Submit 3 Copies

CONDITIONS OF APPROVAL, IF ANY:

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-163 **Revised 1-1-89**

to Appropriate District Office OIL CONSERVATION DIVISION DISTRICT I P.O. Box 1980, Hobbs, NM 88240 WELL AM NO. P.O. Box 2088 30-045-27425 Santa Fe, New Mexico 87504-2088 DISTRICT II P.O. Drawer DD, Artesia, NM 88210 STATEXX FEE DISTRICT III
1000 Rio Brazos Rd., Aziec, NM 87410 6. State Oil & Gas Lease No. SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A 7. Lease Name or Unit Agreement Name DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) 1. Type of Well: WELL X MET Pubco State Com OTHER 2. Name of Operator 8. Well No. GREAT WESTERN DRILLING CO. 9. Pool same or Wildcat 3. Address of Operator Blanco P. C. 2550 La Plata Hwy, Farmington, NM 87401 4. Well Location Unit Letter N: 795 Feet From The South Line and 1525 Feet From The West Line 36 31N Range 11W Township NMPM San Juan County 10. Elevation (Show whether DF, RKB, RT, GR, etc.) 5982' GR Check Appropriate Box to Indicate Nature of Notice, Report, of Other Data 11. SUBSEQUENT REPORT OF: NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING TEMPORARILY ABANDON CHANGE PLANS PLUG AND ABANDONMENT COMMENCE DRILLING OPNS. CASING TEST AND CEMENT JOB **PULL OR ALTER CASING** OTHER: 2-7/8" tubing for long string OTHER: 12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103. Spud 12½" hole, 7:00 A.M. 10-1-89. 10-1-89 Ran 6 jt's 7-5/8" 26.40# 8rd. J-55 ST&C csg. 205' set @ 217' K.B. Cemented w/150 sx class "6" + 2% Ca. Cl. plug down 6:30 P.M. 10-1-89. Cement did not circulate, ran 3 jt's 1" on the outside of csg to 57', cemented w/35 sx class "G" + 2% Ca. Cl. cement to surface 10-2-89. WOC 12 hrs. Nipple up B.O.P. & test B.O.P. & 7-5/8" csg. 600# 30 min. o.k. T.D. 6-3/4" hole 10-5-89, ran 86 jt's 2-7/8" EUE 8rd. 6.5# tubing for production string. Cemented w/150 sx Class "G" + 2% Ca. Cl. plug down @ 1:00 A.M. 10-5-89. 10-6-89 Move drilling rig off. 10-12-89 Move in completion rig, ran 1" I.J. tubing outside of 2-7/8" tubing to 2027' pump 627 cu. ft. of cement thru 1" circulate cement to surface, hold strain on 2-7/8" 12 hrs. & W.O.C. 10-19-89 Perforate 2-7/8" tubing & frac well. I hereby certify that the information above is true and complete to the best of my knowledge and belief. mme Superintendent DATE 1-3-90

TELEPHONE NO. TYPE OR PRINT NAME (This space for State Use) SUPERVISOR DISTRICT . Original Signed by FRANK T. CHAVEZ DATIAN 04 1996 TITLE

mit 5 Copie i ropriate District Office Box 1980, Hobbs, NM 88240

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-104 Revised 1-1-89 See Instructions at Bottom of Page

