



# H. E. PRINCE

Construction & Petroleum

BOX 129

ROSWELL, NEW MEXICO 88201

622-7708

JUL 21 1986



July 14, 1986

Enclosed are the items and information requested on form C-108  
as per your numbers:

*Case 8984*

- V. A map of all wells and leases within two miles of proposed disposal well and a one-half mile radius circle around disposal well.
- Vi. A copy of completion and plugging reports of all wells within the review area.
- Vii. 1. 20 barrels of salt water per day.  
2. Bottom 52 feet of well is open hole.  
3. Well will take 20 barrels or more on gravity flow.  
4. Will be reinjecting salt water into the same oil and water zone as produced from, produced from 1025 to 1075 feet and injected at 1025 to 1075 feet.
- Viii. Injection zone is the San Andres Slaughter zone at 1019 to 1071 feet.  
Known fresh water is shallow at 50 to 75 feet.  
Known Artesian water is at 450 to 600 feet.
- IX. No stimulation intended.
- X. Log completion report enclosed.
- XI. Enclosed is the well record on the only fresh water well within one mile of proposed disposal well. The fresh water well is not productive and appears to be temporarily abandoned.
- XII. To the best of my knowledge there is no faults between fresh water and injection area.
- III. WELL DATA
  - A. (1) Lease name is Federal, well #11, NW $\frac{1}{4}$  of SE $\frac{1}{4}$  of Sec. 33, T6S, R26E, 1650' F.S.L. & 2310' F.W.L. is also shown on enclosed well records
  - (2) Enclosed is information on all hole size and pipe size and all cementing with a copy of cementing record furnished by cementing company, all shown on well records.
  - (3) 2" upset tubing to be used and set at 1000 feet.
  - (4) A positive seal type packer to be set at 1000 feet.

B. (1) San Andres Slaughter zone, Pool name is Linda San Andres.

(2) Open hole 1019 to 1071 feet.

(3) Was drilled to produce oil but produced only salt water so has been reserved for a salt water disposal well.

(4) None

(5) A. B. O. sands at 4000 feet gas only.

XIV. All owners of leases and surface owners within one-half mile of well have been furnished a copy of the application by registered mail.

Proposed disposal  
well

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

OPERATOR'S COPY  
SUBMIT IN DUPLICATE\*

(See other instructions on reverse side)

Form approved.  
Budget Bureau No. 42-R355.5.

OR RECOMPLETION REPORT AND LOG\*

ALL ☐ GAS WELL ☐ DRY ☒ OTHER ☐ 17 1982

b. TYPE OF COMPLETION:

NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other ☐

2. NAME OF OPERATOR

H.E. PRINCE

3. ADDRESS OF OPERATOR

P.O. Box 129 Roswell N.Mex 622-7708

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)\*

At surface 1650' F.S.L. & 2310' F.W.L.

At top prod. interval reported below

At total depth

14. PERMIT NO.

DATE ISSUED

4/14/80

12. COUNTY OR PARISH

CHAVES

13. STATE

New Mexico

15. DATE SPUDDED

6/15/80

16. DATE T.D. REACHED

10/1/80

17. DATE COMPL. (Ready to prod.)

7/1/80

18. ELEVATIONS (DF, RKB, RT, GR, ETC.)\*

19. ELEV. CASINGHEAD

3602.0 G.L.

20. TOTAL DEPTH, MD & TVD

1071

21. PLUG, BACK T.D., MD & TVD

22. IF MULTIPLE COMPL., HOW MANY\*

23. INTERVALS DRILLED BY

ROTARY TOOLS

CABLE TOOLS

yes

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)\*

1020 THRU 1071 SAN ANDRES

26. TYPE ELECTRIC AND OTHER LOGS RUN

LOG FROM SAMPLES AT 1 FT. INTERVALS

27. WAS WELL CORED

No

28. CASING RECORD (Report all strings set in well)

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT FILLED
8 5/8"	24"	100'	12"	CIRCULATED	
4 1/2"	10.5"	1019	7 3/4"	CIRCULATED	

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)

30. TUBING RECORD

SIZE	DEPTH SET (MD)	PACKER SET (MD)

31. PERFORATION RECORD (Interval, size and number)

OPEN HOLE 1019 THRU 1071

32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
1019 - 1071	1000 GAL 15% HCl

33.\* PRODUCTION

DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)				WELL STATUS (Producing or shut-in)	
None		SWABED THRU 2" UPSET TUBING					
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
7/15/80	24	None	→	2	None	20	
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)	
None	None	→					

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)

VENTED

35. LIST OF ATTACHMENTS

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records

SIGNED

H.E. Prince

TITLE

OPERATOR  
MINERALS MANAGEMENT SERVICE  
ROSWELL, NEW MEXICO

DATE

12/15/82

\*(See Instructions and Spaces for Additional Data on Reverse Side)

N<sup>o</sup> 6730

DENTON OIL WELL CEMENTING CO.

Artesia, New Mexico

DATE OCTOBER 6, 1950 PLACE NE. of ROSWELL

CHARGE TO H. E. PRINCE & SON ORDER NO. \_\_\_\_\_

MAIL ADDRESS 666 N. ATKINSON BOX 129 CITY ROSWELL STATE NM 88201

OWNER OF WELL SAME CONTRACTOR LEATHERMAN

WELL NO. 411 FARM FEDERAL NO. 11 COUNTY CHAVES

SURVEY 230104 SEC. 23 TWP. 6S RANGE 26E

LINE # LC-065127 DEPTH OF WELL \_\_\_\_\_ Csg. CEMTD. 1019

SIZE 4 1/2" SIZE HOLE 7 7/8"

WEIGHT 9.54 AMOUNT AND KIND OF CEMENT 200 SACKS 100% TYPE II

KIND OF JOB OIL STRING SIZE \_\_\_\_\_

DRILL PIPE \_\_\_\_\_ CABLE \_\_\_\_\_ TRUCK No. \_\_\_\_\_

TUBING \_\_\_\_\_ TOOLS \_\_\_\_\_ TRUCK No. \_\_\_\_\_

ROTARY \_\_\_\_\_

SPECIAL TOOLS \_\_\_\_\_ PLUGS ☒ YES ☐ NO IF PLUG BACK, FROM \_\_\_\_\_ TO APPROX. \_\_\_\_\_

FLOATING EQUIPMENT USED \_\_\_\_\_

TIME REQUIRED MIXING \_\_\_\_\_ PRESS \_\_\_\_\_

AND PUMPING CEMENT 1 HOUR CIRCULATING 2.04 CEMENT LEFT \_\_\_\_\_ REQUEST \_\_\_\_\_

MAXIMUM 4504 IN PIPE BY \_\_\_\_\_ NECESSITY 3 FEET

CONDITION OF MUD OK CONDITION OF WELL AT TIME OF CEMENTING OK CHEMICAL USED NONE

PRICE REFERENCE NO. 3 TRUCK CALLED OUT 6 AM ON 11 AM JOB 12 AM JOB COM. 1 AM PM

PRICE JOB \$423.15 MATERIAL LEFT ON WELL \_\_\_\_\_

73.00 REMARKS: MILEAGE ... 73 MILES @ \$1.00 PER MILE

15.65 1 4 1/2" TOP WOODEN PLUG @ \$15.65

514.53 3 3/4% SALES TAX

19.31 Oil Well Cementing Co. Payment \$15.00

534.14

THE ABOVE JOB WAS DONE UNDER THE SUPERVISION OF THE OWNER OPERATOR, OR HIS AGENT WHOSE SIGNATURE APPEARS BELOW:

CEMENTER [Signature] AGENT OF CONTRACTOR OR OPERATOR [Signature]

HELPER [Signature]

Linda Area San Andres Pay Zone

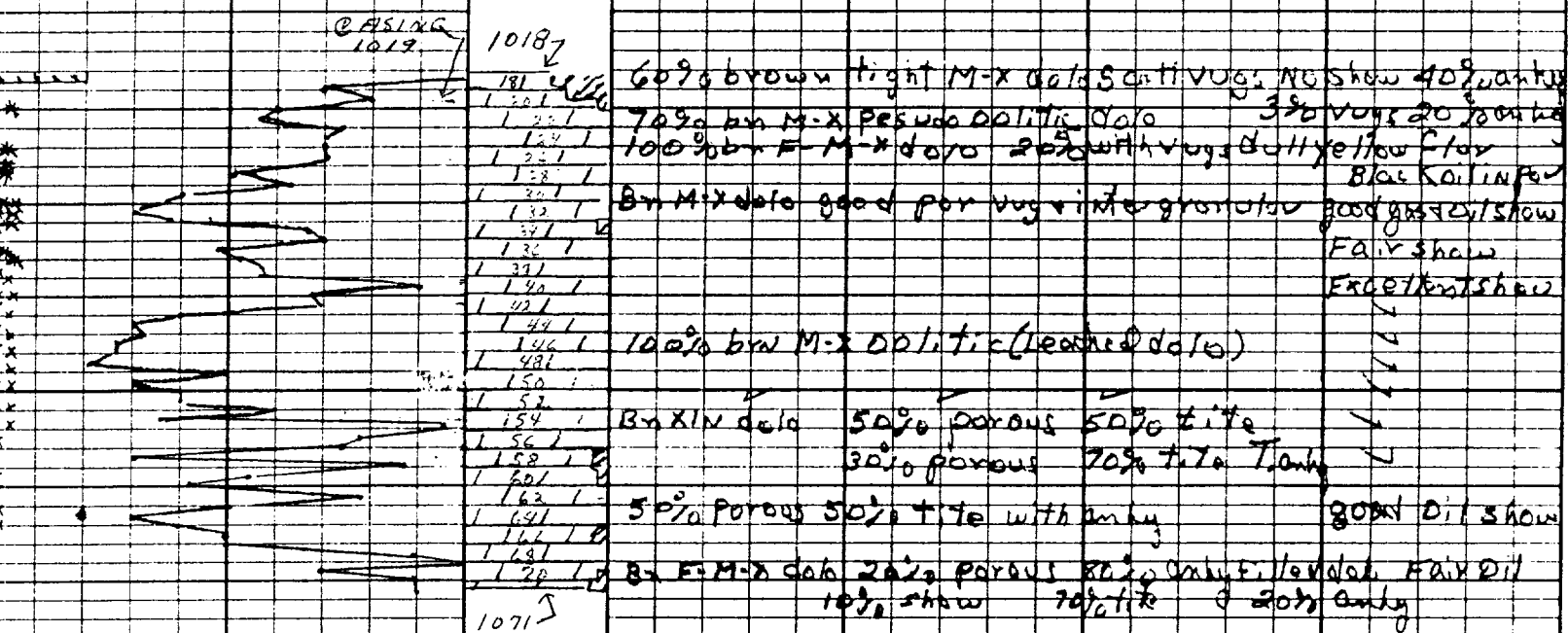
Elevation of L est 3707

H. E. Prince & Son # 11 Federal  
Sec 33 T6S. R26E 1650' RS + 2310' FW

1' drilling time & di/shows

25' 50' 1000

Sample Description



Scale 1" = 20'

Dalton Kunchelae Geologist

1100

Best zone 1041-1053 12'

No evidence of water by sampler.

