

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other in-
structions on
reverse side)Form approved.
Budget Bureau No. 42-R355.5.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL:		OIL WELL <input type="checkbox"/>	GAS WELL <input checked="" type="checkbox"/>	DRY <input type="checkbox"/>	Other _____
b. TYPE OF COMPLETION:					
NEW WELL <input checked="" type="checkbox"/>	WORK OVER <input type="checkbox"/>	DEEP-EN <input type="checkbox"/>	PLUG BACK <input type="checkbox"/>	DIFF. REVR. <input type="checkbox"/>	Other _____
2. NAME OF OPERATOR					
Cotton Petroleum Corporation					
3. ADDRESS OF OPERATOR					
717-17th Street, Suite 2200, Denver, Colorado 80202					
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*					
At surface					
1850' FSL & 1850' FEL Section 3					
At top prod. interval reported below					
At total depth					
14. PERMIT NO.			DATE ISSUED		
			3-10-80		
15. DATE SPUDDED		16. DATE T.D. REACHED		17. DATE COMPL. (Ready to prod.)	
4-5-80		4-11-80		5-15-80	
18. ELEVATIONS (DF, REB, RT, GR, ETC.)*		19. ELEV. CASINGHEAD			
6819' GR		-----			
20. TOTAL DEPTH, MD & TVD		21. PLUG, BACK T.D., MD & TVD		22. IF MULTIPLE COMPL., HOW MANY*	
4080'		4044'		2	
23. INTERVALS DRILLED BY				ROTARY TOOLS	
→				O-TD	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*					25. WAS DIRECTIONAL SURVEY MADE
Pictured Cliffs 2976-3043					No
26. TYPE ELECTRIC AND OTHER LOGS RUN					27. WAS WELL CORED
DIL/ CNL/GDC/GR					No
28. CASING RECORD (Report all strings set in well)					
CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
12 1/4"	24#	308'	12 1/4	250 SXS	0
4 1/2"	10.5#	4080'	7 7/8	700 SXS	0
29. LINER RECORD					
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	
30. TUBING RECORD					
SIZE	DEPTH SET (MD)	PACKER SET (MD)			
2 3/8	3810	3810			
31. PERFORATION RECORD (Interval, size and number)					
Pictured Cliffs 2976-85, 2988-92, 2995-3008, 3020-23, 3039-43 1 JSPF					
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.					
DEPTH INTERVAL (MD)			AMOUNT AND KIND OF MATERIAL USED		
2976-3043			Frac w/27,500# 20/40 sd		
33.* PRODUCTION					
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)			WELL STATUS (Producing or shut-in)
		Dual Completion w/Chacra flowing up tbg-csg annulus			Flowing
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.
8-5-80	24	3/4	→	0	458
WATER—BBL.	GAS—OIL RATIO				
tr	---				
FLOW. TUBING PRESS.	CAS NG PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.
25	N/A	→			
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)					TEST WITNESSED BY
vented during test					H. Davis
35. LIST OF ATTACHMENTS					
NM C-102, NM C-104					
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records					
SIGNED <u>DEWID/402</u>		TITLE <u>Division Production Manager</u>		DATE <u>SEP 12 1980</u>	

*(See Instructions and Spaces for Additional Data on Reverse Side)

FARMINGTON DISTRICT

BY

NMOCC

All distances must be from the corner boundaries of the Section.

