## Districe I

PO Box 1980, Hobbs, NM 88241-1980

District II

PO Drawer DD, Artesia, NM 88211-0719

District III

1000 Rio Brazos Rd., Aztec, NM 87410

District IV

## Ener , Minerals & Natural Resources Department OIL CONSERVATION DIVISION 2040 South Pacheco

State of New Mexico

Form C-104 Revised October 18, 1994 Instructions on back Submit to Appropriate District Office

Santa Fe, NM 87505 5 Copies

| Theorem U.S.A. Inc.    Chevron U.S.A. Inc.   | 2040 South Pache                           | co, Santa Fe,  | NM 87505          |                            |                                       |                                       |                            |               |                                       |   | AME                 | NDED REP         |  |
|--|--|----------------|-------------------|----------------------------|---------------------------------------|---------------------------------------|----------------------------|---------------|---------------------------------------|---|---------------------|------------------|--|
| Check Compute    | <u>I.</u>                                  | 1              | REQUES            | T FOR                      | ALLOWA                                | BLE AN                                | D AUTH                     | IORIZA        | ΤΙΟΝ ΤΟ Τ                             | 'R A NS                                       | !D∩D⊓               | r                |  |
| P.O. BOX 1150  **Idl and, TX. 79702  **Idl Number**  **Idl And, TX. 79702  **Idl Number**  **Idl Number**  **PROL Clase**  **North Number**  **Surface**  **Lest From the Section Township Range**  **Use of the co.  **Jest Section Township Range**  **Use of the co.  **Section Township Range**  **Use of the co.  **If the  | Cha  |                | <sup>1</sup> Op   | erator name                | and Address                           |                                       | · · · · · ·                |               |                                       |   |                     |                  |  |
| # Reason for Filing Code  AND Number  Property Code  Property Code  Surface Location  U. ord to a Section Township Reage Loc 2ds Feet from the Pass Number  Bottom Hole Location  U. ord to a Section Township Reage Loc 2ds Feet from the Pass Number  Bottom Hole Location  U. ord to an Section Township Reage Loc 2ds Feet from the Pass Number State Location  U. ord to an Section Township Reage Loc 2ds Feet from the Pass Number State Location  U. ord to an Section Township Reage Loc 2ds Feet from the Pass Number State Location  U. ord to an Section Township Reage Loc 2ds Feet from the Pass Number State Location  U. ord to an Section Township Reage Loc 2ds Feet from the Pass Number State Location  U. ord to an Section Township Reage Loc 2ds Feet from the Pass Number State Location  U. ord to an Section Township Reage Loc 2ds Feet from the Pass Number State County  Producing Method Code Market State S |  |                | С.                |                            |                                       |                                       |                            |               |                                       |   |                     |                  |  |
| * APT Number*  * APT Number*  * OP Despite Code  |  |                |                   |                            |                                       |                                       | 3                          |               |                                       |   |                     |                  |  |
| Total Number   Tota   |  |                |                   | Γ                          |                                       | <del></del>                           |                            |               | i                                     |   |                     |                  |  |
| Property Code 2622 S. E. FELTON Surface Location UL cert lots of Section Township Range Lixt 130 Peet from the 1990 SOUTH 1980 FAST LEA  Bottom Hole Location UL or lot no. Section Township Range Lixt 130 Peet from the 1990 SOUTH 1980 FAST LEA  Bottom Hole Location UL or lot no. Section Township Range Lixt 130 Peet from the 1990 SOUTH 1980 FAST LEA  Bottom Hole Location UL or lot no. Section Township Range Lixt 130 Peet from the 1990 SOUTH 1980 FAST LEA  Bottom Hole Location UL or lot no. Section Township Range Lixt 131 Peet from the 1990 SOUTH 1980 FAST LEA  Bottom Hole Location UL or lot no. Section Township Range Lixt 131 Peet from the 1990 SOUTH 1980 FAST LEA  Bottom Hole Location UL or lot no. Section Township Range Lixt 131 Peet from the 1990 SOUTH 1980 FAST LEA  Bottom Hole Location UL or lot no. Section Township Range Lixt 131 Peet from the 1990 SOUTH 1980 FAST LEA  Bottom Hole Location UL or lot