H.E. Prince

# San Andres Samples

#	drilling	me	Depth	Description
1	60"	1016-17	60% B-M-x Sl. gray dolo with scatt vugs	40% wh x in dolo, 1 red shale
2	35"	18	70% pseudo oolitic. More vugs (3/1)	20% wh x in dolo
3	40"	19	80% B-M-x F. dolo with scatt vugs	20% wh x in dolo
*	30	20	90% B-M-x F. black o. d. with vugs	10% wh x in dolo
5	28	21	100% F-M-x gray dolo	300 ss/pov, poor odor
6	32"	1021-22	50% usual por-inter	Sour gas odor
7	35	23		
8*	35	24	(sl. wh x)	Black oil in por
9*	35	1024-25		
10*	33"	26		
11	25	1026-27		
12	32	28	DOWN 10 MIN	
13	20	29		
14*	17	30	B-M-x granular dolo with so. vugs with oil, excellent por	gas odor
15*	15	1030-31		
16*	19"	1031-32		
17	34"	32-33		sl. odor
18	35"	34		No odor
19*	24"	35		sl. - fair odor
20*	26"	36	DOWN 10 MIN	

ILLEGIBLE

	Time	Depth	Description	Color	Por	F	For
1	28"	1036-37	Dolo Bn M-x gray - Fx gray Rare dolite, interx-vug por	Stronger	good	Bn	For
2	28"	37-38	100% dolo Bn M-x dolitic Leached	✓	✓	Exc	✓
3	45"	38-39		✓	✓	✓	✓
4	34"	1039-40		✓	✓	✓	✓
5	35"	1040-41		✓	✓	✓	✓
6	20"	1041-42		✓	✓	✓	✓
26	15"	1042-43		✓	✓	✓	✓
27	16	43-44		✓	✓	✓	✓
28	14	44-45		poorer	✓	✓	✓
29	14	1045-46		Tanhy	✓	✓	✓
30	11	1046-47	All leached dolite interx in	Stronger	Exc	Bn	For
31	25	47-48		✓	✓	✓	✓
32	15	48-49		✓	✓	✓	✓
33	20	49-50		✓	✓	✓	✓
34	20	50-51		✓	✓	✓	✓
35	30	52		✓	✓	✓	✓
36	23	53		✓	✓	✓	✓
37	47"	54	100% Bn in dolo 50% porous 50% Fx dense	✓	✓	✓	✓
38	39	55	70% 30	✓	✓	✓	✓
39	37"	56		✓	✓	good	✓
40	15"	57	30% 70 Tanhy	✓	✓	✓	✓
41	43"	58	solid dolite 10% leached 50 10% anhy		Fair	✓	✓
42	27	59	50% porous dolite 50% Bn 5% anhy	✓	✓	✓	✓
43	21	60	60% Fx interpor 35% 5% anhy	✓	✓	✓	✓

ILLEGIBLE



#	Time	Depth							
44	39	1060 1061	100 bn F-x d/o	20% porous (fine inter x/n)	80% dense with anhy. filling	st F			
45	25	62		50% L	thang vng 50% dense with anhy	8%			
46	15	63							
47	20	64		50% Fine por Tight?	40% dense	10% only	por		
48	25	65		40	Scott vng	45% dense	55% only	good	
49	25	66		80% Fine sucrossic	20% dense anhy	Fair	✓	Yel B-	
50	45'	67		40% Fx	20% porous	40% bn F-x dense			
51	50	68							
52	35	69	Bn F-M-x colit: 400	20% porous	80% tite	T. anhy vng filling	✓		
53	45	70		10% L	80 L	10% only	✓		
54	45	71		10% L	70 tite	20% only	✓		

ILLEGIBLE



U. S. LAND OFFICE S.F.  
SERIAL NUMBER LC 068127  
LEASE OR PERMIT TO PROSPECT

RECEIVED

SEP 18 1963

U. S. GEOLOGICAL SURVEY  
GOSWELL, NEIDERHART

UNITED STATES

DEPARTMENT OF THE INTERIOR

GEOLOGICAL SURVEY

# LOG OF OIL OR GAS WELL

LOCATE WELL CORRECTLY

Company H. E. Barnes Address Box 1057, Roswell, New Mexico.  
Lessor or Tract \_\_\_\_\_ Field WC State New Mexico  
Well No. 1 Sec. 33 T. 6S R. 26E Meridian NMPM County Chaves  
Location 990 ft. N of S Line and 2310 ft. W of W Line of \_\_\_\_\_ Elevation 3209.70  
(Depth four minutes to nearest)

The information given herewith is a complete and correct record of the well and all work done thereon so far as can be determined from all available records.

Date April 6, 1963 Title \_\_\_\_\_

The summary on this page is for the condition of the well at above date.

Commenced drilling 28 February, 1963 Finished drilling 1 April, 1963

## OIL OR GAS SANDS OR ZONES

(Denote gas by  $G$ )

No. 1, from 1017 to 1068      No. 4, from \_\_\_\_\_ to \_\_\_\_\_  
No. 2, from \_\_\_\_\_ to \_\_\_\_\_      No. 5, from \_\_\_\_\_ to \_\_\_\_\_  
No. 3, from \_\_\_\_\_ to \_\_\_\_\_      No. 6, from \_\_\_\_\_ to \_\_\_\_\_

## IMPORTANT WATER SANDS

No. 1, from 23 to 32      No. 3, from \_\_\_\_\_ to \_\_\_\_\_  
No. 2, from \_\_\_\_\_ to \_\_\_\_\_      No. 4, from \_\_\_\_\_ to \_\_\_\_\_

## CASING RECORD

[illegible]

## MUDDING AND CEMENTING RECORD

Size casing	Weight	Number sacks of cement	Method used	Mud gravity	Amount of mud used
4 1/2	1069	50 sks Neat	Pump	38 Vis	80 sks

## PLUGS AND ADAPTERS

Heaving plug—Material \_\_\_\_\_ Length \_\_\_\_\_ Depth set \_\_\_\_\_

Adaptors—Material \_\_\_\_\_ Size \_\_\_\_\_

## SHOOTING RECORD

Size	Shell used	Explosive used	Quantity	Date	Depth shot	Depth cleaned out
5/8 shots	Lanewells		72 shots	4/6/63	1023-10 <sup>25</sup> 1028-37 1040-53	

## TOOLS USED

Rotary tools were used from -0- feet to 1069 feet, and from \_\_\_\_\_ feet to \_\_\_\_\_ feet.

Cable tools were used from \_\_\_\_\_ feet to \_\_\_\_\_ feet, and from \_\_\_\_\_ feet to \_\_\_\_\_ feet

## DATES

February 28, 1963 Put to producing April 8, 1963

The production for the first 24 hours was 80 barrels of fluid of which 80 % was oil; 10 % emulsion; 10 % water; and 0 % sediment. Gravity, °Bé. \_\_\_\_\_

If gas well, cu. ft. per 24 hours \_\_\_\_\_ Gallons gasoline per 1,000 cu. ft. of gas \_\_\_\_\_

Rock pressure, lbs. per sq. in. \_\_\_\_\_

## EMPLOYEES

H. E. Barnes, Driller

Wayne Stuart \_\_\_\_\_, Driller \_\_\_\_\_, Driller

## FORMATION RECORD

FROM—	TO—	TOTAL FEET	FORMATION
0	23	23	Brown & Black Clay
23	32	9	Sand
32	108	76	Red Bed.
108	400	292	Red Bed.-Anhy.
400	550	150	Red Bed.-Anhy-Blue Shale
550	682	132	Lime-Anhy.
682	850	168	Gray Lime - Dark Gray Lime
850	1017	167	Lime & Dol.
1017	1060	51	Lime & Dol.

*Operator*

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE

(See other instructions on reverse side)

Form approved,  
Budget Bureau No. 42-R355.5.

**OR RECOMPLETION REPORT AND LOG**

LL ☒ GAS WELL ☐ DRY ☐ Other ☐

NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other ☐

**b. TYPE OF COMPLETION**

2. NAME OF OPERATOR

**Dr. Sam G. Dunn**

3. ADDRESS OF OPERATOR

**P. O. Box 192, Artesia, New Mexico, 88210**

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)\*

At surface **1650 feet from the South line & 1650 feet from the East line**

At top prod. interval reported below **Same**

At total depth **Same**

14. PERMIT NO.

DATE ISSUED

5. LEASE DESIGNATION AND SERIAL NO.

**LC-068127**

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

**Elliott Federal**

9. WELL NO.

**3 CHANGED TO FEDERAL NO 8**

10. FIELD AND POOL, OR WILDCAT

**Linda San Andres**

11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA

**Sec. 33, Twp. 65., Rge. 26E.**

12. COUNTY OR PARISH

**Chaves**

13. STATE

**New Mexico**

15. DATE SPUDDED

**2-21-65**

16. DATE T.D. REACHED

**6-3-65**

17. DATE COMPL. (Ready to prod.)

**3-20-65**

18. ELEVATIONS (DF, RKB, RT, GR, ETC.)\*

**3628 GR**

19. ELEV. CASINGHEAD

20. TOTAL DEPTH, MD & TVD

**1136**

21. PLUG, BACK T.D., MD & TVD

**1135**

22. IF MULTIPLE COMPL., HOW MANY\*

23. INTERVALS DRILLED BY

ROTARY TOOLS

**590-1136**

CABLE TOOLS

**0-590**

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)\*

**1070-1095 Slaughter San Andres**

25. WAS DIRECTIONAL SURVEY MADE

**No**

26. TYPE ELECTRIC AND OTHER LOGS RUN

**Gamma Ray Neutron**

27. WAS WELL CORED

**Yes**

28.

