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**NEW MEXICO OIL CONSERVATION COMMISSION  
WELL COMPLETION OR RECOMPLETION REPORT AND LOG**

Form C-105  
Revised 11-1-76

|                                |                                         |
|--------------------------------|-----------------------------------------|
| 5a. Indicate Type of Lease     |                                         |
| State <input type="checkbox"/> | Fee <input checked="" type="checkbox"/> |
| 5. State Oil & Gas Lease No.   |                                         |
|                                |                                         |

|                                                                                                                 |                                                                                                         |
|-----------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------|
| 1a. TYPE OF WELL                                                                                                |                                                                                                         |
| OIL WELL <input checked="" type="checkbox"/>                                                                    | GAS WELL <input type="checkbox"/> DRY <input type="checkbox"/> OTHER <input type="checkbox"/>           |
| b. TYPE OF COMPLETION                                                                                           |                                                                                                         |
| NEW WELL <input checked="" type="checkbox"/> WORK OVER <input type="checkbox"/> DEEPEN <input type="checkbox"/> | PLUG BACK <input type="checkbox"/> DIFF. RESVR. <input type="checkbox"/> OTHER <input type="checkbox"/> |

|                                |
|--------------------------------|
| 7. Unit Agreement Name         |
| 8. Farm or Lease Name          |
| A. L. Christmas (NCT-C)        |
| 9. Well No.                    |
| 12                             |
| 10. Field and Pool, or Wildcat |
| Under Drinkard                 |

|                                  |  |
|----------------------------------|--|
| 2. Name of Operator              |  |
| Gulf Oil Corporation             |  |
| 3. Address of Operator           |  |
| Box 670, Hobbs, New Mexico 88240 |  |

|                                                                               |                                                                              |
|-------------------------------------------------------------------------------|------------------------------------------------------------------------------|
| 4. Location of Well                                                           |                                                                              |
| UNIT LETTER <u>E</u>                                                          | LOCATED <u>1855</u> FEET FROM THE <u>North</u> LINE AND <u>710</u> FEET FROM |
| THE <u>West</u> LINE OF SEC. <u>18</u> TWP. <u>22=S</u> RGE. <u>37-E</u> NMPM |                                                                              |

|            |
|------------|
| 12. County |
| Lea        |

|                  |                       |                                  |                                        |
|------------------|-----------------------|----------------------------------|----------------------------------------|
| 15. Date Spudded | 16. Date T.D. Reached | 17. Date Compl. (Ready to Prod.) | 18. Elevations (DF, RKB, RT, GR, etc.) |
| 8-11-77          | 8-24-77               | 9-1-77                           | 3432' GL                               |

|                      |
|----------------------|
| 19. Elev. Casinghead |
| --                   |

|                 |                    |                                  |                          |              |             |
|-----------------|--------------------|----------------------------------|--------------------------|--------------|-------------|
| 20. Total Depth | 21. Plug Back T.D. | 22. If Multiple Compl., How Many | 23. Intervals Drilled By | Rotary Tools | Cable Tools |
| 6700'           | 6671'              | Single                           | 0-6700'                  |              | --          |

|                                                                   |  |
|-------------------------------------------------------------------|--|
| 24. Producing Interval(s), of this completion - Top, Bottom, Name |  |
| 6429' to 6598'                                                    |  |

|                                 |
|---------------------------------|
| 25. Was Directional Survey Made |
| No                              |

|                                      |
|--------------------------------------|
| 26. Type Electric and Other Logs Run |
| Gamma Ray Comp Density               |

|                    |
|--------------------|
| 27. Was Well Cored |
| No                 |

| 28. CASING RECORD (Report all strings set in well) |                |                    |           |                         |               |
|----------------------------------------------------|----------------|--------------------|-----------|-------------------------|---------------|
| CASING SIZE                                        | WEIGHT LB./FT. | DEPTH SET          | HOLE SIZE | CEMENTING RECORD        | AMOUNT PULLED |
| 8-5/8"                                             | 24#            | 1149'              | 12-1/4"   | 500 sacks (Circulated)  |               |
| 5-1/2"                                             | 15.5#          | 6700'*             | 7-7/8"    | 2100 Sacks (Circulated) |               |
|                                                    |                | * DV tool at 2942' |           |                         |               |

