIGHT MIDNIGHT 7100 tion 7d STRAPH OCHIGA IN STRATION 8-50 par spring more + Md AM Ŷ ON BACTZ 23-1 OFF Z-10-10 / Z-16-10 ო FRIDAY " UESDAY NOON NOON BR 4982 σ AN A Ma ŝ MIDNICHT HOIM σ 40 AN A à 6 0314100 YAO23MO3W NOON 1 & OSYOMI NOON ó 6 WIDNICHL 3 MA

SUNDAY





District I 1625 N French Dr, Hobbs, NM 88240 District II 1301 W Grand Avenue, Artesia, NM 88210 District III 1000 Rio Brazos Road, Aztec, NM 87410 District IV 1220 S St Francis Dr, Santa Fe, NM 87505

Oil Conservation Division 1220 South St. Francis Dr. Santa Fe, NM 87505

Submit One Copy To Appropriate District Office

## GAS - OIL RATIO TEST

| Operator<br>Fasken Oil | and Ranch, | Lŧd.       |     |       |             | Pool | Salt La        |              |        | ne Spr        |              |                                   |                             | Count         | Le          | a           |              |                                 |
|------------------------|------------|------------|-----|-------|-------------|------|----------------|--------------|--------|---------------|--------------|-----------------------------------|-----------------------------|---------------|-------------|-------------|--------------|---------------------------------|
| Address 303 W. Wall    |            |            | Mid | land. | <b>,</b> TX |      |                | TYPE<br>TEST | E OF   |               | <u>^8</u>    |                                   | duled 🛛                     |               |             |             | S            | pecial 🔲                        |
|                        | LOCATION   |            |     |       |             | 1    | T              |              | TDC    |               | LENGTH       | Completion Sp<br>PROD DURING TEST |                             |               |             |             |              |                                 |
| LEASE NAME             | API No     | WELL<br>NO | U   | S.    | Т           | R    | DATE O<br>TEST | F            | STATUS | CHOKE<br>SIZE | TBG<br>PRESS | DAILY<br>ALLOW-<br>ABLE           | OF<br>TEST<br>HOURS         | WATER<br>BBLS | GRAV<br>OIL | OIL<br>BBLS | GAS<br>M.C F | GAS - OIL<br>RATIO<br>CU FT/BBL |
| Baetz "23"             | 025-26414  | 1          | ĸ   | 23    | 20S         | 32E  | 2-28-1         | .0           | P      |               |              | М                                 | 24                          | 3             | 38.8        | 8           | 10           | 1250                            |
| NM 33955               |            |            |     |       |             |      |                |              |        |               |              |                                   |                             |               |             |             |              |                                 |
|                        |            |            |     |       |             |      |                |              |        |               |              |                                   |                             |               |             |             |              |                                 |
|                        |            |            |     |       |             |      |                |              |        |               |              |                                   |                             |               |             |             |              |                                 |
|                        |            |            |     |       |             |      |                |              |        |               |              |                                   |                             |               |             |             |              |                                 |
|                        |            |            |     |       |             |      |                |              |        |               |              |                                   |                             |               |             |             |              |                                 |
|                        |            |            |     |       |             |      |                |              |        |               |              |                                   |                             |               |             |             |              |                                 |
|                        |            |            |     |       |             |      |                |              |        |               |              |                                   |                             |               |             |             |              |                                 |
|                        |            |            |     |       |             |      |                |              |        |               |              |                                   |                             |               |             |             |              |                                 |
|                        |            |            |     |       |             |      |                |              |        |               |              |                                   |                             |               |             |             |              |                                 |
| Instructions:          |            |            |     |       |             |      |                |              |        |               |              |                                   | hat the abo<br>e and belief |               | nation is t | rue and     | complete     | e to the bes                    |

During gas-oil ratio test, each well shall be produced at a rate not exceeding the top unit allowable for the pool in which well is located by more than 25 percent. Operator is encouraged to take advantage of this 25 percent tolerance in order that well can be assigned increased allowables when authorized by the Division.

Gas volumes must be reported in MCF measured at a pressure base of 15.025 psia and a temperature of 60° F. Specific gravity base will be 0.60.

Report casing pressure in lieu of tubing pressure for any well producing through casing.

(See Rule 19.15.18.8 NMAC, Rule 19.15.7.25 NMAC and appropriate pool rules.)

| Rim man        | 3-8-2010           |
|----------------|--------------------|
| Kem Guss       | Date               |
| Kim Tyson      | Regulatory Analyst |
| Printed Name   | Title              |
| kimt@forl.com  | 432-687-1777       |
| E-mail Address | Telephone No.      |