

**Santa Fe, New Mexico**

Mail to District Office, Oil Conservation Commission, to which Form C-101 was sent not later than twenty days after completion of well. Follow instructions in Rules and Regulations of the Commission. Submit in **QUINTUPLICATE**. If State Land submit 6 Copies

John E. Kelly Gulf State "B"  
(Company or Operator) (Lease)  
Well No. 2, in 1/4 of NE 1/4, of Sec. 16, T. 19, R. 37, NMPM.  
Bumont Pool, Lea County.  
Well is 260 feet from North line and 200 feet from East line  
of Section 16. If State Land the Oil and Gas Lease No. is  
Drilling Commenced April 24, 1957 Drilling was Completed May 6, 1957  
Name of Drilling Contractor Howard S. Holmes Drilling Contractors  
Address Hobbs, New Mexico  
Elevation above sea level at Top of Tubing Head 3000 ft. The information given is to be kept confidential until  
Not Confidential 19

No. 1, from 3-1-2 to 21-00 No. 4, from \_\_\_\_\_ to \_\_\_\_\_  
No. 2, from \_\_\_\_\_ to \_\_\_\_\_ No. 5, from \_\_\_\_\_ to \_\_\_\_\_  
No. 3, from \_\_\_\_\_ to \_\_\_\_\_ No. 6, from \_\_\_\_\_ to \_\_\_\_\_

Include data on rate of water inflow and elevation to which water rose in hole.

No. 1, from.....to.....feet. ....

No. 2, from.....to.....feet. ....

No. 3, from.....to.....feet. ....

No. 4, from.....to.....feet. ....

CASING RECORD							
SIZE	WEIGHT PER FOOT	NEW OR USED	AMOUNT	KIND OF SHOE	CUT AND PULLED FROM	PERFORATIONS	PURPOSE
2 5/8	24	NEW	307	Tex. Patt.			
2 1/2	14	NEW	3045	Fleet		3045-3 50	

SIZE OF HOLE	SIZE OF CASING	WHERE SET	NO. SACKS OF CEMENT	METHOD USED	MUD GRAVITY	AMOUNT OF MUD USED
10 1/4	6 1/2	307	225	plug		
7 7/8	5 1/2	3043	400	plug		

(Record the Process used, No. of Qts. or Gals. used, interval treated or shot.)

Iterations 3000-3500 per machine with 200 Hz and fractured with  
3000 c/s. + 10,000 Hz.

Result of Production Stimulation.....Flowed at 10/24" choke 20-330 GPM-50

..Depth Cleaned Out.....

1      **ORD OF DRILL-STEM AND SPECIAL TESTS**

If drill-stem or other special tests or deviation surveys were made, submit report on separate sheet and attach hereto

**TOOLS USED**

Rotary tools were used from.....feet to.....feet, and from.....feet to.....feet.  
Cable tools were used from.....feet to.....feet, and from.....feet to.....feet.

**PRODUCTION**

Put to Producing....., 19.....

OIL WELL: The production during the first 24 hours was.....barrels of Liquid of which.....% was  
was oil; .....% was emulsion; .....% water; and.....% was sediment. A.P.I.  
Gravity.....

GAS WELL: The production during the first 24 hours was.....M.C.F. plus.....barrels of  
liquid Hydrocarbon. Shut in Pressure.....lbs.

Length of Time Shut in.....

**PLEASE INDICATE BELOW FORMATION TOPS (IN CONFORMANCE WITH GEOGRAPHICAL SECTION OF STATE):**

**Southeastern New Mexico**

**Northwestern New Mexico**

T. Anhy.....	T. Devonian.....	T. Ojo Alamo.....
T. Salt.....	T. Silurian.....	T. Kirtland-Fruitland.....
B. Salt.....	T. Montoya.....	T. Farmington.....
T. Yates.....	T. Simpson.....	T. Pictured Cliffs.....
T. 7 Rivers.....	T. McKee.....	T. Menefee.....
T. Queen.....	T. Ellenburger.....	T. Point Lookout.....
T. <del>Grayburg</del> .....	T. Gr. Wash.....	T. Mancos.....
T. San Andres.....	T. Granite.....	T. Dakota.....
T. Glorieta.....	T. ....	T. Morrison.....
T. Drinkard.....	T. ....	T. Penn.....
T. Tubbs.....	T. ....	T. ....
T. Abo.....	T. ....	T. ....
T. Penn.....	T. ....	T. ....
T. Miss.....	T. ....	T. ....

**FORMATION RECORD**

From	To	Thickness in Feet	Formation	From	To	Thickness in Feet	Formation
0	300	300	Caliche surface beds				
300	1240	1240	red bed, shaley sand				
1240	1250	10	Anhydrite				
1250	2000	1000	red w/anhydrite stratifiers				
2000	2070	145	brown color red, anhydrite				
2070	2100	30	colomite, anhydrite, w/shaley sand stratifiers				
2100	3000	900	red stratifiers w/colo- rite and anhydrite.				

ATTACH SEPARATE SHEET IF ADDITIONAL SPACE IS NEEDED

I hereby swear or affirm that the information given herewith is a complete and correct record of the well and all work done on it so far  
as can be determined from available records.

....., 19.....  
(Date)

Company or Operator.....

Address.....

Name.....

Position or Title.....