| 29. LINER RECORD |     |        |              |        |
|------------------|-----|--------|--------------|--------|
| SIZE             | TOP | BOTTOM | SACKS CEMENT | SCREEN |
|                  |     |        |              |        |

| 30. TUBING RECORD |           |            |
|-------------------|-----------|------------|
| SIZE              | DEPTH SET | PACKER SET |
| 2-3/8"            | 6376'     | 6376'      |

|                                                                                                   |
|---------------------------------------------------------------------------------------------------|
| 31. Perforation Record (Interval, size and number)                                                |
| Perforated 5-1/2" casing with 2, 1/2" JHPF at 6429-31', 6470-72', 6523-25', 6558-60' and 6596-98' |

| 32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC. |                               |
|------------------------------------------------|-------------------------------|
| DEPTH INTERVAL                                 | AMOUNT AND KIND MATERIAL USED |
| 6429' to 6598'                                 | 2000 gallons of 15% NE acid.  |
|                                                |                               |
|                                                |                               |

| 33. PRODUCTION        |                                                                     |                         |                        |            |              |                                |               |
|-----------------------|---------------------------------------------------------------------|-------------------------|------------------------|------------|--------------|--------------------------------|---------------|
| Date First Production | Production Method (Flowing, gas lift, pumping - Size and type pump) |                         |                        |            |              | Well Status (Prod. or Shut-in) |               |
| 9-1-77                | Flowing                                                             |                         |                        |            |              | Producing                      |               |
| Date of Test          | Hours Tested                                                        | Choke Size              | Prodn. For Test Period | Oil - Bbl. | Gas - MCF    | Water - Bbl.                   | Gas-Oil Ratio |
| 9-20-77               | 24                                                                  | 24/64"                  |                        | 67         | 961          | 66                             | 14,343        |
| Flow Tubing Press.    | Casing Pressure                                                     | Calculated 24-Hour Rate | Oil - Bbl.             | Gas - MCF  | Water - Bbl. | Oil Gravity - API (Corr.)      |               |
| 400#                  | --                                                                  |                         | 67                     | 961        | 66           | 39.4                           |               |

|                                                            |                   |
|------------------------------------------------------------|-------------------|
| 34. Disposition of Gas (Sold, used for fuel, vented, etc.) | Test Witnessed By |
| Sold                                                       | O. W. Wink        |

|                         |
|-------------------------|
| 35. List of Attachments |
|                         |

|                                                                                                                                         |                            |                                |
|-----------------------------------------------------------------------------------------------------------------------------------------|----------------------------|--------------------------------|
| 36. I hereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief. |                            |                                |
| SIGNED <u>W. B. Sikes, Jr.</u>                                                                                                          | TITLE <u>Area Engineer</u> | DATE <u>September 20, 1977</u> |

This form is to be filed with the appropriate District Office of the Commission not later than 20 days after the completion of any newly-drilled or reopened well. It shall be accompanied by one copy of all electrical and radio-activity logs run on the well and a summary of all special tests conducted, including drill stem tests. All depths reported shall be measured depths. In the case of directionally drilled wells, true vertical depths shall also be reported. For multiple completions, Items 30 through 34 shall be reported for each zone. The form is to be filed in quadruplicate except on state land, where six copies are required. See Rule 1105.

