

District I - (505) 393-6161  
7625 N. French Dr  
Hobbs, NM 88241-1989  
District II - (505) 748-1283  
811 S. First  
Artesia, NM 88210  
District III - (505) 334-6178  
1000 Rio Brazos Road  
Aztec, NM 87410  
District IV - (505) 827-7131

New Mexico  
Energy Minerals and Natural Resources Department  
Oil Conservation Division  
2040 South Pacheco Street  
Santa Fe, New Mexico 87505  
(505) 827-7131

Form C-139  
Revised 06/99

SUBMIT ORIGINAL  
PLUS 2 COPIES  
TO APPROPRIATE  
DISTRICT OFFICE

APPLICATION FOR  
RESTORATION PROJECT

H-0555

I. Operator and Well:

Operator name & address COLLINS & WARE, INC 508 W. WALL, SUITE 1200 MIDLAND, TEXAS 79701						OGRID Number  004874		
Contact Party DIANNE SUMRALL						Phone 915-687-3435		
Property Name STATE LA (19196) POOL CODE (40470)				Well Number 12		API Number 30-025-03820		
UL K	Section 01	Township 17S	Range 36E	Feet From The 2310	North/South Line South	Feet From The 2310	East/West Line West	County LEA

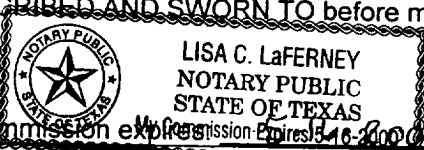
II. Pool and Production Restoration:

Previous Producing Pool(s) (If change in Pools): LOVINGTON; ABO	
Date Production Restoration started: WO BEGAN 6-10-98 COMPLETED 1-24-99	Date Well Returned to Production: JANUARY 26, 1999
Describe the process used to return the well to production. (Attach additional information if necessary): PLUGGED WELL BACK TO NEW POOL	

III. Identify the period and Division records which show the Well had thirty (30) days or less production for the twenty-four consecutive months prior to restoring production:

Records Showing Well produced less than 30 days during 24 period: <input type="checkbox"/> Well file record showing that well was plugged <input checked="" type="checkbox"/> ONGARD production data <input type="checkbox"/> OCD Form C-115 (Operator's Monthly Report)		Month/Year (Beginning of 24 month period): JULY, 1996
		Month/Year (End of 24 month period): JUNE, 1998

IV. Affidavit:

State of <u>TEXAS</u> ) County of <u>MIDLAND</u> ) ss. DIANNE SUMRALL, being first duly sworn, upon oath states: 1. I am the Operator, or authorized representative of the Operator, of the above-referenced Well. 2. I have personal knowledge of the facts contained in this Application. 3. This application is complete and correct.		Signature <u>[Signature]</u> Title <u>PRODUCTION ADMINISTRATOR</u> Date <u>8-16-99</u>
SUBSCRIBED AND SWORN TO before me this <u>16th</u> day of <u>August</u> , <u>1999</u>		
 LISA C. LaFERNEY NOTARY PUBLIC STATE OF TEXAS My Commission expires <u>8-16-2000</u>		<u>[Signature]</u> Notary Public

FOR OIL CONSERVATION DIVISION USE ONLY:

V. CERTIFICATION OF APPROVAL:

This Application is hereby approved and the above-referenced well is designated a Production Restoration Project. By copy hereof, the Division notifies the Secretary of the Taxation and Revenue Department of this Approval and certifies that production was restored on: 1-26-99

Signature District Supervisor <u>[Signature]</u>	OCD District <u>1</u>	Date <u>8/24/99</u>
---	--------------------------	------------------------

VI. DATE OF NOTIFICATION TO THE SECRETARY OF THE TAXATION AND REVENUE DEPARTMENT: \_\_\_\_\_

mP