SUPERVISOR DISTRICT

DISTRICT II P.O. Drawer DD, Artesia, NM 88210

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III

1000 Rio Brazos Rd., Aztec, NM 8/410	REQUEST FOR . TO TRANS									
I. Operator	TO THANG	TOTT OIL	AND MAI	Well API No.						
GREAT WESTERN DRILLING CO.				30-045-27425						
Address		07/01								
2550 La Plata Hwy Reason(s) for Filing (Check proper box)	, Farmington, N	M 8/401	Othe	r (Please expla	in)					
New Well	Change in Tran	sporter of:	_	•						
Recompletion	· —	Gas 🔀								
Change in Operator	Casinghead Gas Con	idensite 🔲								
f change of operator give name nd address of previous operator			 		·					
L DESCRIPTION OF WELL										
Lease Name	i I	ol Name, Includia	ng Formation		Kind o	of Lease Federal or Fee	Le E-538	25e No. 6 E-3150		
PUBCO STATE COM	2	Blanco	Picture	ed Cliff	s Ext	State	$1\overline{B}-1\overline{1}\overline{3}$	70 - 313		
Location Unit LetterN	: 795 Fee	t From TheS	South Line	and _1525	· Fee	et From The _	West	Line		
Section 36 Townshi	p 31N Rar	nge 11W	, NI	ирм,	San Jua	an		County		
	ray and distance and	. X (240 740							
III. DESIGNATION OF TRAN Name of Authorized Transporter of Oil	or Condensate	AND NATU	Address (Give	address to wh	uch approved	copy of this fo	orm is to be se	;;;)		
None										
Name of Authorized Transporter of Casing					Address (Give address to which approved copy of this form is to be sent)					
El Paso Natural Gas Co	0			9, Farm	ington, NM 87499					
If well produces oil or liquids, give location of tanks.	Unit Sec. Tw	Is gas actually No		When 1-	? 25–90					
f this production is commingled with that: V. COMPLETION DATA	from any other lease or pool,	give commingl	ing order numb	er:						
Designate: Type of Completion	Oil Well	Gas Well X	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v		
Date Spudded	Date Compl. Ready to Pro-	d.	Total Depth	·	*	P.B.T.D.	J	-1		
10-1-89	11-10-89	2777 '			2720'					
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Format	Top Oil/Gas Pay			Tubing Depth					
5982 GR	Pictured Clift	fs	25	<u>78</u>						
Perforations						Depth Casir				
2578-2710	TINDIO O	ODIC AND	CEN CENTER	IC DECOR	<u>.</u>	2777	' 			
		CEMENTING RECORD			SACKS CENERAL					
HOLE SIZE	CASING & TUBIN	DEPTH SET			SACKS CEMENT 150 sx class "B" 2% CaC					
121"	cement did not	t circula			ran 111 t					
<u>3 </u>	to surface	CIICAIA	10 00 30	irracc,	Lan I	55 20 3	, pump	35 5K CIII		
6-3/4"	2-7/8" tubing	g for csg		2777		pump 6	27 cu. 1	ft. 65/35		
V. TEST DATA AND REQUES	ST FOR ALLOWABI	LE								
OIL WELL. (Test must be after t	recovery of total volume of lo	ad oil and must	be equal to or	exceed top all	owable for thi	s depth or be	for full 24 hou	rs.)		
Date First New Oil Run To Tank	Date of Test	Producing M	thod (Flow, pr	ump, sas lite	事情 医	m				
				- 1		1 2 13	4111			
Length of Tes.	Tubing Pressure		Casing Press	ire 🦸		Choke Size				
A D A D A D A D A D A D A D A D A D A D	0.1 10.1		Water - Bbis		1340	Gas- MCF				
Actual Prod. During Test	ing Test Oil - Bbls.			THE CONTRACTOR OF THE CONTRACT						
GAS WELL					7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	<u> </u>				
Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF			Gravity of Candy State (assume					
900.2	3 hrs.		None	/CL '-\			6.5			
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)		Casing Press			Choke Size				
3/4" open flow	Tubingless sl		omp.	06 PSI	:	_!	3/4"			
VI. OPERATOR CERTIFIC			11 (DIL CO	NSERV	MOITA	DIVISIO	'nΝ		
I hereby certify that the rules and regularity Division have been complied with and			`	00,						
Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.			Dota	Date Approved			4 1990			
000			Date	2 Whhi a AE				_ , \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		
L. E. Wark Tur				By Original Signed by FRANK T. CHAVEZ						
Signature			∥ By_	Urigino	i signed by	THAM I	C11/17 L&			
D. E. Baxter Superintender				i t						

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

Printed Name

Date

1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance

Title.

- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.

Title

327-0494

(505) 327-049 Telephone No.