no. Section Township Range Lixt 131 Peet from the 1990 SOUTH 1980 FAST Lead  Bottom Hole Location UL or lot no. Section Township Range Lixt 131 Peet from the 1990 Control township Range Lixt 131 Peet from the 1990 Control township Range Lixt 131 Peet from the 1990 Control township Range Lixt 131 Peet from the 1990 Control township Range Lixt 131 Peet from the 1990 Control township Range Lixt 131 Peet from the 1990 Control township Range Lixt 131 Peet from the 1990 Control township Range Lixt 131 Peet from the 1990 Control township Range Lixt 131 Peet from the 1990 Control township Range Lixt 131 Peet from the 1990 Control township Range Lixt 131 Peet from the 1990 Control township Range Lixt 131 Peet from the 1990 Control township Range Lixt 131 Peet from the 1990 Control township Range Lixt 131 Peet from the 1990 Control township Range Lixt 131 Peet from the 1990 Control township Range Lixt 131 Peet from the 1990 Control township Range Lixt 131 Peet from the 1990 Control township Range Lixt 131 Peet from the 1990 Control township Range Lixt 131 Peet from the 1990 Control township Range Lixt 131 Peet from the 19 |  |                |                   |                            |                                       | 5 p                                   | ool Name                   |               |                                       |   |                     |                  |  |
| Table 1   Topics   To |  |                |                   |                            |                                       |                                       | ATES-7 RVRS-QUEEN (PRO GAS |               |                                       | .,  |                     |                  |  |
| 11.   *** Surface Location   | Property Code                              |                |                   |                            |                                       |                                       | 8 Property Name            |               |                                       |   |                     |                  |  |
| Section   Section   Township   Rouge   Lot. Lin   Feet from the SQLTH   1980   FAST   LEA  | 11 10                                      |                |                   |                            |                                       |                                       |                            | S. E. FELTON  |                                       |   |                     |                  |  |
| Jacob   Section   Township   Range   Lot Jan   Fest from the   1980   EAT   Least West line   County   | UL or lot no                               | Surface        | Locatio           |                            |                                       |                                       |                            |               |                                       |   |                     |                  |  |
| Potential Hole Location   Ut or for now   Section   Township   Range   Let. Life.   Feet from the   North-South Line   Feet from the   East/West line   County   |  | 1              | 1                 | 1 1                        |                                       |                                       | Feet from the North/South  |               | Feet from the                         | East/W  | East/West line Cour |                  |  |
| OL of lat no. Section Township Range Lot. 14th Fast from the North South Line Feet from the EastWest fine County  2 Loc Cinde D Producing Mathod Code   19 Gast Connecti in Date   15 C.129 Permit Number   16 C.129 Effective Date   17 C.129 Expiration D    3 Loc Cinde D Producing Mathod Code   19 Gast Connecti in Date   15 C.129 Permit Number   16 C.129 Effective Date   17 C.129 Expiration D    3 Loc Cinde D Producing Mathod Code   19 Gast Connecti in Date   18 C.129 Permit Number   16 C.129 Effective Date   17 C.129 Expiration D    4 Loc Cinde D Producing Mathod Code   19 Gast Connecti in Date   18 C.129 Permit Number   18 C.129 Effective Date   19 C.129 Expiration D    5 POD USTR Location and Description   19 C.129 Expiration D   10 C   12 POD USTR Location and Description   10 Loc Code    |  |                | 11 212 I          | 1 36E                      |                                       | 1980                                  | )                          | SOUTH         | 1980                                  | EA  | ST                  | LEA              |  |
| 2 Les Code 13 Producing Method Code 14 Gas Connection Date p   | UL or lot no                               | Section        |                   |                            |                                       | T**                                   |                            |               |                                       |   |                     |                  |  |