# INDICATE FORMATION TOPS IN CONFORMANCE WITH GEOGRAPHICAL SECTION OF STATE

## Southeastern New Mexico

## Northwestern New Mexico

|                           |                        |                             |                         |
|---------------------------|------------------------|-----------------------------|-------------------------|
| T. Anhy _____ 1114'       | T. Canyon _____        | T. Ojo Alamo _____          | T. Penn. "B" _____      |
| T. Salt _____ 1211'       | T. Strawn _____        | T. Kirtland-Fruitland _____ | T. Penn. "C" _____      |
| B. Salt _____ 2428'       | T. Atoka _____         | T. Fictured Cliffs _____    | T. Penn. "D" _____      |
| T. Yates _____ 2592'      | T. Miss _____          | T. Cliff House _____        | T. Leadville _____      |
| T. 7 Rivers _____ 2853'   | T. Devonian _____      | T. Menefee _____            | T. Madison _____        |
| T. Queen _____ 3307'      | T. Silurian _____      | T. Point Lookout _____      | T. Elbert _____         |
| T. Grayburg _____ 3600'   | T. Montoya _____       | T. Mancos _____             | T. McCracken _____      |
| T. San Andres _____ 3868' | T. Simpson _____       | T. Gallup _____             | T. Ignacio Qtzite _____ |
| T. Glorieta _____ 5084'   | T. McKee _____         | Base Greenhorn _____        | T. Granite _____        |
| T. Paddock _____          | T. Ellenburger _____   | T. Dakota _____             | T. _____                |
| T. Blinebry _____ 5412'   | T. Gr. Wash _____      | T. Morrison _____           | T. _____                |
| T. Tubb _____ 6112'       | T. Granite _____       | T. Todilto _____            | T. _____                |
| T. Drinkard _____ 6419'   | T. Delaware Sand _____ | T. Entrada _____            | T. _____                |
| T. Abo _____              | T. Bone Springs _____  | T. Wingate _____            | T. _____                |
| T. Wolfcamp _____         | T. _____               | T. Chinle _____             | T. _____                |
| T. Penn. _____            | T. _____               | T. Permian _____            | T. _____                |
| T. Cisco (Bough C) _____  | T. _____               | T. Penn. "A" _____          | T. _____                |

## OIL OR GAS SANDS OR ZONES

No. 1, from \_\_\_\_\_ 6429' to \_\_\_\_\_ 6598' No. 4, from \_\_\_\_\_ to \_\_\_\_\_

No. 2, from \_\_\_\_\_ to \_\_\_\_\_ No. 5, from \_\_\_\_\_ to \_\_\_\_\_

No. 3, from \_\_\_\_\_ to \_\_\_\_\_ No. 6, from \_\_\_\_\_ to \_\_\_\_\_

## IMPORTANT WATER SANDS

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 \_\_\_\_\_

## FORMATION RECORD (Attach additional sheets if necessary)

| From | To    | Thickness<br>in Feet | Formation             | From | To | Thickness<br>in Feet | Formation |
|------|-------|----------------------|-----------------------|------|----|----------------------|-----------|
| 0    | 1114' |                      | Red Beds              |      |    |                      |           |
|      | 2428' |                      | Anhy & Salt           |      |    |                      |           |
|      | 3307' |                      | LS & Shale            |      |    |                      |           |
|      | 3500' |                      | Sand & Shale          |      |    |                      |           |
|      | 3868' |                      | LS & Dolomite         |      |    |                      |           |
|      | 5050' |                      | Dolomite & Anhy.      |      |    |                      |           |
|      | 6700' |                      | LS, Dolomite & shale. |      |    |                      |           |

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

Form C-104  
Supersedes Old C-101 and C-102  
Effective 1-1-65

|                   |            |
|-------------------|------------|
| DEPARTMENT OF     |            |
| SANTA FE          |            |
| FILE              |            |
| U.S.G.S.          |            |
| LAND OFFICE       |            |
| TRANSPORTER       | OIL<br>GAS |
| OPERATOR          |            |
| PRODUCTION OFFICE |            |

|                                              |                                                                             |
|----------------------------------------------|-----------------------------------------------------------------------------|
| Operator<br>Gulf Oil Corporation             |                                                                             |
| Address<br>Box 670, Hobbs, New Mexico 88240  |                                                                             |
| Reason(s) for filing (Check proper box)      |                                                                             |
| New Well <input type="checkbox"/>            | Change in Transporter of Oil <input type="checkbox"/>                       |
| Recompletion <input type="checkbox"/>        | Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>               |
| Change in Ownership <input type="checkbox"/> | Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/> |
| Other (Please explain)<br>New Well           |                                                                             |

If change of ownership give name  
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

|                                                                          |                |                                                         |                                            |           |
|--------------------------------------------------------------------------|----------------|---------------------------------------------------------|--------------------------------------------|-----------|
| Lease Name<br>A. L. Christmas (NCT-C)                                    | Well No.<br>12 | Pool Name, including Formation<br>Undesignated Drinkard | Kind of Lease<br>State, Federal or Fee Fee | Lease No. |
| Location                                                                 |                |                                                         |                                            |           |
| Unit Letter E : 1855 Feet From The North Line and 710 Feet From The West |                |                                                         |                                            |           |
| Line of Section 18 Township 22-S Range 37-E, NMPM, Lea County            |                |                                                         |                                            |           |