**CASING RECORD (Report all strings set in well)**

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
10	36	30	11	None	30
8 5/8		32	9 3/4	175	None
4 1/2	9.5	1135	6 3/4	250	None

29.

**LINER RECORD**

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)

**TUBING RECORD**

SIZE	DEPTH SET (MD)	PACKER SET (MD)
<b>2 3/8</b>	<b>1095</b>	<b>None</b>

31. PERFORATION RECORD (Interval, size and number)

**1070-1082 6 3/8 holes**  
**1083 3 3/8 holes**  
**1090 2 3/8 holes**  
**1095 2 3/8 holes**

32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
<b>1070-1095</b>	<b>8,500 Gal. of 15% Acid</b>

33.\*

**PRODUCTION**

DATE FIRST PRODUCTION <b>3-20-65</b>		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) <b>Pump 1 1/2" O'Bannon</b>				WELL STATUS (Producing or shut-in) <b>Producing</b>	
DATE OF TEST <b>3-23-65</b>	HOURS TESTED <b>24</b>	CHOKE SIZE <b>3"</b>	PROD'N. FOR TEST PERIOD <b>→</b>	OIL—BBL. <b>6</b>	GAS—MCF. <b>TSTM</b>	WATER—BBL. <b>35</b>	GAS-OIL RATIO <b>26</b>
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE <b>→</b>	OIL—BBL. <b>6</b>	GAS—MCF. <b>TSTM</b>	WATER—BBL. <b>35</b>	OIL GRAVITY-API (CORR.) <b>26</b>	

34. DISPOSITION OF GAS (Solid, used for fuel, vented, etc.)

**Vented**

TEST WITNESSED BY

**L. R. McFaden**

35. LIST OF ATTACHMENTS

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records

SIGNED

TITLE

**Agent**

DATE

**10-21-67**

\*(See Instructions and Spaces for Additional Data on Reverse Side)

ACCEPTED FOR RECORD

*J. W. Luthal*

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE\*

(See other instructions on reverse side)

Form approved.  
Budget Bureau No. 42-R355.5.

5. LEASE DESIGNATION AND SERIAL NO.

LC-068127

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

England Federal

9. WELL NO.

3 CHANGED TO FCD. 5

10. FIELD AND POOL, OR WILDCAT

Linda-San Andres

11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA

Sec. 33, Twp. 6S, R26E

12. COUNTY OR PARISH

Chaves

13. STATE

N. M.

19. ELEV. CASING HEAD

NA

1. TYPE OF COMPLETION:  
WELL ☒ GAS WELL ☐ DRY ☐ Other \_\_\_\_\_  
NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other \_\_\_\_\_

2. NAME OF OPERATOR

Dr. Sam G. Dunn

3. ADDRESS OF OPERATOR

1312 Main, Lubbock, Texas

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)\*

At surface 990' FSL & 990' FWL

At top prod. interval reported below

At total depth

14. PERMIT NO.

DATE ISSUED

15. DATE SPUDDED 16. DATE T.D. REACHED 17. DATE COMPL. (Ready to prod.)

9-17-63

9-30-63

10-12-64

NA

20. TOTAL DEPTH, MD & TVD 21. PLUG, BACK T.D., MD & TVD 22. IF MULTIPLE COMPL., HOW MANY\*

1143

1046

23. INTERVALS DRILLED BY

ROTARY TOOLS

CABLE TOOLS

→ 0 - 1143

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)\*

988 - 1027 one hole per foot

no

26. TYPE ELECTRIC AND OTHER LOGS RUN

Gamma Ray - Nurtron

27. WAS WELL CORED

Yes

28. CASING RECORD (Report all strings set in well)

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
8-5/3	32	100'	11"	Cir.	None
4-1/2	9.5	1046	6-3/4"	75 sacks	None

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					2"	1026	None

31. PERFORATION RECORD (Interval, size and number)

997 - 1027 2 holes per foot  
988 - 996 & 1006 - 1016 one hole per foot.

32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
988 - 1027	Jet perforated
988 - 1027	Treated with 15000 gals of 10% acid water & 12000# of 20-40 sand

33.\* PRODUCTION

DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)				WELL STATUS (Producing or shut-in)	
10-12-64		Pumping ( 6' 0" Bannon working barreil)				Producing	
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
10-12-64	24	None	→	8	TSTM	16	None
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)	
		→					

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)

Vented TSTM

TEST WITNESSED BY

L. R. McFadin

35. LIST OF ATTACHMENTS

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records

SIGNED

Pat. Thompson

TITLE

Agent

DATE

10-20-64

\*(See Instructions and Spaces for Additional Data on Reverse Side)

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

(See other in-  
structions on  
reverse side)

Budget Bureau No. 42-R355.5.

5. LEASE DESIGNATION AND SERIAL NO.

LC 063127

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

England FEDERAL

9. WELL NO.

2 CHANGED TO FED. NO. 4

10. FIELD AND POOL, OR WILDCAT

Linda San Andres

11. SEC., T., R., M., OR BLOCK AND SURVEY

33-16S-R26E, NMPM

12. COUNTY OR PARISH

Chaves

13. STATE

New Mexico

14. PERMIT NO.

DATE ISSUED

2. NAME OF OPERATOR

Dr. Sam G. Dunn

3. ADDRESS OF OPERATOR

1312 Main, Lubbock, Texas

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)\*

At surface 1850 ft. from South line and 1667.46 feet from West line of Sec. 33, Twp. 6 South, Range 26 East, NMPM

At top prod. interval reported below

At total depth

15. DATE SPUDDED

11-23-64

16. DATE T.D. REACHED

12--5-63

17. DATE COMPL. (Ready to prod.)

3-11-64

18. ELEVATIONS (DF, REB, RT, GR, ETC.)\*

3702 GL

19. ELEV. CASINGHEAD

20. TOTAL DEPTH, MD & TVD

1074

21. PLUG, BACK T.D., MD & TVD

1063

22. IF MULTIPLE COMPL., HOW MANY\*

23. INTERVALS DRILLED BY

ROTARY TOOLS

CABLE TOOLS

X

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)\*

999-1032 Slaughter San Andres

25. WAS DIRECTIONAL SURVEY MADE

No

26. TYPE ELECTRIC AND OTHER LOGS RUN

Gamma Ray Neutron

27. WAS WELL CORED

Yes

28. CASING RECORD (Report all strings set in well)

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
8-5/8"	28#	101	11"	50 sax - circulate	None
4-1/2"	9.5#	1063	6-3/4"	50 sax	None

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					2"	1000	None

31. PERFORATION RECORD (Interval, size and number)

999-1032 2 shots per ft. Jet perforated

32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
999-1032	1000 gal. 15% acid water
	14000 gal. 3% acid water
	with 7000# of 20--40 sand

33.\* PRODUCTION

DATE FIRST PRODUCTION	PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)	WELL STATUS (Producing or shut-in)
May 2, 1964	Pumping - Obannon 8 ft. insert pump	Producing

DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
5-4-64	24	None		22	TSTM	25	NA

FLOW, TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)
None	None					NA

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)

Vented

TEST WITNESSED BY

L. R. McFadin

35. LIST OF ATTACHMENTS

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records

SIGNED

Lat. Thompson

TITLE

Agent

DATE

May 19, 1964

\*(See Instructions and Spaces for Additional Data on Reverse Side)

NUMBER OF COPIES RECEIVED	
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SANTA FE	1
FILE	1
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	
PRODUCTION OFFICE	1
OPERATOR	2

# CO OIL CONSERVATION COMMISSION

Santa Fe, New Mexico

(Form C-104)  
Revised 7/1/57

## FOR (OIL) - (GAS) ALLOWABLE

New Well  
Recompletion

*on Production*

This form shall be an initial allowable will be assigned to any completed Oil or Gas well. Form C-104 is to be submitted in QUADRUPPLICATE 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 new oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

**Artesia, New Mexico May 19, 1964**

(Place)

(Date)

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

**Dr. Sam G. Dunn**

**Pendergrass**

Well No. **1** in **NW**  $\frac{1}{4}$  **NW**  $\frac{1}{4}$

(Company or Operator)

**D**

**4**

**7S**

**26E**

**NMPM**

**Linda San Andres**

**Pool**

Unit Letter  
**Chaves**

County. Date Spudded **12-6-63**

Date Drilling Completed **12-12-63**

Please indicate location:

Elevation **3803** Total Depth **1064** PBTD **1063**

Top Oil/Gas Pay **988** Name of Prod. Form. **San Andres**

PRODUCING INTERVAL -

Perforations **998-1030 2 shots per ft.**

Open Hole **None** Depth **1063** Depth Casing Shoe **990**

OIL WELL TEST -

Natural Prod. Test: **None** bbls. oil, \_\_\_\_\_ bbls water in \_\_\_\_\_ hrs, \_\_\_\_\_ min. Size \_\_\_\_\_

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): **13** bbls. oil, **41** bbls water in **24** hrs, \_\_\_\_\_ min. Size \_\_\_\_\_

GAS WELL TEST -

Natural Prod. Test: **None** MCF/Day; Hours flowed \_\_\_\_\_ Choke Size \_\_\_\_\_

Method of Testing (pitot, back pressure, etc.): \_\_\_\_\_

Test After Acid or Fracture Treatment: \_\_\_\_\_ MCF/Day; Hours flowed \_\_\_\_\_

Choke Size \_\_\_\_\_ Method of Testing: \_\_\_\_\_

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): **1000 gal. 15% acid, 14000 gal. 3% acid water with 7000# 20-40 sand**