| P F 4/3/97  II. Oil and Gas Transporters  If Transporter Name  In Transporter Name  If Transporter Name  If Transporter Name  Ind Address  If Transporter Name  If Tran |  |                |                   |                            |                                       |                                       | he North                   | /South Line   | Feet from the                         | East/W  | est line            | County           |  |
| ## Cooke Size  ## Coo |  | 13 Produci     |                   | ode 14 Gas                 |                                       | <sup>15</sup> C-12                    | 9 Permit Nun               | mber 1        | 6 C-129 Effective                     | Date  | 17 C-12             | 29 Expiration Da |  |
| 18 Transporter Name of CoRRID and Address  |  | 1.0 5          |                   |                            | 4/3/97                                |                                       |                            |               |                                       |   |                     | -> 2piranon Da   |  |
| O24650 DYNEGY MIDSTREAM SERVICES, LP 1000 LOUSTREAM SURTE 5800 HOUSTON, TX 77002-5050  Y. Produced Water  25 POD 26 POD ULSTR Location and Description  Y. Produced Water  27 POD 27 POD ULSTR Location and Description  Y. Produced Water  28 POD ULSTR Location and Description  Y. Produced Water  29 POD ULSTR Location and Description  Y. Produced Water  29 POD ULSTR Location and Description  Y. Produced Water  29 POD ULSTR Location and Description  Y. Produced Water  29 POD ULSTR Location and Description  Y. Produced Water  29 Portification and Description  30 Description  30 Description  30 Description  30 Description  31 Hole Size  31 Hole Size  32 Despits Set  33 Despits Set  34 AOF  45 Test Method  46 Test Method  47 Choke Size  47 Onl  48 Water  49 Gas  49 AOF  40 Test Method  40 Test Method  40 Test Method  41 Choke Size  42 Onl  43 Water  44 Gas  45 AOF  46 Test Method  46 Test Method  47 Title:  48 Approved by:  49 CFIG VALS 2 Value provides Noval AME  District I show the set of the previous operator  49 Approved by:  40 CFIG VALS 2 Value provides Noval AME  District I show the set of the previous operator  40 CFIG VALS 2 Value provides Noval AME  41 Choke Size  41 Title:  42 Approved by:  43 Approved by:  44 Choke Size  45 AOF  46 Test Method  47 Test Method  48 Test Length  49 AOF  40 Test Method  40 Test Value  40 CFIG VALS 2 Value provides Noval Ame  41 Choke Size  41 Title:  42 Approved by:  43 Approved by:  44 Choke Size  45 AOF  46 Test Method  47 Test Method  48 Test Length  49 AOF  40 Test Value  40 Test Value  40 Test  | 18 Transaction                             | d Gas T        |                   |                            | <u>-</u>                              |                                       | _                          |               |                                       |   |                     |                  |  |
| O24650  DYNEGY MIDSTREAM SERVICES, LP 1000 LOUISIANA, SUITE 5800 HOUSTON, TX 77002-5050  J-28-215-36E  J-28-215-36 |  | İ              | 19 Tra<br>ar      | nsporter Nai<br>nd Address | me                                    | 20                                    | 20 POD 2                   |               | 22 PO                                 | POD ULSTR Location                            |                     |                  |  |
| J-28-215-36E  ### HOUSTON, TX 77002-5050  ### POD ULSTR Location and Description  ### POD ULSTR Location and Description  #### POD ULSTR Location and Description  #### POD ULSTR Location and Description  ###################################  | 024650                                     |                |                   |                            | JICES ID                              | _                                     |                            |               |                                       |   |                     |                  |  |
| HOUSTON, TX 77002-5050  J-28-215-36E  J-28-2 | 024030                                     | 1000           | LOUISIAN          | IA. SUITE                  | 5 5800                                | 2819224                               |                            | G             |                                       |   |                     |                  |  |
| V. Produced Water  23 POD  |  | HOUS           |                   |                            |                                       |                                       |                            |               | J                                     | J-28-21S-36E                                  |                     |                  |  |