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

|                                                                                                                          |                                                                          |            |              |              |                                   |                            |
|--------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------|------------|--------------|--------------|-----------------------------------|----------------------------|
| Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>         | Address (Give address to which approved copy of this form is to be sent) |            |              |              |                                   |                            |
| Western Crude Oil, Inc.                                                                                                  | Box 1142, Midland, Texas 79701                                           |            |              |              |                                   |                            |
| Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> | Address (Give address to which approved copy of this form is to be sent) |            |              |              |                                   |                            |
| Warren Petroleum Corporation                                                                                             | Box 1589, Tulsa, Oklahoma 74100                                          |            |              |              |                                   |                            |
| If well produces oil or liquids,<br>give location of tanks.                                                              | Unit<br>G                                                                | Soc.<br>18 | Twp.<br>22-S | Rge.<br>37-E | Is gas actually connected?<br>Yes | When<br>September 19, 1977 |

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 <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> | New Well <input checked="" type="checkbox"/> Workover <input type="checkbox"/> Deepen <input type="checkbox"/> | Plug Back <input type="checkbox"/> Same Res'v. <input type="checkbox"/> Diff. Res'v. <input type="checkbox"/> |
| Date Spudded<br>8-11-77                        | Date Compl. Ready to Prod.<br>9-1-77                                           | Total Depth<br>6700'                                                                                           | P.B.T.D.<br>6671'                                                                                             |
| Elevations (DF, RKB, RT, GR, etc.)<br>3433' GL | Name of Producing Formation<br>Drinkard                                        | Top Oil/Gas Pay<br>6429'                                                                                       | Tubing Depth<br>6376'                                                                                         |
| Perforations<br>6429' to 6598'                 |                                                                                |                                                                                                                | Depth Casing Shoe<br>6700'                                                                                    |
| TUBING, CASING, AND CEMENTING RECORD           |                                                                                |                                                                                                                |                                                                                                               |
| HOLE SIZE                                      | CASING & TUBING SIZE                                                           | DEPTH SET                                                                                                      | SACKS CEMENT                                                                                                  |
| 12-1/4"                                        | 8-5/8"                                                                         | 1149'                                                                                                          | 500 sacks (Circulated)                                                                                        |
| 7-7/8"                                         | 5-1/2"                                                                         | 6700' *                                                                                                        | 2100 sacks (Circulated)                                                                                       |
|                                                | 2-3/8"                                                                         | 6376'                                                                                                          |                                                                                                               |
| * DV tool at 2942'                             |                                                                                |                                                                                                                |                                                                                                               |

V. TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

|                                           |                         |                                                          |                      |
|-------------------------------------------|-------------------------|----------------------------------------------------------|----------------------|
| Date First New Oil Run To Tanks<br>9-1-77 | Date of Test<br>9-20-77 | Producing Method (Flow, pump, gas lift, etc.)<br>Flowing |                      |
| Length of Test<br>24 hours                | Tubing Pressure<br>400# | Casing Pressure<br>---                                   | Choke Size<br>24/64" |
| Actual Prod. During Test<br>133 barrels   | Oil-Bbls.<br>67         | Water-Bbls.<br>66                                        | Gas-MCF<br>961       |

Corrected Gravity 39.4

|                                 |                           |                           |                       |
|---------------------------------|---------------------------|---------------------------|-----------------------|
| GAS WELL                        |                           |                           |                       |
| Action Prod. Test-MCF/D         | Length of Test            | Lbbs. Condensate/MCF      | Gravity of Condensate |
| Testing Method (flow, back pr.) | Tubing Pressure (Shut-in) | Casing Pressure (Shut-in) | Choke Size            |

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.

H. P. Sker Jr.  
(Signature)  
Area Engineer  
(Title)  
September 20, 1977  
(Date)

OIL CONSERVATION COMMISSION

APPROVED \_\_\_\_\_, 19\_\_\_\_  
BY John W. Runyan  
TITLE \_\_\_\_\_

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 deviate tests taken on the well in accordance with RULE 111.  
All portions of this form must be filled out completely for allow-  
able 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