Casing Press. **None** Tubing Press. **None** Date first new oil run to tanks **5-1-64**

Oil Transporter **McWood Corporation**

Gas Transporter \_\_\_\_\_

**RECEIVED**

Remarks: \_\_\_\_\_

**JUN 1 - 1964**

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

Approved **JUN 1 1964**, 19\_\_\_\_

**Dr. Sam G. Dunn**

(Company or Operator)

By: **Pat Thompson**

(Signature)

Title **Agent**

Send Communications regarding well to:

Name **Dr. Sam G. Dunn**

**1212 Main, Linda, New Mexico**

OIL CONSERVATION COMMISSION

By: \_\_\_\_\_

Title **OIL AND GAS INSPECTOR**

NUMBER OF COPIES RECEIVED	
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SANTA FE	FILE
U.S.S.	LAND OFFICE
TRANSPORTER	OIL
PRODUCTION OFFICE	GAS
OPERATOR	

OIL CONSERVATION COMMISSION (Form C-104)  
Santa Fe, New Mexico Revised 7/1/57

FOR (OIL) - (GAS) ALLOWABLE

New Well  
Recompletion

This form shall be submitted 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 new oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

Artesia, New Mexico July 26, 1964

(Place) (Date)

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

Dr. Sam G. Dunn Sturgeon Well No. 2, in SE 1/4 NW 1/4,

(Company or Operator)

(Lease)

F 33 T 6S R 26E NMPM, Linda San Andres Pool

Unit Letter

Chaves

Please indicate location:

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

County Date Spudded 12-29--63 Date Drilling Completed 1-3-64  
Elevation NA Total Depth 1074 PBTD 1070  
Top Oil/Gas Pay 1004 Name of Prod. Form. Slaughter San Andres

PRODUCING INTERVAL -

Perforations 1004-1040 with 2 shots per ft.

Open Hole Depth Casing Shoe 1070 Depth Tubing 1010

OIL WELL TEST -

Natural Prod. Test: None bbls. oil, bbls water in hrs, min. Size Choke

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): 10 bbls. oil, 35 bbls water in 24 hrs, min. Size pump

GAS WELL TEST -

Natural Prod. Test: None MCF/Day; Hours flowed Choke Size

Method of Testing (pitot, back pressure, etc.):

Test After Acid or Fracture Treatment: MCF/Day; Hours flowed

Choke Size Method of Testing:

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): 1000 gal. 15% acid, 14000 gal. 3% acid water &

Casing Press. None Tubing Press. None Date first new oil run to tanks 7-19-64

Oil Transporter McWood Corporation

Gas Transporter

Remarks: JUL 31 1964

O. C. C.  
ARTESIA, OFFICE

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

Approved JUL 31 1964, 19

Dr. Sam G. Dunn

(Company or Operator)

By: Pat Thompson

(Signature)

Title Agent

Send Communications regarding well to:

Name Pat Thompson

Box 452, Artesia New Mexico

OIL CONSERVATION COMMISSION

By: M. L. Armstrong

Oil and Gas Inspector

Title

RECEIVED  
DISTRIBUTION  
SANTA FE  
FILE  
U.S.G.S.  
LAND OFFICE  
TRANSPORTER  
OIL  
GAS  
PRODUCTION OFFICE  
OPERATOR

SOIL CONSERVATION COMMISSION  
Santa Fe, New Mexico  
RECEIVED  
FOR (OIL) - (GAS) ALLOWABLE  
AUG 31 1964  
New Well  
Recompletion

This form shall be used for the completion or recompletion of an initial allowable will be assigned to any completed Oil or Gas well. Form C-104 is to be submitted 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 new oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

Artesia, N. M. August 28, 1964  
(Place) (Date)

WE ARE HEREBY REQUESTING AN ALLOWABLE FOR A WELL KNOWN AS:  
Dr. Sam G. Dunn Sturgeon, Well No. 1, in SE 1/4 NW 1/4,  
(Company or Operator) (Lease)  
F 33, T 6S, R 26E, NMPM, Linda San Andres Pool  
Unit Letter  
Chaves

Please indicate location:  
County Date Spudded 4-23-64 Date Drilling Completed 4-30-64  
Elevation 3605 GR Total Depth 1059 PBTD 1053  
Top Oil/Gas Pay 988 Name of Prod. Form Slaughter San Andres

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

1650 NW  
(FOOTAGE)

Tubing, Casing and Cementing Record

Size	Feet	Sax
8-5/8	105	50
4 1/2	1053	50
2	985	

PRODUCING INTERVAL -  
Perforations 988-996-1003-1010-1018-1021  
Open Hole Depth Casing Shoe 1053 Depth Tubing 985

OIL WELL TEST -  
Natural Prod. Test: None bbls. oil, bbls water in hrs, min. Size  
Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): 11 bbls. oil, 31 bbls water in 24 hrs, min. Size pump

GAS WELL TEST -  
Natural Prod. Test: None MCF/Day; Hours flowed Choke Size  
Method of Testing (pitot, back pressure, etc.):

Test After Acid or Fracture Treatment: MCF/Day; Hours flowed  
Choke Size Method of Testing:

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): 15000 gal 7.5% acid and 15000# sand

Casing Tubing Date first new  
Press. None Press. None oil run to tanks August 15, 1964

Oil Transporter McWood Corporation

Gas Transporter

Remarks: Same unit with well no 2

I hereby certify that the information given above is true and complete to the best of my knowledge.  
Approved AUG 31 1964, 19 Dr. Sam G. Dunn  
(Company or Operator)

OIL CONSERVATION COMMISSION  
By: Pat Thompson  
(Signature)

Title Agent  
Send Communications regarding well to:

Name Mrs. Pat Thompson

Box 452, Artesia, New Mexico



UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE

(See other instructions on reverse side)

Form approved.  
Budget Bureau No. 42-R355.5.

5. LEASE DESIGNATION AND SERIAL NO.

LC-068130

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

England

9. WELL NO.

1 n

10. FIELD AND POOL, OR WILDCAT

Linda San Andres

11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA

Sec. 4, T7S, R26E, N4R4

12. COUNTY OR

Chaves

13. STATE

N. M.

ON OR RECOMPLETION REPORT AND LOG \*

OIL WELL ☒ GAS WELL ☐ DRY ☐ Other ☐

b. TYPE OF COMPLETION:

NEW WELL ☐ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other **Reentry**

2. NAME OF OPERATOR

Dr. Sam G. Dunn

3. ADDRESS OF OPERATOR

1312 Main, Lubbock, Texas

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)\*

At surface 330 ft. from North line and 2310 ft. from East line, NW 1/4 NE 1/4

At top prod. interval reported below

At total depth

14. PERMIT NO.

DATE ISSUED

15. DATE SPUDDED

6-10-63

16. DATE T.D. REACHED

6-20-63

17. DATE COMPL. (Ready to prod.)

5-1-64

18. ELEVATIONS (DF, RKB, RT, GR, ETC.)\*

3735 OL

19. ELEV. CASINGHEAD

3735 OL

20. TOTAL DEPTH, MD & TVD

1030

21. PLUG, BACK T.D., MD & TVD

None

22. IF MULTIPLE COMPL., HOW MANY\*

23. INTERVALS DRILLED BY

ROTARY TOOLS

CABLE TOOLS

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)\*

1064-1104 Slaughter section in San Andres

25. WAS DIRECTIONAL SURVEY MADE

No

26. TYPE ELECTRIC AND OTHER LOGS RUN

Gamma Ray, Neutron, Core Analysis

27. WAS WELL CORED

Yes

28. CASING RECORD (Report all strings set in well)

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
7"	32#	92	9-1/4"	30 sxs	None
4-1/2"	9.5#	1124	6-1/4"	50 sis	None

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					2"	1047	None

31. PERFORATION RECORD (Interval, size and number)

1064-1104 (2 shots per ft.)

32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
1064-1104	jet perforated (2 shots per foot)
1064-1104	fract w/1000 gal. 15% acid water, 14,000 gal. 3% acid water, 7000# of 20-40 sand.

33.\* PRODUCTION

DATE FIRST PRODUCTION 5-1-64 PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Pumping - 1-25/32 insert pump WELL STATUS (Producing or shut-in) Producing

DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
5--8-64	24	None	→	12	TSTM	25	None
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)	
None	None	→					

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)

Vented

TEST WITNESSED BY

L. R. McFadin

35. LIST OF ATTACHMENTS

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records

SIGNED Pat Thompson

TITLE Agent

DATE May 11, 1964

\*(See Instructions and Spaces for Additional Data on Reverse Side)

# INSTRUCTIONS

**General:** This form is designed for submitting a complete and correct well completion report and log on all types of lands and leases to either a Federal agency or a State agency, or both, pursuant to applicable Federal and/or State laws and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State office. See instructions on items 22 and 24, and 38, below regarding separate reports for separate completions.

If not filed prior to the time this summary record is submitted, copies of all currently available logs (drillers, geologists, sample and core analysis, all types electric, etc.), formation and pressure tests, and directional surveys, should be attached hereto, to the extent required by applicable Federal and/or State laws and regulations. All attachments should be listed on this form, see item 35.

**Item 4:** If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

**Item 18:** Indicate which elevation is used as reference (where not otherwise shown) for depth measurements given in other spaces on this form and in any attachments.

**Items 22 and 24:** If this well is completed for separate production from more than one interval zone (multiple completion), so state in item 22, and in item 24 show the producing interval, or intervals, top(s), bottom(s) and name(s) (if any) for only the interval reported in item 38. Submit a separate report (page) on this form, adequately identified, for each additional interval to be separately produced, showing the additional data pertinent to such interval.

**Item 29: "Sacks Cement":** Attached supplemental records for this well should show the details of any multiple stage cementing and the location of the cementing tool.

**Item 33:** Submit a separate completion report on this form for each interval to be separately produced. (See instruction for items 22 and 24 above.)