| V. Produced Water  23 POD  |  |                |                   |                            |                                       |                                       |                            |               |                                       |   | ·                   |                  |  |
| V. Produced Water  23 POD  |  |                |                   |                            |                                       |                                       |                            |               |                                       |   |                     |                  |  |
| V. Produced Water  23 POD  |  |                |                   |                            |                                       |                                       |                            |               | ·                                     |   |                     |                  |  |
| V. Produced Water  23 POD  |  |                |                   |                            |                                       |                                       |                            |               |                                       |   |                     |                  |  |
| V. Produced Water  23 POD  24 POD ULSTR Loxation and Description  7. Well Completion Data  25 Spud Date  26 Ready Date  27 TD  28 PBTD  29 Perforations  30 DHC, DC, MC  31 Hole Size  32 Casing & Tubing Size  33 Depth Set  34 Sacks Cement  45 Choke Size  46 Choke Size  47 Choke Size  48 Oil  49 Water  40 Csg. Pressure  40 Csg. Pressure  40 Csg. Pressure  41 Choke Size  42 Oil  43 Water  44 Gas  45 AOF  46 Test Method  Approved by:  Approved Date:  JAN 2 1 1999  If this is a change of operator fill in the OGRID number and name of the previous operator  Previous Operator Signature  Printed Name  Prin |  |                |                   |                            |                                       | <b>8</b> 1.5181.5                     |                            | 4 14          |                                       |   |                     |                  |  |
| V. Produced Water  23 POD  24 POD ULSTR Loxation and Description  7. Well Completion Data  25 Spud Date  26 Ready Date  27 TD  28 PBTD  29 Perforations  30 DHC, DC, MC  31 Hole Size  32 Casing & Tubing Size  33 Depth Set  34 Sacks Cement  45 Choke Size  46 Choke Size  47 Choke Size  48 Oil  49 Water  40 Csg. Pressure  40 Csg. Pressure  40 Csg. Pressure  41 Choke Size  42 Oil  43 Water  44 Gas  45 AOF  46 Test Method  Approved by:  Approved Date:  JAN 2 1 1999  If this is a change of operator fill in the OGRID number and name of the previous operator  Previous Operator Signature  Printed Name  Prin |  |                |                   | -                          | · · · · · · · · · · · · · · · · · · · |                                       |                            |               |                                       |   |                     |                  |  |
| 24 POD ULSTR Location and Description  7. Well Completion Data  25 Spud Date  26 Ready Date  27 TD  28 PBTD  29 Perforations  30 DHC, DC, MC  31 Hole Size  32 Casing & Tubing Size  33 Depth Set  34 Sacks Cement  35 Date New Oil  36 Gas Delivery Date  37 Test Date  41 Choke Size  42 Oil  43 Water  44 Gas  45 AOF  46 Test Method  46 Test Method  47 Title:  Approved by:  Approved by:  Approved by:  Approved Date:  17 Title:  Approved Date:  17 Title:  Approved Date:  17 Title:  Approved Date:  17 Title:  Previous Operator fill in the OGRID number and name of the previous operator  Previous Operator Signature  |  |                |                   |                            |                                       |                                       |                            |               |                                       |   |                     |                  |  |
| 24 POD ULSTR Location and Description  7. Well Completion Data  25 Spud Date  26 Ready Date  27 TD  28 PBTD  29 Perforations  30 DHC, DC, MC  31 Hole Size  32 Casing & Tubing Size  33 Depth Set  34 Sacks Cement  35 Date New Oil  36 Gas Delivery Date  37 Test Date  41 Choke Size  42 Oil  43 Water  44 Gas  45 AOF  46 Test Method  46 Test Method  47 Title:  Approved by:  Approved by:  Approved by:  Approved Date:  17 Title:  Approved Date:  17 Title:  Approved Date:  17 Title:  Approved Date:  17 Title:  Previous Operator fill in the OGRID number and name of the previous operator  Previous Operator Signature  | V Decel                                    |                |                   |                            |                                       |                                       |                            |               |                                       |   |                     |                  |  |
