

NEW MEXICO OIL CONSERVATION COMMISSION
SANTA FE, NEW MEXICO
APPLICATION FOR MULTIPLE COMPLETION

Form C-107
5-1-61

Operator SOLAR OIL COMPANY		County LEA	Date NOVEMBER 27, 1968
Address P. O. BOX 5114		Lease SEETON	Well No. 2
Section B	Section 21	Township 23-S	Range 37-E

1. Has the New Mexico Oil Conservation Commission heretofore authorized the multiple completion of a well in these same pools or in the same zones within one mile of the subject well? YES X NO _____
2. If answer is yes, identify one such instance: Order No. _____; Operator Lease, and Well No.: SOLAR OIL COMPANY TRAVIS #2

3. The following facts are submitted:	Upper Zone	Intermediate Zone	Lower Zone
a. Name of Pool and Formation	TEAGUE BLINEBRY		IMPERIAL TUBB
b. Top and Bottom of Pay Section (Perforations)	5364-5911'		5999-6334'
c. Type of production (Oil or Gas)	OIL		OIL
d. Method of Production (Flowing or Artificial Lift)	FLOWING		FLOWING

4. The following are attached. (Please check YES or NO)

Yes	No	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	a. Diagrammatic Sketch of the Multiple Completion, showing all casing strings, including diameters and setting depths, centralizers and/or turbolizers and location thereof, quantities used and top of cement, perforated intervals, tubing strings, including diameters and setting depth, location and type of packers and side door chokes, and such other information as may be pertinent.
<input checked="" type="checkbox"/>	<input type="checkbox"/>	b. Plat showing the location of all wells on applicant's lease, all offset wells on offset leases, and the names and addresses of operators of all leases offsetting applicant's lease.
<input checked="" type="checkbox"/>	<input type="checkbox"/>	c. Waivers consenting to such multiple completion from each offset operator, or in lieu thereof, evidence that said offset operators have been furnished copies of the application.*
<input checked="" type="checkbox"/>	<input type="checkbox"/>	d. Electrical log of the well or other acceptable log with tops and bottoms of producing zones and intervals of perforation indicated thereon. (If such log is not available at the time application is filed it shall be submitted as provided by Rule 112-A.)

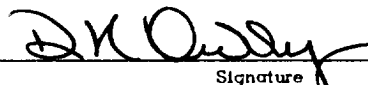
5. List all offset operators to the lease on which this well is located together with their correct mailing address.

GULF OIL COMPANY, GULF BUILDING, MIDLAND, TEXAS 79701

TEXACO INC., MIDLAND SAVINGS BUILDING, MIDLAND, TEXAS 79701

6. Were all operators listed in Item 5 above notified and furnished a copy of this application? YES X NO _____. If answer is yes, give date of such notification _____.

CERTIFICATE: I, the undersigned, state that I am the VICE PRESIDENT of the SOLAR OIL COMPANY (company), and that I am authorized by said company to make this report; and that this report was prepared under my supervision and direction and that the facts stated therein are true, correct and complete to the best of my knowledge.


Signature

*Should waivers from all offset operators not accompany an application for administrative approval, the New Mexico Oil Conservation Commission will hold the application for a period of twenty (20) days from date of receipt by the Commission's Santa Fe office. If, after said twenty-day period, no protest nor request for hearing is received by the Santa Fe office, the application will then be processed.

NOTE: If the proposed multiple completion will result in an unorthodox well location and/or a non-standard proration unit in one or more of the producing zones, then separate application for approval of the same should be filed simultaneously with this application.