## 37. SUMMARY OF POROSITY ZONES:

SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF; CORREL INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CUSHION TEST, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH	TRUE VERT. DEPTH
	0 23 32 108 400 550 682 850 1049	23 32 108 400 550 682 850 1049 1130	Brown & black clay Sand Red bed Red bed Red bed, any. Red bed, any, blue shale lime, any Gray lime, dark gray lime lime, dol lime & dol			

38.

GEOLOGIC MARKERS

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEYSUBMIT IN TRIPPLICATE\*  
(Other instructions on re-  
verse side)Form approved.  
Budget Bureau No. 42-R1424.

3. LEASE DESIGNATION AND SERIAL NO.

LC-068130

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

England B

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Linda San Andres

11. SEC., T., R., M., OR BLK. AND  
SURVEY OR AREA

S 4, T 7 S, R 26 E

12. COUNTY OR PARISH 13. STATE

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR

H. E. Prince

3. ADDRESS OF OPERATOR

P. O. Box 129, Roswell, New Mexico 88201

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.\*

See also space 17 below.)

At surface

Unit letter B - 330' from N. line

2310' from E. line

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

3735 G R

16.

Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐PULL OR ALTER CASING ☐FRACTURE TREAT ☐MULTIPLE COMPLETE ☐SHOOT OR ACIDIZE ☐ABANDON\* ☐REPAIR WELL ☐CHANGE PLANS ☐(Other) ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐REPAIRING WELL ☐FRACTURE TREATMENT ☐ALTERING CASING ☐SHOOTING OR ACIDIZING ☐ABANDONMENT\* ☒(Other) ☐(NOTE: Report results of multiple completion on Well  
Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)\*

Plug and abandon as follows:

Well depth 1030 ft.

Run 15 sacks of cement from 1030' back to 848.10'

Cut casing at 774.50' from surface

Run mud from 848.10' back to 142'

Run 100' cement plug 50' in and 50' out of surface pipe.

Run mud from 42' back to 10'

Run cement to surface and set marker.

Clean debris from site.

RECEIVED

AUG 16 1976

U. S. GEOLOGICAL SURVEY  
ARTESIA, NEW MEXICO

18. I hereby certify that the foregoing is true and correct

SIGNED H. E. PrinceTITLE OwnerDATE 8/10/76

(This space for Federal or State office use)

APPROVED  
CONDITIONS OF APPROVAL, IF ANY:

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

AUG 17 1976

H. L. BEEKMAN  
ACTING DISTRICT ENGINEER

\*See Instructions on Reverse Side

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE\*

(See other instructions on reverse side)

Form approved.  
Budget Bureau No. 42-R355.5.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG \*

1. TYPE OF WELL: OIL ☒ GAS ☐ OTHER ☐ **NOTE**

2. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESER. ☐ OTHER ☐ **JAN 11 1965**

3. NAME OF OPERATOR: **Dr. Sam G. Dunn**

3. ADDRESS OF OPERATOR: **O. C. C. ARTESIA, OFFICE**

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements):  
At surface **1666.5 Ft. North line & 1657.6 Ft. from West line**  
At top prod. interval reported below **Same**  
At total depth **Same**

5. LEASE DESIGNATION AND SERIAL NO.: **NM-04-00030**

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME: **Clark-Pedro**

9. WELL NO.: **1**

10. FIELD AND POOL OR WILDCAT: **Linda San Andres**

11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA: **Sac. 4-Twp. 7S-R26E**

12. COUNTY OR PARISH: **Chaves**

13. STATE: **N.M.**

14. PERMIT NO.

DATE ISSUED

15. DATE SPUDDED: **2-29-64**

16. DATE T.D. REACHED: **4-19-64**

17. DATE COMPL. (Ready to prod.): **10-1-64**

18. ELEVATIONS (DF, RES, RT, OR, ETC.): **3609.70GR**

19. ELEV. CASINGHEAD: **3611**

20. TOTAL DEPTH, MD & TVD: **1074**

21. PLUG, BACK T.D., MD & TVD: **1074**

22. IF MULTIPLE COMPL., HOW MANY\*

23. INTERVALS DRILLED BY: **0-1074**

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)\*: **1013-1044 Slaughter San Andres**

25. WAS DIRECTIONAL SURVEY MADE: **No**

26. TYPE ELECTRIC AND OTHER LOGS RUN: **Radioactivity Log (Gamma Ray - Neutron)**

27. WAS WELL CORED: **Yes**

28. CASING RECORD (Report all strings set in well)

CASINO SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
8-5/8	28	105'	11"	50 sx	None
4-1/2	9.5	1074'	6-3/4	50sx	None

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)
2"				

30. TUBING RECORD

SIZE	DEPTH SET (MD)	PACKER SET (MD)
2"	1030	None

31. PERFORATION RECORD (Interval, size and number): **1037, 1038, 1039, 1041, & 1042 (Sand Jetted)**

32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
1037, 1038, 1039, 1041 & 1042	Sand Jetted
1037 to 1042	Treated with 15000 gals of 2-5% acid water & 7000 # of 20-40 sand

33. PRODUCTION

DATE FIRST PRODUCTION: **10-16-64**

PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump): **Pumping (8' O'Bannon insert pump)**

WELL STATUS (Producing or shut-in): **Producing**

DATE OF TEST: **10-1-64**

HOURS TESTED: **24**

CHOKE SIZE: **None**

PROD'N. FOR TEST PERIOD: **5**

OIL—BBL.: **TSTM**

GAS—MCF.: **2**

WATER—BBL.: **NA**

GAS-OIL RATIO: **NA**

FLOW, TUBING PRESS.: **24**

CASING PRESSURE: **24**

CALCULATED 24-HOUR RATE: **24**

OIL—BBL.: **24**

GAS—MCF.: **24**

WATER—BBL.: **24**

OIL GRAVITY-API (CORR.): **24**

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.): **Vented**

35. LIST OF ATTACHMENTS

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records

SIGNED: **Pat Thompson** TITLE: **Agent** DATE: **10-15-64**

\*(See Instructions and Spaces for Additional Data on Reverse Side)

NMOCC - ARTESIA  
NMOCC - PEERS

N. M. O. C. C. COPY

Copy 105F

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN TRIPLI  
(Other instructions on reverse side)

Form approved  
Budget Bureau No. 42-R1424

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back wells. Use "APPLICATION FOR PERMIT" for such proposals.)

RECEIVED

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		MAR 28 1977		5. LEASE DESIGNATION AND SERIAL NO. N.M. - 0400030	
2. NAME OF OPERATOR H. E. Prince		D. C. C.		6. IF INDIAN, ALIOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR P. O. Box 129, Roswell, New Mexico, 88201		ARTESIA OFFICE		7. UNIT AGREEMENT NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface Unit letter F - 1666.5' from N. line 1657.6 from W. line				8. FARM OR LEASE NAME Clark	
14. PERMIT NO.		15. ELEVATIONS (Show whether DF, RT, OR, etc.) 3609 G R		9. WELL NO. 1	
				10. FIELD AND POOL, OR WILDCAT Linda San Andres	
				11. SEC., T. R., M., OR BLK. AND SURVEY OR AREA S 4, T 7 S, R 26 E	
				12. COUNTY OR PARISH Chaves	
				13. STATE N. M.	

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF	<input type="checkbox"/>	PULL OR ALTER CASING	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	MULTIPLE COMPLETE	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	ABANDON*	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	CHANGE PLANS	<input type="checkbox"/>
(Other)	<input type="checkbox"/>		<input type="checkbox"/>

SUBSEQUENT REPORT OF:

WATER SHUT-OFF	<input type="checkbox"/>	REPAIRING WELL	<input type="checkbox"/>
FRACTURE TREATMENT	<input type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
SHOOTING OR ACIDIZING	<input type="checkbox"/>	ABANDONMENT*	<input checked="" type="checkbox"/>
(Other)	<input type="checkbox"/>		<input type="checkbox"/>

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)

Plug and abandon as follows:  
Well depth 1074'  
Run 15 sacks of cement from 1074' back to 892.10  
Cut casing at 675.50' from surface  
Run mud from 892.10 back to 155'  
Run 100' cement plug 50' in and 50' out to surface pipe.  
Run mud from 55' back to 10'  
Run cement to surface and set marker.  
Clean debris from site.

RECEIVED

AUG 16 1976

U. S. GEOLOGICAL SURVEY  
ARTESIA, NEW MEXICO

POSTED  
ID-2  
PAA  
4-1-77

18. I hereby certify that the foregoing is true and correct

SIGNED H. E. Prince TITLE Owner DATE 8/10/76

(This space for Federal or State office use)

APPROVED BY [Signature] TITLE  DATE

CONDITIONS OF APPROVAL, IF ANY:

MAR 25 1977

R. L. CLEGG  
ACTING DISTRICT ENGINEER

\*See Instructions on Reverse Side

# INSTRUCTIONS

**General:** This form is designed for submitting a complete and correct well completion report and log on all types of lands and leases to either a Federal agency or a State agency, or both, pursuant to applicable Federal and/or State laws and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal land or State office. See instructions on items 22 and 24, and 33, below regarding separate reports for separate completions.

**Item 1:** If not filed prior to the time this summary report is submitted, copies of all currently available logs (drillers, geologists, sample and core analysis, all types electric, etc.), formation and pressure tests, and directional surveys, should be attached hereto, to the extent required by applicable Federal and/or State laws and regulations. All attachments should be listed on this form; see item 35.

**Item 4:** If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

**Item 18:** Indicate which elevation is used as reference (where not otherwise shown) for depth measurements given in other spaces on this form and in any attachments.

**Items 22 and 24:** If this well is completed for separate production from more than one interval zone (multiple completion), so state in item 22, and in item 24 show the producing interval, or intervals, top(s), bottom(s) and name(s) (if any) for only the interval reported in item 33. Submit a separate report (page) on this form, adequately identified, for each additional interval to be separately produced, showing the additional data pertinent to such interval.

**Item 29:** "Sacks Cement". Attached supplemental records for this well should show the details of any multiple stage cementing and the location of the cementing tool.

**Item 33:** Submit a separate completion report on this form for each interval to be separately produced. (See instruction for items 22 and 24 above.)