| 7. Well Completion Data  23 Spud Date  25 Ready Date  27 TD  28 PBTD  29 Perforations  30 DHC, DC, MC  31 Hole Size  32 Casing & Tubing Size  33 Depth Set  34 Sacks Cement  35 Date New Oil  36 Gas Delivery Date  37 Test Date  38 Test Length  39 Tog. Pressure  40 Csg. Pressure  40 Csg. Pressure  41 Choke Size  42 Oil  43 Water  44 Gas  45 AOF  46 Test Method  41 Choke Size  42 Oil  43 Water  44 Gas  45 AOF  46 Test Method  47 Test Date  48 Test Method  49 The Conservation Division have been publied with and that the information given above is true and complete to granter  41 Choke Size  42 Oil  43 Water  44 Gas  45 AOF  46 Test Method  46 Test Method  47 Title:  48 Approved by:  49 Critical ASSISTANT  49 Approved by:  40 Csg. Pressure  40 Csg. Pressure  40 Csg. Pressure  41 Choke Size  42 Oil  43 Water  44 Gas  45 AOF  46 Test Method  47 Title:  48 Approved by:  49 Critical ASSISTANT  49 Approved by:  49 Title:  40 Csg. Pressure  40 Csg. Pressure  40 Csg. Pressure  41 Choke Size  42 Oil  43 Water  44 Gas  45 AOF  46 Test Method  47 Title:  48 Approved by:  49 Title:  49 Title:  49 Title:  40 Csg. Pressure  40 Csg. Pressure  40 Csg. Pressure  41 Choke Size  42 Oil  43 Water  44 Gas  45 AOF  46 Test Method  47 Title:  48 Approved by:  49 Title:  49 Title:  49 Title:  49 Title:  40 Csg. Pressure  40 Csg. Pressure  40 Csg. Pressure  40 Csg. Pressure  41 Choke Size  42 Oil  43 Water  44 Gas  45 AOF  46 Test Method  47 Title:  48 Approved by:  49 Title:  49 Title:  40 Csg. Pressure  40 Csg. Pressure  40 Csg. Pressure  41 Choke Size  42 Oil  43 Water  44 Gas  45 AOF  46 Test Method  47 Title:  48 Gas  49 AOF  40 Csg. Pressure  40 Csg. Pressure  41 Choke Size  42 Oil  43 Water  44 Gas  45 AOF  46 Test Method  47 Title:  48 Gas  49 AOF  40 Csg. Pressure  40 Csg. Pressure  41 Choke Size  42 Oil  43 Water  44 Gas  45 AOF  46 Test Method  47 Csg. Pressure  40 Csg. Pressure  41 Choke Size  42 Oil  43 Water  44 Gas  45 AOF  46 Test Method  47 Oil  48 Gas  49 AOF  40 Csg. Pressure  40 Csg. Pressure  41 Choke Size  41 Choke Siz | V. Produc                                  | ed Wate        | <u>r</u>          |                            |                                       |                                       |                            |               |                                       |   |                     |                  |  |
| 25 Spud Date  26 Ready Date  27 TD  28 PBTD  29 Perforations  90 DHC, DC, MC  31 Hole Size  32 Casing & Tubing Size  33 Depth Set  43 Sacks Cement  44 Choke Size  45 Oil  45 Well Test Data  46 Csg. Pressure  47 Choke Size  48 Oil  49 The Pressure  40 Csg. Pressure  40 Csg. Pressure  41 Choke Size  42 Oil  43 Water  44 Gas  45 AOF  46 Test Method  Approved by:  OIL CONSERVATION DIVISION  Approved by:  OFIG NALS SACKS CEMENT  Title:  LETHICAL ASSISTANT  Approval Date:  JAN 2 1 1999  Phone: (915) 687-7148  If this is a change of operator fill in the OGRID number and name of the previous operator  Previous Operator Signature  Privious Operator Signature  | TOD  |                |                   |                            |                                       | <sup>24</sup> POD                     | ULSTR Locat                | tion and Desc | ription                               |   | _                   |                  |  |
| 25 Spud Date  26 Ready Date  27 TD  28 PBTD  29 Perforations  90 DHC, DC, MC  31 Hole Size  32 Casing & Tubing Size  33 Depth Set  43 Sacks Cement  44 Choke Size  45 Oil  45 Well Test Data  46 Csg. Pressure  47 Choke Size  48 Oil  49 The Pressure  40 Csg. Pressure  40 Csg. Pressure  41 Choke Size  42 Oil  43 Water  44 Gas  45 AOF  46 Test Method  Approved by:  OIL CONSERVATION DIVISION  Approved by:  OFIG NALS SACKS CEMENT  Title:  LETHICAL ASSISTANT  Approval Date:  JAN 2 1 1999  Phone: (915) 687-7148  If this is a change of operator fill in the OGRID number and name of the previous operator  Previous Operator Signature  Privious Operator Signature  | V Wall Ca                                  |                | <u> </u>          |                            |                                       |                                       |                            |               |                                       |   |                     |                  |  |
| 31 Hole Size  32 Casing & Tubing Size  33 Depth Set  34 Sacks Cement  35 Date New Oil  36 Gas Delivery Date  37 Test Date  38 Test Length  39 Tbg. Pressure  40 Csg. Pressure  41 Choke Size  42 Oil  43 Water  44 Gas  45 AOF  46 Test Method  OIL CONSERVATION DIVISION  Approved by:  ORIGINAL STAND BY DIVISION  Approved Date:  1/11/99  Phone:  OIL CONSERVATION DIVISION  Approved by:  ORIGINAL STAND BY DIVISION  Approved Date:  JAN 2 1 1999  Previous Operator fill in the OGRID number and name of the previous operator  | 25 Soud Date                               | mpietio        | n Data            | . D-1-                     | 27                                    |                                       |                            |               |                                       |   |                     |                  |  |
