

State of New Mexico  
Energy, Minerals and Natural Resources Department  
OIL CONSERVATION DIVISION

Form C-103

Sundry Notices and Reports on Wells

1. Type of Well  
GAS

2. Name of Operator  
Meridian Oil Inc.

3. Address of Operator  
PO Box 4289, Farmington, NM 87499

4. Well Location  
1050'S, 990'W  
Sec.15,T-32-N,R-10-W NMPM San Juan County

5. Type of Lease  
Fee

6. State Oil & Gas Lease #

7. Lease Name/Unit Name  
Bonds ~~Pool~~ Unit

8. Well No.  
1

9. Pool Name or Wildcat  
Blanco Mesa Verde

10. Elevations  
5948 'GR

11. Intent to/Subsequent Report of : casing repair

12. Describe proposed or completed operations:

It is intended to perform a casing repair per the attached procedure and wellbore diagram.

RECEIVED  
MAY 07 1990  
OIL CON. DIV  
DIST. 3

SIGNATURE *John B. Bland* (JS) Regulatory Affairs

5-7-90  
Date

=====  
(This space for State use)

APPROVED BY \_\_\_\_\_  
CONDITION OF APPROVAL, IF ANY:

TITLE \_\_\_\_\_

~~ADVISOR~~ DISTRICT # \_\_\_\_\_

DATE

MAY 08 1990

**Bonds Pool Unit #1  
Recommended Workover Procedure**

1. Move in blow tank for wellbore fluids. Install and test anchors as necessary.
2. MOL and RU workover rig equipped with power swivel, pump and steel pit. Hold safety meeting and comply with all BLM, NMOC and MOI regulations.
3. RU return line to blow tank, record casing, tubing and bradenhead pressures. Blow well down and kill as required with 1% KCL water.
4. ND wellhead and NU 6" 3,000 PSI BOP and stripping head.
5. TOOH with 166 joints of 2 3/8" 4.7# J-55 tubing. Visually inspect and replace bad joints.
6. TIH with 4 3/4" bit and 5 1/2" casing scraper and clean out COTD at 5200'.
7. RU wireline and set top drillable bridge plug at 4750'.
8. Load hole with water. Pressure test 5 1/2" casing to 1,000 PSI.
9. ND 6" 3,000 PSI BOP and 10" 600 x 6" 600 Rector Tubinghead.
14. NU 10" 3,000 PSI BOP. Pressure test to 1,000 PSI.
15. Spear 5 1/2" casing, and back off at 1500'.
17. RU casing crew, TOOH and lay down 5 1/2" casing.
18. RU wireline and run GR-CBL-CCL from top of 5 1/2" casing to surface. Locate TOC.
19. TIH with 7 5/8" retrievable bridge plug on tubing. Set RBP at 1400'. Spot sand on top of RBP.
20. Load hole with water. Pressure test casing and RBP to 1,000 PSI for 15 minutes. TOOH.
21. RU wireline and perforate 2 squeeze holes above TOC. Insure that hole is full prior to firing.
22. Run 7 5/8" fullbore packer on 2 3/8" tubing and set 200' above squeeze holes.
23. Open bradenhead valve and establish circulation with water. Mix and pump class B cement with 2% CaCl down 2 3/8" tubing until cement is circulated to surface. (Note: with TOC @ 880', calculated annular volume is 179 cf. Allow for at least 150% excess. 448 cf or 380 sacks.)

Volume between 7 5/8" casing and 9 5/8" hole = 0.1882 cf/ft.

Volume between 7 5/8" casing and 10 3/4" casing = 0.2495 cf/ft.

Once cement has been circulated to surface, close bradenhead valve and displace tubing with water (3 bbl.), release packer, reverse circulate 2 tubing volumes of water (6 bbl. or 0.1624 gal/ft), pull 2 stands, reset packer and reapply squeeze pressure of 1,000 PSI. WOC 18 hours.

