

District I - (505) 393-6161
1625 N. French Dr, Hobbs, NM 88240
District II - (505) 748-1283
1301 W. Grand Avenue, Artesia, NM 88210
District III - (505) 334-6178
1000 Rio Brazos Road, Aztec, NM 87410
District IV - (505) 476-3440
1220 S. St. Francis Dr., Santa Fe, NM 87505

New Mexico
Energy, Minerals and Natural Resources Department

Form C-140
Revised 06/99

Oil Conservation Division
1220 South St. Francis Dr.
Santa Fe, New Mexico 87505
(505) 476-3440

SUBMIT ORIGINAL
PLUS 2 COPIES
TO APPROPRIATE
DISTRICT OFFICE

APPLICATION FOR
WELL WORKOVER PROJECT

H-0671

I. Operator and Well

Operator name & address FASKEN OIL AND RANCH, LTD. 303 WEST WALL, SUITE 1800 MIDLAND, TX 79701							OGRID Number 151416	
Contact Party JIMMY D. CARLILE, REGULATORY AFFAIRS COORDINATOR							Phone 915 687-1777	
Property Name DENTON					Well Number 12		API Number 30-025-05299	
UL E	Section 11	Township 15S	Range 37E	Feet From The 1980	North/South Line NORTH	Feet From The 662	East/West Line WEST	County LEA

II. Workover

Date Workover Commenced: 6/29/01	Previous Producing Pool(s) (Prior to Workover): DENTON (DEVONIAN)
Date Workover Completed: 7/24/01	

III. Attach a description of the Workover Procedures performed to increase production.

IV. Attach a production decline curve or table showing at least twelve months of production prior to the workover and at least three months of production following the workover reflecting a positive production increase.

V. AFFIDAVIT:

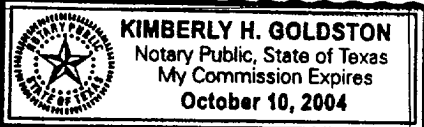
State of TEXAS)
County of Midland) ss.
Jimmy D. Carlile, being first duly sworn, upon oath states:

- I am the Operator, or authorized representative of the Operator, of the above-referenced Well.
- I have made, or caused to be made, a diligent search of the production records reasonably available for this Well.
- To the best of my knowledge, this application and the data used to prepare the production curve and/or table for this Well are complete and accurate.

Signature Jimmy D. Carlile Title Regulatory Affairs Coordinator Date 5-23-02
SUBSCRIBED AND SWORN TO before me this 23rd day of May, 2002.

My Commission expires: Oct. 10, 2004

Kimberly H. Goldston
Notary Public



FOR OIL CONSERVATION DIVISION USE ONLY:

VI. CERTIFICATION OF APPROVAL:

This Application is hereby approved and the above-referenced well is designated a Well Workover Project and the Division hereby verifies the data shows a positive production increase. By copy hereof, the Division notifies the Secretary of the Taxation and Revenue Department of this Approval and certifies that this Well Workover Project was completed on

7/24/01

Signature District Supervisor <u>[Signature]</u>	OCD District <u>1</u>	Date <u>6/3/02</u>
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VII. DATE OF NOTIFICATION TO THE SECRETARY OF THE TAXATION AND REVENUE DEPARTMENT: _____

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