| I. Well Test Data  35 Date New Oil  36 Gas Delivery Date  37 Test Date  38 Test Length  39 Tbg. Pressure  40 Csg. Pressure  41 Choke Size  42 Oil  43 Water  44 Gas  45 AOF  46 Test Method  6 Test Method  7 Test Date  1 Intereby certify that the rules of the Oil Conservation Division have been plied with and that the information given above is true and complete to best of my knowledge and belief.  8 Approved by:  CHIC NALS SAVED BY  |  |                | Ready             | Ready Date 27 TD           |                                       |                                       | <sup>28</sup> PBTD         |               | <sup>29</sup> Perforat                | <sup>29</sup> Perforations <sup>30</sup> DHC, |                     | HC, DC, MC       |  |
| I. Well Test Data  35 Date New Oil 36 Gas Delivery Date 37 Test Date 38 Test Length 39 Tbg. Pressure 40 Csg. Pressure  41 Choke Size 42 Oil 43 Water 44 Gas 45 AOF 46 Test Method  1 hereby certify that the rules of the Oil Conservation Division have been plied with and that the information given above is true and complete to best of my knowledge and kelgier.  Approved by: OFIG NA STAND PROBLEM WILLIAMS DISTRICT SUPERVISOR  Title:  CHNICAL ASSISTANT tee: 1/11/99 Phone: (915)687-7148  If this is a change of operator fill in the OGRID number and name of the previous operator  Previous Operator Signature Printed Name  | <sup>31</sup> Hole                         | e Size         |                   | 32 Casins                  | & Tuhing Size                         | · · · · · · · · · · · · · · · · · · · | 33 p                       |               |                                       |   |                     |                  |  |
| 35 Date New Oil 36 Gas Delivery Date 37 Test Date 38 Test Length 39 Tbg. Pressure 40 Csg. Pressure 41 Choke Size 42 Oil 43 Water 44 Gas 45 AOF 46 Test Method  OIL CONSERVATION DIVISION Approved by: ORIGNAL SONDER WILLIAMS Interest of my knowledge and belief. Approved by: ORIGNAL SONDER WILLIAMS DISTRICT I SUPERVISION  Title:  CCHNICAL ASSISTANT  te: 1/11/99 Phone: (915)687-7148  If this is a change of operator fill in the OGRID number and name of the previous operator  Previous Operator Signature  Previous Operator Signature   |  |                |                   |                            | S Tuome Size                          |                                       |                            | Pepth Set     |                                       | <u>34</u> S                                   | acks Cem            | ent              |  |
| 35 Date New Oil 36 Gas Delivery Date 37 Test Date 38 Test Length 39 Tbg. Pressure 40 Csg. Pressure 41 Choke Size 42 Oil 43 Water 44 Gas 45 AOF 46 Test Method  OIL CONSERVATION DIVISION Approved by: ORIGNAL SONDER WILLIAMS Interest of my knowledge and belief. Approved by: ORIGNAL SONDER WILLIAMS DISTRICT I SUPERVISION  Title:  CCHNICAL ASSISTANT  te: 1/11/99 Phone: (915)687-7148  If this is a change of operator fill in the OGRID number and name of the previous operator  Previous Operator Signature  Previous Operator Signature   |  |                |                   |                            | <del> </del>                          |                                       |                            | <del></del>   |                                       |   |                     |                  |  |
| 35 Date New Oil 36 Gas Delivery Date 37 Test Date 38 Test Length 39 Tbg. Pressure 40 Csg. Pressure 41 Choke Size 42 Oil 43 Water 44 Gas 45 AOF 46 Test Method  OIL CONSERVATION DIVISION Approved by: ORIGNAL SONDER WILLIAMS Interest of my knowledge and belief. Approved by: ORIGNAL SONDER WILLIAMS DISTRICT I SUPERVISION  Title:  CCHNICAL ASSISTANT  te: 1/11/99 Phone: (915)687-7148  If this is a change of operator fill in the OGRID number and name of the previous operator  Previous Operator Signature  Previous Operator Signature   |  |                |                   |                            | <del></del>                           | -                                     |                            |               |                                       |   |                     |                  |  |