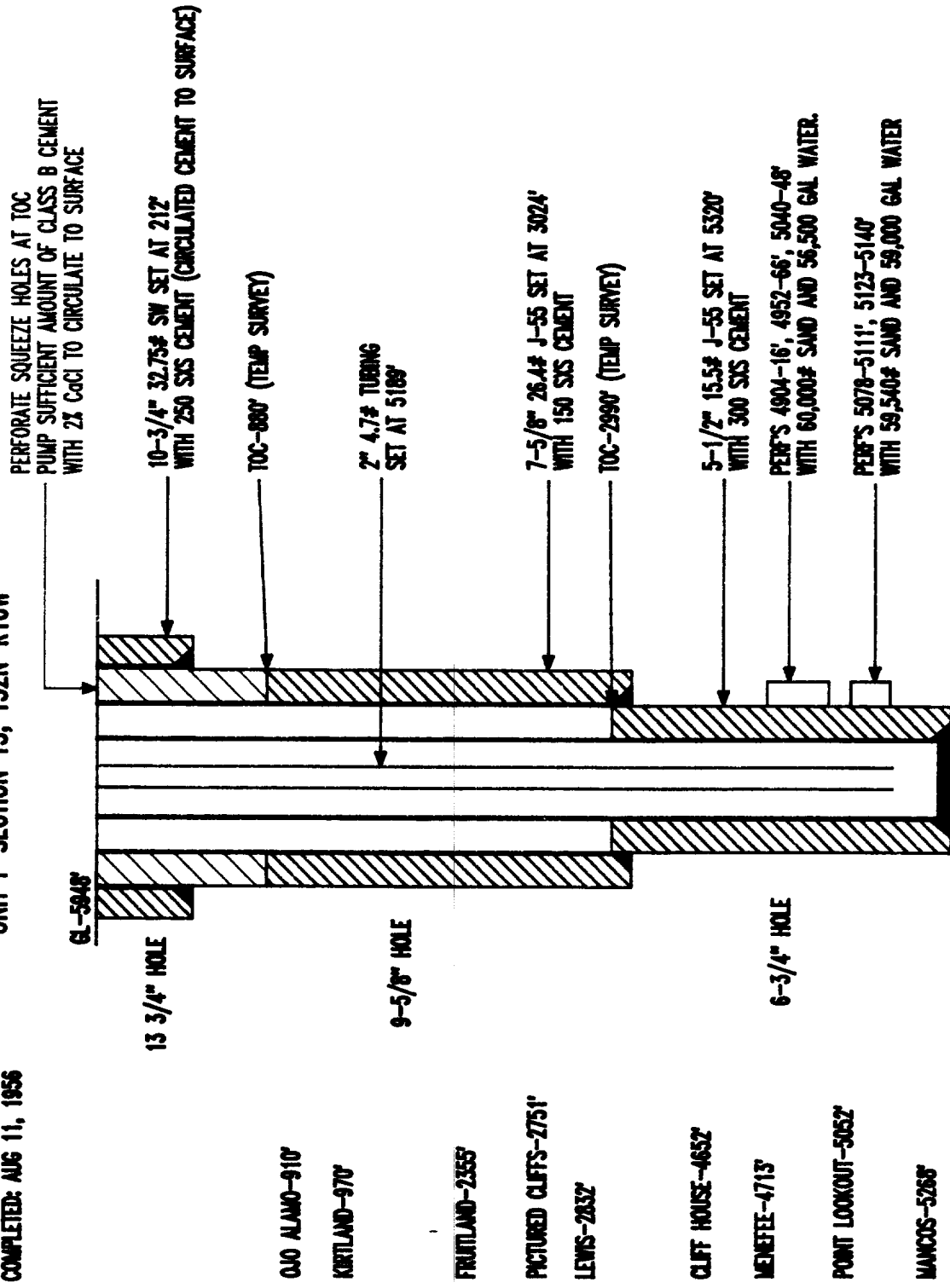


# **PROPOSED REMEDIAL CEMENTING**

## **BONDS POOL UNIT #1**

UNIT P SECTION 15, T32N-R10W

COMPLETED: AUG 11, 1956



NEW MEXICO OIL CONSERVATION COMMISSION  
Santa Fe, New Mexico

(Form C-104)  
(Revised 7/1/52)

REQUEST FOR (OIL) - (GAS) ALLOWABLE

New Well  
Recompletion

This form shall be submitted by the operator before an initial allowable will be assigned to any completed Oil or Gas well. Form C-104 is to be submitted in QUADRUPLICATE to the same District Office to which Form C-101 was sent. The allowable will be assigned effective 7:00 A.M. on date of completion or recompletion, provided this form is filed during calendar month of completion or recompletion. The completion date shall be that date in the case of an oil well when oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

Farmington, N.M.

August 27, 1956

(Place)

(Date)

WE ARE HEREBY REQUESTING AN ALLOWABLE FOR A WELL KNOWN AS:

El Paso Natural Gas Company Bonds Pool Unit, Well No. 1, in SW 1/4 SW 1/4,

(Company or Operator)

(Lease)

M

Sec. 15

T. 32N

R. 10W

NMPM,

Blanco

Pool

Unit Letter

San Juan

County. Date Spudded 7-25-56

Date Completed 8-11-56

Please indicate location:

D	C	B	A
E	F	G	H
L	K	J	I
M	N	O	P
X			

1050'S, 990'W

Casing and Cementing Record

Size Feet Sax

10 3/4"	201'	250
7 5/8"	3014'	250
5 1/2"	5310'	300
2"	5189'	---

Elevation 5948' Total Depth 5320' app C.O. 5200

Top oil/gas pay 4904' (Perf.) Name of Prod. Form. Mesa Verde

Casing Perforations: 4904-4916, 4952-4966, 5040-5048, 5078-5111, or 5123-5140.