37. SUMMARY OF POROUS ZONES: SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF; CONED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CUSHION USED, TIME TOOL-OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES				38. GEOLOGIC MARKERS	
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH / TRUE VERT. DEPTH
Sam Andres	562	562	Band, Shale, Lime & Anhydrite		
Slaughter	1013	1013	Dolomite, Lime & Anhydrite		
San Andres	1044	1044	Dolomite Anhydrite (Porosity Zone)		
San Andres	1074	1074	Dolomite, Lime & Anhydrite.		
			Log Tops		

U.S. GOVERNMENT PRINTING OFFICE: 1961 O-58484

## NEW MEXICO OIL CONSERVATION COMMISSION

Santa Fe, New Mexico

(Form C-104)  
Revised 7/1/57

## REQUEST FOR (OIL) - (GAS) ALLOWABLE

MAY 22 1964

New Well  
Recompletion

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 new oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

Artesia, New Mexico

May 19, 1964

(Place)

(Date)

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

Dr. Sam G. Dunn

Osage

Well No. 2

in SW

NE

1/4

(Company or Operator)

(Lease)

G

Sec. 33

T. 6S

R. 26 E

NMPM,

Linda San Andres

Pool

Unit Letter

Chaves

County. Date Spudded 1-6-64

Date Drilling Completed 1-11-64

Elevation NA

Total Depth 1069

PBD 1069

Top Oil/Gas Pay 1022

Name of Prod. Form. Slaughter San Andres

## PRODUCING INTERVAL -

Perforations 1022-1039, 1043-1046, 1048-1059

Open Hole

Depth

1069

Depth

1020

Casing Shoe

Tubing

## OIL WELL TEST -

Natural Prod. Test: None bbls. oil, bbls water in hrs, min. Size

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of

load oil used): 15 bbls. oil, 35 bbls water in 24 hrs, min. Size None

## GAS WELL TEST -

Natural Prod. Test: None MCF/Day; Hours flowed Choke Size

Method of Testing (pitot, back pressure, etc.):

Test After Acid or Fracture Treatment: MCF/Day; Hours flowed

Choke Size Method of Testing:

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): 1000 gal. 15% acid &amp; 14000 gal. 3% acid water with

Casing

Tubing

Date first new

7000# 20-40 sand

Press. None

Press. None

oil run to tanks

May 6, 1964

Oil Transporter

McWood Corporation

Gas Transporter

None

RECEIVED

Remarks: MAY 22 1964

D. C. C.

ARTESIA, OFFICE

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

MAY 22 1964

Dr. Sam G. Dunn

Approved: 19

(Company or Operator)

By: Pat Thompson

(Signature)

Agent

Title

Send Communications regarding well to:

Name

Dr. Sam G. Dunn

1312 Main St., Lubbock, Texas

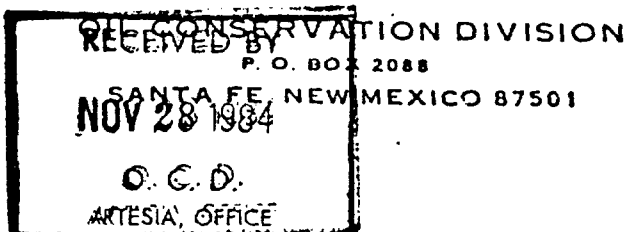
OIL CONSERVATION COMMISSION

By: M. L. Armstrong

Title: OIL AND GAS INSPECTOR



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SANTA FE	
FILE	
U.S.O.S.	
LAND OFFICE	
OPERATOR	



Form C-103  
Revised 10-1-78

5a. Indicate Type of Lease  
State ☐ Fee ☒  
5. 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 DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.)

OIL WELL ☒ GAS WELL ☐ OTHER ☐

Name of Operator  
Brady W. Production, Inc. ✓

Address of Operator  
P.O. Box 9128, Midland, Texas 79708

Location of Well  
UNIT LETTER G 2310 FEET FROM THE North LINE AND 2329 FEET FROM  
THE East LINE, SECTION 33 TOWNSHIP 6S RANGE 26E NMPM.

7. Unit Agreement Name  
8. Farm or Lease Name  
OSAGE  
9. Well No.  
2  
10. Field and Pool, or indicate  
Linda San Andres  
11. Elevation (Show whether DF, RT, GR, etc.)  
3608 GR.  
12. County  
Chaves

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input checked="" type="checkbox"/>
NULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input type="checkbox"/>	OTHER <input type="checkbox"/>

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.

On November 12, 1984 this well was plugged with a 25SX. plug placed from 700' to 1069' T.D. and a 10SX. plug from surface to 145' - 10# bentonite mud was placed between the cement plugs 102' of 8 5/8" - 23# surface casing and 1069' - 4 1/2" - 9 1/2# production casing was left in hole - 4" marker was set in top, and the location cleaned and ready for inspection.

Post ID-2  
12-7-84  
p4A

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

SIGNED Ch. H. Bandy TITLE Operator DATE November 27, 1984

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN DUPLICATE\*

(See other In-  
structions on  
reverse side)

Form approved.  
Budget Bureau No. 1004-0137  
Expires August 31, 1985

WELL OR RECOMPLETION REPORT AND LOG\*

1. WELL ☒ GAS ☐ DRY ☐ Other \_\_\_\_\_

2. TYPE OF COMPLETION:  
NEW WELL ☒ WORK OVER ☐ DEEPEN ☐ PLUG BACK ☐ DIFF. CENVR ☐ Other \_\_\_\_\_

3. NAME OF OPERATOR  
H. E. Prince

4. ADDRESS OF OPERATOR

P. O. Box 129, Roswell, New Mexico 88201

5. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)\*

At surface Drilled to 780' Plugged and abandoned

At top prod. interval reported below

At total depth 1650' F. W. L. & 990 F. S. L.

14. PERMIT NO. DATE ISSUED  
1/30/80

6. LEASE DESIGNATION AND SERIAL NO.  
Fed LC-068127

7. IF INDIAN, ALLOTTEE OR TRIBE NAME

8. UNIT AGREEMENT NAME

Federal

9. LEASE OR LEASE NAME

Federal

10. WELL NO.

12

11. FIELD AND POOL, OR WILDCAT

Linda San Andres

12. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA

Sec. 33, T 6S, R26E

13. COUNTY OR PARISH  
Chaves N. Mex.

15. DATE SPUDDED 7/15/80 16. DATE T.D. REACHED 2/14/85 17. DATE COMPL. (Ready to prod.) 18. ELEVATIONS (DF, RKB, RT, CR, ETC.)\* 19. ELEV. CASINGHEAD

20. TOTAL DEPTH, MD & TVD 780 21. PLUG BACK T.D., MD & TVD Surface 22. IF MULTIPLE COMPL., HOW MANY\* 23. INTERVALS DRILLED BY 780" 24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)\* NONE 25. WAS DIRECTIONAL SURVEY MADE Yes

26. TYPE ELECTRIC AND OTHER LOGS RUN NONE 27. WAS WELL CORRED No

28. CASING RECORD (Report all strings set in well)					
CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
8 5/8"	24	100'	12"	Circulated	None

29. LINER RECORD				30. TUBING RECORD		
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)

31. PERFORATION RECORD (Interval, size and number)		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
None		DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED

33. PRODUCTION  
DATE FIRST PRODUCTION PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) WELL STATUS (Producing or shut-in)

DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) TEST WITNESSED BY

35. LIST OF ATTACHMENTS

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records

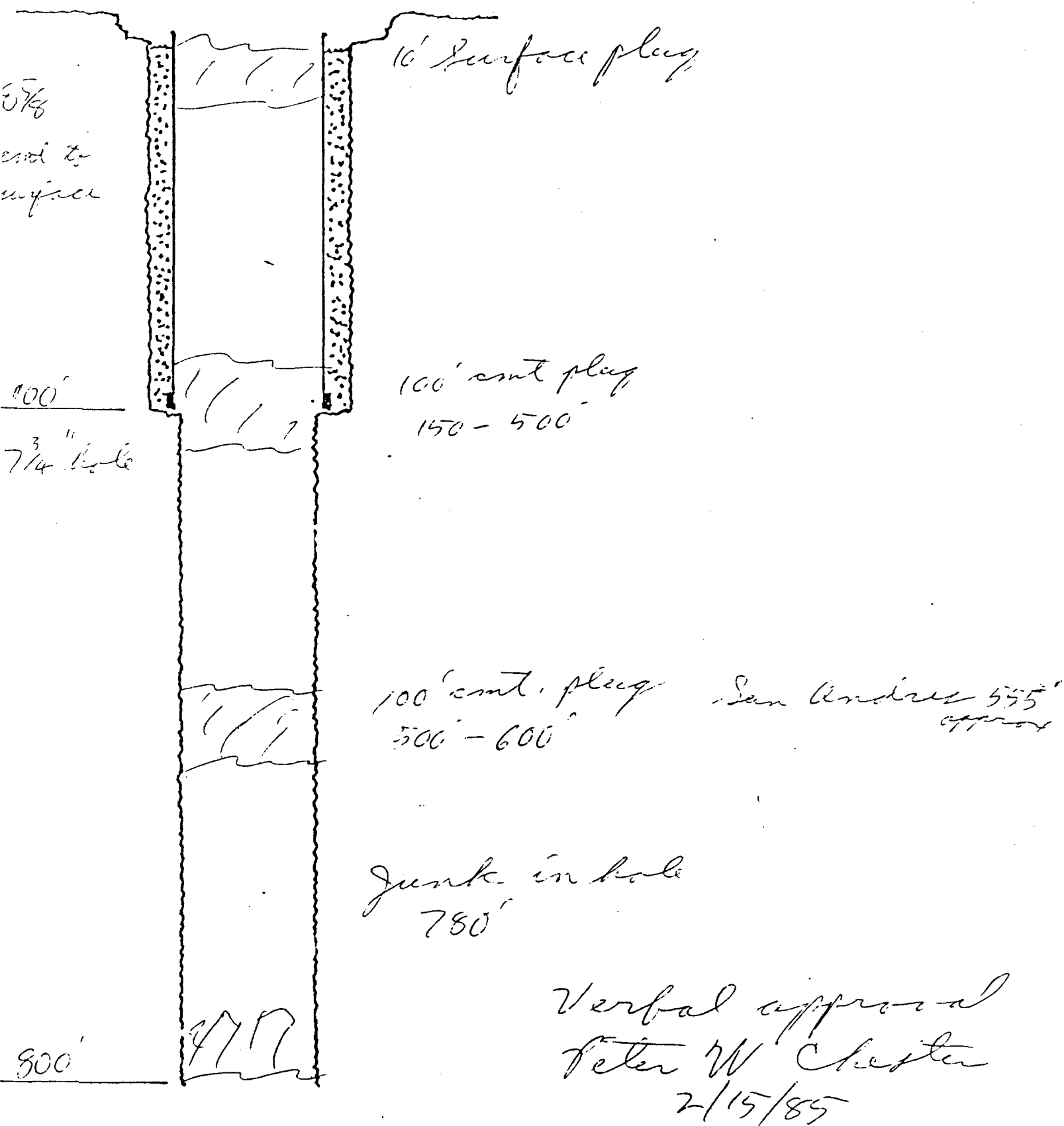
SIGNED H. E. Prince TITLE Operator DATE 4/1/85

\*(See Instructions and Spaces for Additional Data on Reverse Side)

ITEM 33: Submit a separate completion report on this form for each interval to be separately produced. (See instruction for items 22 and 24 above.)