| 35 Date New Oil 36 Gas Delivery Date 37 Test Date 38 Test Length 39 Tbg. Pressure 40 Csg. Pressure 41 Choke Size 42 Oil 43 Water 44 Gas 45 AOF 46 Test Method  OIL CONSERVATION DIVISION Approved by: ORIGNAL SONDER WILLIAMS Interest of my knowledge and belief. Approved by: ORIGNAL SONDER WILLIAMS DISTRICT I SUPERVISION  Title:  CCHNICAL ASSISTANT  te: 1/11/99 Phone: (915)687-7148  If this is a change of operator fill in the OGRID number and name of the previous operator  Previous Operator Signature  Previous Operator Signature   |  |                |                   |                            |                                       |                                       |                            |               |                                       |   |                     |                  |  |
| 35 Date New Oil 36 Gas Delivery Date 37 Test Date 38 Test Length 39 Tbg. Pressure 40 Csg. Pressure 41 Choke Size 42 Oil 43 Water 44 Gas 45 AOF 46 Test Method  OIL CONSERVATION DIVISION Approved by: ORIGNAL SONDER WILLIAMS Interest of my knowledge and belief. Approved by: ORIGNAL SONDER WILLIAMS DISTRICT I SUPERVISION  Title:  CCHNICAL ASSISTANT  te: 1/11/99 Phone: (915)687-7148  If this is a change of operator fill in the OGRID number and name of the previous operator  Previous Operator Signature  Previous Operator Signature   |  | <del></del>    |                   |                            |                                       |                                       |                            |               |                                       |   |                     |                  |  |
| 41 Choke Size  42 Oil  43 Water  44 Gas  45 AOF  46 Test Method  Chereby certify that the rules of the Oil Conservation Division have been applied with and that the information given above is true and complete to best of my knowledge and belief.  Approved by:  CHIC NAL SIRVED BY CHICAL SIRVED B | I. Well Te                                 |                |                   | <del></del>                |                                       |                                       |                            |               | <del></del>                           |   |                     | <del></del>      |  |
| At Choke Size  42 Oil  43 Water  44 Gas  45 AOF  46 Test Method  Approved by:  OIL CONSERVATION DIVISION  Approved by:  OFIG NAL STAND BY CHORS WILLIAMS  DISTRICT I SUPERVISOR  Title:  CHNICAL ASSISTANT  1e: 1/11/99  Phone: (915)687-7148  If this is a change of operator fill in the OGRID number and name of the previous operator  Previous Operator Signature  Printed Name   | 23 Date New Or                             | 11 36          | Gas Delivery      | Date 37 Test Date          |                                       |                                       | 38 Test Length             |               | 39 Tbg. Pressure                      |   | 40 Csg. Pressure    |                  |  |
| I hereby certify that the rules of the Oil Conservation Division have been uplied with and that the information given above is true and complete to squature:  Approved by:  Approved by:  Approved by:  CHIC NAL SONED BY CHICAME WILLIAMS  Title:  Approval Date:  JAN 2 1 1999  Phone: (915)687-7148  If this is a change of operator fill in the OGRID number and name of the previous operator  Previous Operator Signature  Printed Name   | 41 -                                       |                | <u>-</u>          |                            |                                       |                                       |                            |               |                                       |   |                     |                  |  |
| It hereby certify that the rules of the Oil Conservation Division have been applied with and that the information given above is true and complete to best of my knowledge and belief.  Approved by:  OIL CONSERVATION DIVISION  Approved by:  OHIGIAAL SHAPE BY CHICKS WILLIAMS  DISTRICT I SUPERVISION  Title:  Approval Date:  1/11/99  Phone: (915)687-7148  If this is a change of operator fill in the OGRID number and name of the previous operator  Previous Operator Signature  Printed Name   | 41 Choke Size                              |                | <sup>42</sup> Oil |                            | 43 Water                              |                                       | 44 Gas                     |               | <sup>45</sup> AOF                     |   | 46 Test             | Method           |  |
| best of my knowledge and belief.  Approved by:  Approved by:  Approved by:  CRIGINAL SIBNED BY CHADIS WILLIAMS  Intel name:  K. RIPLEY  Title:  Approval Date:  JAN 2 1 1999  If this is a change of operator fill in the OGRID number and name of the previous operator  Previous Operator Signature  Printed Name  OIL CONSERVATION DIVISION  Approved by:  CRIGINAL SIBNED BY CHADIS WILLIAMS  DISTRICT I SUPERIOR SIGNAL SIBNED BY CHADIS WILLIAMS  DISTRICT I SUPERIOR SIBNED BY CHADIS WILLIAMS  DISTRICT  |  |                |                   |                            |                                       |                                       |                            |               |                                       |   |                     |                  |  |