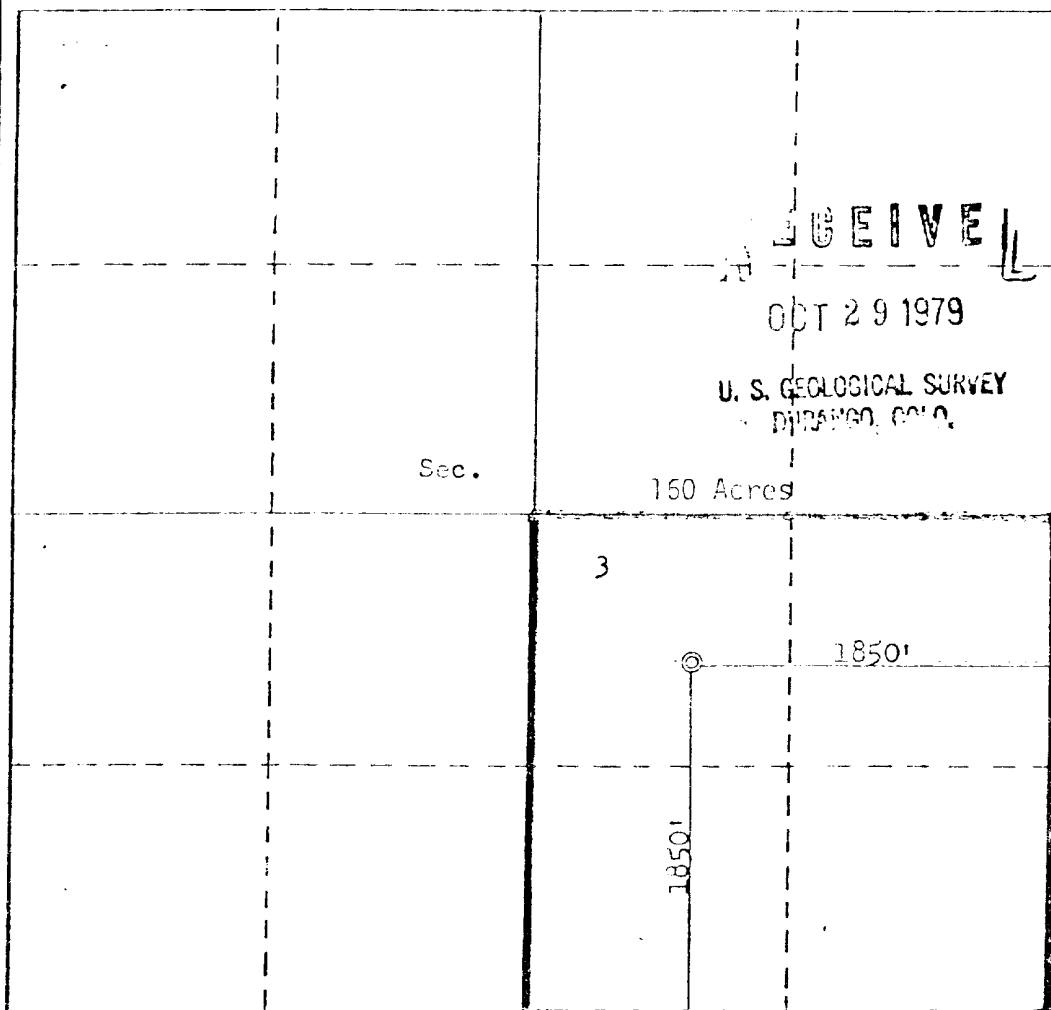
COTTON PETROLEUM CORPORATION			LEASE		Well No.
APACHE					30
Unit Letter	Section	Township	Range	County	
J	3	24N	4W	Rio Arriba	
Actual Footage Location of Well:					
1850		feet from the	South	Line and	1850
				feet from the	East
					Line
Ground Level Elev.	Producing Formation		Pool		Dedicated Acreage:
6819	Pictured Cliffs		So. Blanco Pictured Cliffs		160
					Acres

1. Outline the acreage dedicated to the subject well by colored pencil or hatchure marks on the plat below.
2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).
3. If more than one lease of different ownership is dedicated to the well, have the interests of all owners been consolidated by communization, unitization, force-pooling, etc?

☐ Yes ☐ No If answer is "yes," type of consolidation _____

If answer is "no," list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if necessary.) _____

No allowable will be assigned to the well until all interests have been consolidated (by communization, unitization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interests, has been approved by the Commission.



CERTIFICATION

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.

D. E. Wood
Name
D. E. Wood
Position
Division Production Mgr.
Company
Cotton Petroleum Corporation
Date
October 23, 1979

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my knowledge and belief.

Date Surveyed
October 14, 1979
Registered Professional Engineer
and/or Land Surveyor
Fred B. Kern Jr.
Certificate No. 3250

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 a.
Effective 1-1-65

U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

I. Operator
Cotton Petroleum Corporation

Address
717-17th Street, Suite 2200, Denver, Colorado 80202

Reason(s) for filing (Check proper box)

New Well	<input checked="" type="checkbox"/>	Change in Transporter of:	
Recompletion	<input type="checkbox"/>	Oil	<input type="checkbox"/>
Change in Ownership	<input type="checkbox"/>	Casinghead Gas	<input type="checkbox"/>
		Dry Gas	<input type="checkbox"/>
		Condensate	<input type="checkbox"/>

Other (Please explain)

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Apache	Well No. 30	Pool Name, including Formation Chacra & P.C. Wildcat	Kind of Lease Jicarilla State, Federal or Fee Indian	Lease 12
Location Unit Letter J : 1850 Feet From The South Line and 1850 Feet From The East Line of Section 3 Township 24N Range 4W, NMPM, Rio Arriba				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/> None	Address (Give address to which approved copy of this form is to be sent)
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> El Paso Natural Gas Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 990, Farmington, NM 87401
If well produces oil or liquids, give location of tanks.	Unit J Sec. 3 Twp. 24N Rge. 4W Is gas actually connected? No When

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Reservoir	Drill
		XX	XX					
Date Spudded 4-5-80	Date Compl. Ready to Prod. 5-15-80	Total Depth 4080'	P.B.T.D. 4044'					
Elevations (DF, RKB, RT, GR, etc.) 6819' GR	Name of Producing Formation Pictured Cliffs	Top Oil/Gas Pay 3840	Tubing Depth 4080					
Perforations P.C. 2976-85, 2988-92, 2995-3008, 3020-23, 3039-43 1 JSPF			Depth Casing Shoe					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
12 1/4	8 5/8	308	250 sxs to surface					
7 7/8	4 1/2	4080	700 sxs					

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed 10% of total volume of load oil or be for full 24 hours)

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
458	24	0	None
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
Flow up tbg-csg annulus	25	N/A	3/4"

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

O.E. Wood / Max
(Signature)

Division Production Manager
(Title)

9-4-80

OIL CONSERVATION COMMISSION

APPROVED _____, 19__

BY _____

TITLE _____

This form is to be filed in compliance with RULE 1104
If this is a request for allowable for a newly drilled or
well, this form must be accompanied by a tabulation of the
tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely
on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes in
well name or number, or transporter, or other such change of