37. SUMMARY OF POROUS ZONES: (Show all important zones of porosity and contents thereof; cored intervals; and all drill-stem, tests, including depth interval tested, cushion used, time tool open, flowing and shut-in pressures, and recoveries):				38. GEOLOGIC MARKERS	
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH
Brown Clay and sand	Surface	30	SAMPLES	NONE	
Red Bed	30	90	"		
Red Bed Anhy.	90	400	"		
Red Bed Anhy.	400	575	"		
Red Bed Anhy. With Blue Shale	575	685	"		
Lime Anhy	685	780			

OPERATOR : H.E. Prince  
WELL : 12 - Federal LEASE No. : LC - 00812.7  
LOCATION : 1650 / w 790 / n 33 - E 9 - 76 E



UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE\*  
(Other Instructions on reverse side)

Form approved.  
Budget Bureau No. 42-R1424.  
5. LEASE DESIGNATION AND SERIAL NO.  
FED. LC-068127  
6. IF INDIAN, ALLOTTEE OR TRIBE NAME

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.  
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR  
H. E. PRINCE

3. ADDRESS OF OPERATOR  
P.O. Box 129 Roswell, N. Mexico 58201

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.\*  
See also space 17 below.)  
At surface  
1650' F.W. 4 8 990' F.S. 4.

14. PERMIT NO.

15. ELEVATIONS (Show whether DT, RT, OR, etc.)

7. UNIT AGREEMENT NAME  
FEDERAL

8. FARM OR LEASE NAME  
FEDERAL

9. WELL NO.  
12

10. FIELD AND POOL, OR WILDCAT  
UNDER SAN ANTONIO

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
Sec. 33, T. 4S, R. 26E

12. COUNTY OR PARISH 12. STATE  
CHAVES N. Mex.

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETION <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input checked="" type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <u>PLUG AND ABANDON</u>	

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)\*

PLUGGED AND ABANDON AS PER VERBA APPROVAL 2/15/85  
SURFACE CASING 85" SIZE DEPTH 101' CEMENT CIRCULATED  
WELL DRILLED TO TOTAL DEPTH OF 730'  
PLACED HEAVY MUD 600' TO 730'  
PLACED 800' CEMENT PLUG AT 500' TO 600'  
PLACED HEAVY MUD AT 150' TO 500'  
PLACED 100' CEMENT PLUG AT 50' TO 150'  
PLACED HEAVY MUD 10' TO 50'  
PLACED CEMENT FROM SURFACE DOWN TO 10'  
SET 4" X 6" STEEL MARKER W/ LEGAL DESCRIPTION ON IT  
CLEANED DEBRIS AND CLEANED SITE AND FILLED PIT

18. I hereby certify that the foregoing is true and correct

SIGNED H. E. PRINCE TITLE OPERATOR DATE 2/18/85

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side

APPROVED  
DATE \_\_\_\_\_  
PETER W. CHESTER  
MAY 14 1986  
BUREAU OF LAND MANAGEMENT  
ROSWELL RESOURCE AREA

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE\*

(See other instructions on reverse side)

Form approved.  
Budget Bureau No. 42-R355.5.

5. LEASE DESIGNATION AND SERIAL NO.

LC-068127

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Elliott

9. WELL NO.

2 Changed to Feb 7

10. FIELD AND POOL, OR WILDCAT

Linda San Andres

11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA

Sec. 33-T6S-R26E

12. COUNTY OR PARISH

Chaves

13. STATE

N. M.

14. PERMIT NO.

DATE ISSUED

15. DATE SHUDDER

5-1-64

16. DATE T.D. REACHED

5--6-64

17. DATE COMPL. (Ready to prod.)

8-14-64

18. ELEVATIONS (DF, RKB, RT, GR, ETC.)\*

3615 GR

19. ELEV. CASINGHEAD

20. TOTAL DEPTH, MD & TVD

1122

21. PLUG, BACK T.D., MD & TVD

1119,

22. IF MULTIPLE COMPL., HOW MANY\*

23. INTERVALS DRILLED BY

ROTARY TOOLS  
0-1122

CABLE TOOLS

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)\*

1054-1072

Slaughter San Andres

25. WAS DIRECTIONAL SURVEY MADE

No

26. TYPE ELECTRIC AND OTHER LOGS RUN

Gamma Ray-Neutron

27. WAS WELL CORED

Yes

28. CASING RECORD (Report all strings set in well)

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
8-5/8"	28#	100	11"	75 sacks - circ.	None
4-1/2"	9.5#	1119	6-3/4"	50 sacks	None

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					2"	1054	

31. PERFORATION RECORD (Interval, size and number)

Sand jet with one shot at intervals  
1054-1056-1068-1070-1072

32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
1054-1072	1000 gal. 15% acid, 15000 gal. 7 1/2% acid and 7500# 20-40 sand

33.\* PRODUCTION

DATE FIRST PRODUCTION 8-14-64		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Pumping - 6" x 1-25/32 0" Bannan				WELL STATUS (Producing or Producing	
DATE OF TEST 8-14-64	HOURS TESTED 24	CHOKE SIZE pump	PROD'N. FOR TEST PERIOD →	OIL—BBL. 12	GAS—MCF. -0-	WATER—BBL. 35	GAS-OIL RATIO
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE →	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)	

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)

ISTM- vented

TEST WITNESSED BY

L. R. McFadin

35. LIST OF ATTACHMENTS

Gamma Ray Neutronlog

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records

SIGNED

Pat Thompson

TITLE

Agent

DATE

Aug. 28, 1964

\*(See Instructions and Spaces for Additional Data on Reverse Side)

# INSTRUCTIONS

**General:** This form is designed for submitting a complete and correct well completion report and log on all types of lands and leases to either a Federal agency or a State agency, or both, pursuant to applicable Federal and/or State laws and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State office. See instructions on items 22 and 24, and 33, below regarding separate reports for separate completions.

If not filed prior to the time this summary record is submitted, copies of all currently available logs (drillers, geologists, sample and core analysis, all types electric, etc.), formation and pressure tests, and directional surveys, should be attached hereto, to the extent required by applicable Federal and/or State laws and regulations. All attachments should be listed on this form, see item 35.

**Item 4:** If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

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**Item 29:** "Sacks Cement": Attached supplemental records for this well should show the details of any multiple stage cementing and the location of the cementing tool. **Item 33:** Submit a separate completion report on this form for each interval to be separately produced. (See instruction for items 22 and 24 above.)

37. SUMMARY OF POROUS ZONES: SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF; CORED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CUSHION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES				38. GEOLOGIC MARKERS		
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH	TRUE VERT. DEPTH
Slaughter San Andres	1035 1041 1100	1041 1100 1120	Anhy Brown dol, anhy Anhy	San Andres	530	



UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE\*  
(Other instructions on re-  
verse side)

Form approved.  
Budget Bureau No. 42-R1424.

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.  
Use "APPLICATION FOR PERMIT" for such proposals.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. LC-068127	
2. NAME OF OPERATOR H. E. Prince		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR P. O. Box 129, Roswell, New Mexico 88201		7. UNIT AGREEMENT NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface Unit letter 0 - 990' from S. line 2310' from E. line		8. FARM OR LEASE NAME Federal	
14. PERMIT NO.		9. WELL NO. 7	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3615 G.R.		10. FIELD AND POOL, OR WILDCAT Linda San Andres	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA S 33, T 6 S, R 26 E	
		12. COUNTY OR PARISH 13. STATE	

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF	<input type="checkbox"/>	PULL OR ALTER CASING	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	MULTIPLE COMPLETE	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	ABANDON*	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	CHANGE PLANS	<input type="checkbox"/>
(Other)	<input type="checkbox"/>		<input type="checkbox"/>

SUBSEQUENT REPORT OF:

WATER SHUT-OFF	<input type="checkbox"/>	REPAIRING WELL	<input type="checkbox"/>
FRACTURE TREATMENT	<input type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
SHOOTING OR ACIDIZING	<input type="checkbox"/>	ABANDONMENT*	<input checked="" type="checkbox"/>
(Other)	<input type="checkbox"/>		<input type="checkbox"/>

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)\*

Plug and abandon as follows:  
Well depth 1119'  
Run 15 sack of cement from 1119' back to 937.10'  
Cut casing at 720' from top of surface.  
Run mud from 937.10 back to 150'.  
Run 100 ft. cement plug 50' in and 50' out of surface pipe.  
Run mud from 50' back to 10'.  
Run cement to surface and set marker.  
Clean debris from site.

RECEIVED

AUG 16 1976

U. S. GEOLOGICAL SURVEY  
ARTESIA, NEW MEXICO

18. I hereby certify that the foregoing is true and correct

SIGNED H. E. Prince TITLE Owner DATE 8/10/76

(This space for Federal or State office use)

APPROVED BY [Signature] TITLE                      DATE                     

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

APPROVED

AUG 17 1976

L. L. BEEKWIND  
ACTING DISTRICT ENGINEER

\*See Instructions on Reverse Side

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE\*

(See other instructions on reverse side)

Form approved.  
Budget Bureau No. 42-R355.5.