| Approved by: CRIGNAL STAND BY CHICK WILLIAMS Inted name:  K. RIPLEY  Title:  CHNICAL ASSISTANT  Te: 1/11/99  Phone: (915)687-7148  If this is a change of operator fill in the OGRID number and name of the previous operator  Previous Operator Signature  Printed Name  Printed Name   | I hereby certify to<br>noticed with and to | that the rules | of the Oil Co     | nservation D               | Division have been                    | 1                                     |                            | OIL CONG      | CEDVATION                             |   |                     | <del></del>      |  |
| Title:  Approval Date:  JAN 2 1 1999  Phone: (915)687-7148  If this is a change of operator fill in the OGRID number and name of the previous operator  Previous Operator Signature  Printed Name  | DOST OF THE KINDS                          | ledge and be   | lief.             | ibove is truc              | and complete to                       |                                       |                            |               |                                       |   |                     |                  |  |
| RECHNICAL ASSISTANT  te: 1/11/99  Phone: (915)687-7148  If this is a change of operator fill in the OGRID number and name of the previous operator  Previous Operator Signature  Printed Name  Printed Name  | _  | KIKI           | Alles             |                            |                                       | Approv                                | ed by: (                   | URIGINAL      | SIBNED BY 1                           | imbiš M                                       | /ILLIAM             | ٤                |  |
| Approval Date:  JAN 2 1 1999  te: 1/11/99  Phone: (915)687-7148  If this is a change of operator fill in the OGRID number and name of the previous operator  Previous Operator Signature  Printed Name   |  | ·              | ′ ()              |                            |                                       | Title:                                |                            | L15           | <del>Hilly i Sw</del> ri              | <del>:::\/:50</del>                           | <del></del>         | <del></del>      |  |
| te: 1/11/99  Phone: (915)687-7148  If this is a change of operator fill in the OGRID number and name of the previous operator  Previous Operator Signature  Printed Name   | itle:                                      |                | <u>~</u>          |                            |                                       |                                       |                            | <del></del>   |                                       |   |                     |                  |  |
| If this is a change of operator fill in the OGRID number and name of the previous operator  Previous Operator Signature  Printed Name  Printed Name  | nto:                                       |                | <del> </del>      | <del></del>                |                                       | Approv                                | pprovai Date:              |               | JAN 21 19                             | 399   | •                   |                  |  |
| If this is a change of operator fill in the OGRID number and name of the previous operator  Previous Operator Signature  Printed Name  | 1/11/99                                    |                | P                 | hone: (915                 | 5)687-7148                            |                                       |                            |               |                                       |   |                     | <del></del>      |  |
| Previous Operator Signature Printed Name   | If this is a chang                         | ge of operato  | r fill in the OC  | GRID numbe                 | er and name of the                    | previous on                           | erator                     |               |                                       |   |                     |                  |  |
|  |  |                |                   |                            |                                       |                                       |                            |               | * * * * * * * * * * * * * * * * * * * |   |                     |                  |  |
|  |  | Previou        | s Operator Sig    | gnature                    |                                       | P                                     | rinted Name                |               | · · · · · · · · · · · · · · · · · · · | Title   |                     | Date             |  |