Depth to Casing shoe of Prod. String 5320'

Natural Prod. Test BOPD

based on bbls. Oil in Hrs. Mins.

Test after acid or shot BOPD

Based on bbls. Oil in Hrs. Mins.

Gas Well Potential A.O.F. - 10,790 MCF/D, Ch. Volume - 5,131 MCF/D.

Size choke in inches 3/4"

Date first oil run to tanks or gas to Transmission system: w/o Pipeline

Transporter taking Oil or Gas: El Paso Natural Gas Company

Remarks:

I hereby certify that the information given above is true and complete to the best of my knowledge.

Approved AUG 30 1956, 19

El Paso Natural Gas Company  
(Company or Operator)

By: W. F. Coel  
(Signature)

By: [Signature]

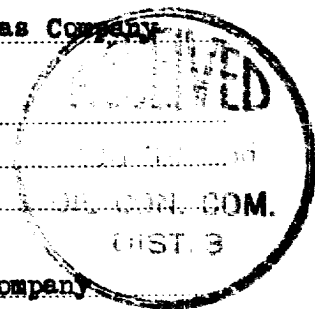
Title PETROLEUM ENGINEER DIST. NO. 3

Title Petroleum Engineer

Send Communications regarding well to:

Name E. J. Coel

Address Box 997, Farmington, N.M.



**CALIFORNIA CONSERVATION COMMISSION**  
**PERMIT OFFICE**

Project Name		Date	
Project Location		County	
Project Description		Permit Type	
Applicant Name		Applicant Address	
Applicant Phone		Applicant Email	
Project Start Date		Project End Date	
Project Status		Project Notes	
Project Budget		Project Cost	
Project Impact		Project Mitigation	
Project Review		Project Approval	
Project Comments		Project Signature	
Project Date		Project Initials	

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-104  
Revised 10-01-78  
Format 06-01-83  
Page 1

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. **Operator**  
Meridian Oil Inc.

**Address**  
P. O. Box 4289, Farmington, NM 87499

**Reason(s) for filing (Check proper box)**

<input type="checkbox"/> New Well	<input type="checkbox"/> Change in Transporter of:	<b>Other (Please explain)</b> Meridian Oil Inc. is Operator for El Paso Production Company
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Oil	
<input checked="" type="checkbox"/> Change in <del>Ownership</del> Operatorship	<input type="checkbox"/> Casinthead Gas <input checked="" type="checkbox"/> Dry Gas <input type="checkbox"/> Condensate	

If change of ownership give name and address of previous owner: El Paso Natural Gas Company, P. O. Box 4289, Farmington, NM 87499

II. DESCRIPTION OF WELL AND LEASE

<b>Lessee Name</b> Bonds	<b>Well No.</b> 1	<b>Pool Name, including Formation</b> Blanco Mesa Verde	<b>Kind of Lease</b> State, Federal or (fee ) Fee	<b>Lease No.</b>
<b>Location</b>				
Unit Letter <u>M</u> : <u>1050</u> Feet From The <u>South</u> Line and <u>990</u> Feet From The <u>West</u>				
Line of Section <u>15</u> Township <u>32N</u> Range <u>10W</u> , NMPM, <u>San Juan</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

<b>Name of Authorized Transporter of Oil</b> <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	<b>Address (Give address to which approved copy of this form is to be sent)</b>
Meridian Oil Inc.	P. O. Box 4289, Farmington, NM 87499
<b>Name of Authorized Transporter of Casinthead Gas</b> <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	<b>Address (Give address to which approved copy of this form is to be sent)</b>
El Paso Natural Gas Company	P. O. Box 4289, Farmington, NM 87499
<b>If well produces oil or liquids, give location of tanks.</b>	<b>Is gas actually connected? When</b>
Unit <u>M</u> Sec. <u>15</u> Twp. <u>32N</u> Rge. <u>10W</u>	

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

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. CERTIFICATE OF COMPLIANCE

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

[Signature]  
(Signature)  
Drilling Clerk  
(Title)  
11-1-86  
(Date)

OIL CONSERVATION DIVISION  
NOV - 1 1985

APPROVED \_\_\_\_\_, 19\_\_\_\_  
BY [Signature]  
TITLE SUPERVISION DISTRICT # 3

This form is to be filed in compliance with RULE 1104.  
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.  
All sections of this form must be filled out completely for allowable on new and recompleted wells.  
Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.  
Separate Forms C-104 must be filed for each pool in multiply completed wells.