5. LEASE DESIGNATION AND SERIAL NO.  
**LC-068127**

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

**Elliott**

9. WELL NO.

**1 Changed to Fed 6**

10. FIELD AND POOL, OR WILDCAT

**Linda San Andres**

11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA

**Sec. 33, T. 6S, R. 26E.**

12. COUNTY OR PARISH  
**Chaves**

13. STATE  
**N. M.**

14. PERMIT NO.

DATE ISSUED

15. DATE SPUDDED  
**4-28-64**

16. DATE T.D. REACHED  
**5-11-64**

17. DATE COMPL. (Ready to prod.)  
**9-1-64**

18. ELEVATIONS (DF, RKB, RT, GR, ETC.)\*  
**3624 GR**

19. ELEV. CASINGHEAD

20. TOTAL DEPTH, MD & TVD  
**1150**

21. PLUG, BACK T.D., MD & TVD  
**1148**

22. IF MULTIPLE COMPL., HOW MANY\*

23. INTERVALS DRILLED BY  
**→**

ROTARY TOOLS  
**105-1150**

CABLE TOOLS  
**0-105**

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)\*

**1079-1117 Slaughter San Andres**

25. WAS DIRECTIONAL SURVEY MADE

**No**

26. TYPE ELECTRIC AND OTHER LOGS RUN

**Gamma Ray-Neutron**

27. WAS WELL CORED

**Yes**

28. CASING RECORD (Report all strings set in well)

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
<b>8-5/8"</b>	<b>28#</b>	<b>102</b>	<b>11"</b>	<b>75 sax &amp; circulated</b>	<b>None</b>
<b>4 1/2</b>	<b>9.5#</b>	<b>1148</b>	<b>6-3/4"</b>	<b>50 sax</b>	<b>None</b>

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)

30. TUBING RECORD

SIZE	DEPTH SET (MD)	PACKER SET (MD)
<b>2"</b>	<b>1089</b>	<b>None</b>

31. PERFORATION RECORD (Interval, size and number)

**Sand jetted with 1 hole at following depths: 1087-1094-1096-1098-1107-1110-1112-1114**

32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
<b>1087-1114</b>	<b>1000 gal. 15% acid water, 15000 gal. 7 1/2% acid water, 7000# 20-40 sand</b>

33.\*

PRODUCTION

DATE FIRST PRODUCTION <b>9-1-64</b>		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) <b>Pumping - Obannon 1-25/32 x 6"</b>				WELL STATUS (Producing or shut-in) <b>Producing</b>	
DATE OF TEST <b>9-1-64</b>	HOURS TESTED <b>24</b>	CHOKE SIZE <b>None</b>	PROD'N. FOR TEST PERIOD <b>→</b>	OIL—BBL. <b>9</b>	GAS—MCF. <b>None</b>	WATER—BBL. <b>32</b>	GAS-OIL RATIO
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE <b>→</b>	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)	

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)

**Vented**

TEST WITNESSED BY

**L. R. McFadin**

35. LIST OF ATTACHMENTS

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records

SIGNED **Pat Thompson**

TITLE **Agent**

DATE **Sept. 12, 1964**

\*(See Instructions and Spaces for Additional Data on Reverse Side)

# INSTRUCTIONS

**General:** This form is designed for submitting a complete and correct well completion report and log on all types of lands and leases to either a Federal agency or a State agency, or both, pursuant to applicable Federal and/or State laws and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State office. See instructions on items 22 and 24, and 33, below regarding separate reports for separate completions.

If not filed prior to the time this summary record is submitted, copies of all currently available logs (drillers, geologists, sample and core analysis, all types electric, etc.), formation and pressure tests, and directional surveys, should be attached hereto, to the extent required by applicable Federal and/or State laws and regulations. All attachments should be listed on this form, see item 35.

**Item 4:** If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

**Item 18:** Indicate which elevation is used as reference (where not otherwise shown) for depth measurements given in other spaces on this form and in any attachments. **Items 22 and 24:** If this well is completed for separate production from more than one interval zone (multiple completion), so state in item 22, and in item 24 show the producing interval, or intervals, top(s), bottom(s) and name(s) (if any) for only the interval reported in item 33. Submit a separate report (page) on this form, adequately identified, for each additional interval to be separately produced, showing the additional data pertinent to such interval.

**Item 29:** "Sacks Cement": Attached supplemental records for this well should show the details of any multiple stage cementing and the location of the cementing tool.

**Item 33:** Submit a separate completion report on this form for each interval to be separately produced. (See instruction for items 22 and 24 above.)

## 37. SUMMARY OF POROUS ZONES:

SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF: CORED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CUSHION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES

## 38. GEOLOGIC MARKERS

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	TOP	
					MEAS. DEPTH	TRUE VERT. DEPTH
San Andres	1090	1150	NA	San Andres	612	
				Slaughter San Andres	1079	

# OPERATOR'S COPY

Form 9-331  
(May 1963)

## UNITED STATES DEPARTMENT OF THE INTERIOR GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE\*  
(Other instructions on re-  
verse side)

Form approved.  
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

LC-068127

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Federal

9. WELL NO.

6

10. FIELD AND POOL, OR WILDCAT

Linda San Andres

11. SEC., T., R., M., OR BLK. AND  
SURVEY OR AREA

S 33, T 6 S, R 26 E

12. COUNTY OR PARISH 13. STATE

### SUNDRY NOTICES AND REPORTS ON WELLS (Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use "APPLICATION FOR PERMIT" for such proposals.)

1. OIL ☒ GAS ☐  
WELL ☒ WELL ☐ OTHER ☐

2. NAME OF OPERATOR

H. E. Prince

3. ADDRESS OF OPERATOR

P. O. Box 129, Roswell, New Mexico 88201

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.  
See also space 17 below.)  
At surface

Unit Letter O - 330' from S. Line

1650' From E. line

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, OR, etc.)

3624 G R

### 16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐

PULL OR ALTER CASING ☐

FRACTURE TREAT ☐

MULTIPLE COMPLETE ☐

SHOOT OR ACIDIZE ☐

ABANDON\* ☐

REPAIR WELL ☐

CHANGE PLANS ☐

(Other) ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐

REPAIRING WELL ☐

FRACTURE TREATMENT ☐

ALTERING CASING ☐

SHOOTING OR ACIDIZING ☐

ABANDONMENT\* ☒

(Other) ☐

(NOTE: Report results of multiple completion on Well  
Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)\*

Plug and abandon well as follows:

Well Depth 1148 ft.

Run 15 sacks of cement from 1148 ft. back to 966.10 ft.

Cut casing at 750 ft. from surface.

Run Mud from 966.10 back 152 ft.

Run 100' cement plug 50' in and 50' out of surface pipe.

Run mud from 52' back to 10' run cement to surface and set marker.

Clean debris from site.

RECEIVED

AUG 16 1976

U. S. GEOLOGICAL SURVEY  
ARTESIA, NEW MEXICO

18. I hereby certify that the foregoing is true and correct

SIGNED H. E. Prince

TITLE Owner

DATE 8/10/76

(This space for Federal or State office use)

APPROVED BY [Signature] TITLE \_\_\_\_\_ DATE \_\_\_\_\_

APPROVED  
AUG 17 1976  
T. L. SEEKINIAN  
DISTRICT ENGINEER

\*See Instructions on Reverse Side

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE

(See other instructions on reverse side)

Form approved.  
Budget Bureau No. 42-R355.5.

WELL OR RECOMPLETION REPORT AND LOG \*

b. TYPE OF COMPLETION:

NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other \_\_\_\_\_

2. NAME OF OPERATOR

Dr. Sam G. Dunn

3. ADDRESS OF OPERATOR

1312 Main, Lubbock, Texas

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)\*

At surface NE 1/4 SW 1/4 Sec. 33, T6S, R26E, NMPM  
2328.9 ft. from West line and  
At top prod. interval reported below 2310 ft. from South line  
At total depth

14. PERMIT NO.

DATE ISSUED

5. LEASE DESIGNATION AND SERIAL NO.

LC 063127

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

England

9. WELL NO.

1000

10. FIELD AND POOL, OR WILDCAT

Linda San Andres

11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA

Sec. 33-T6S-R26E, NMPM

12. COUNTY OR PARISH

Chaves

13. STATE

New Mexico

15. DATE SPUDDED

10-30-63

16. DATE T.D. REACHED

11-5-63

17. DATE COMPL. (Ready to prod.)

3-12-64

18. ELEVATIONS (DF, REB, RT, GR, ETC.)\*

19. ELEV. CASINGHEAD

20. TOTAL DEPTH, MD & TVD

1078

21. PLUG, BACK T.D., MD & TVD

1070

22. IF MULTIPLE COMPL., HOW MANY\*

23. INTERVALS DRILLED BY

→

ROTARY TOOLS

X

CABLE TOOLS

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)\*

1018-1058 Slaughter San Andres

25. WAS DIRECTIONAL SURVEY MADE

No

26. TYPE ELECTRIC AND OTHER LOGS RUN

Gamma Ray Neutron

27. WAS WELL CORED

Yes

28. CASING RECORD (Report all strings set in well)

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
8-5/8	28#	100	11"	50 sax - circulate	None
4-1/2	9.5#	1078	6-3/4	50 sax	None

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)

30. TUBING RECORD

SIZE	DEPTH SET (MD)	PACKER SET (MD)
2"	1010	None

31. PERFORATION RECORD (Interval, size and number)

1018-1058 with 2 shots per ft.  
Jet perforated

32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
1018-1058	1000 gal. 15% acid water, 14000 gal. 3% acid water, 7000# 20-40 sand

33. PRODUCTION

DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)				WELL STATUS (Producing or shut-in)	
May 2, 1964		Pumping- 3 ft. O'Bannon insert pump				Producing	
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
May 5, 1964	24	None	→	20	TSTM	25	None
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)	
None	None	→					

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)

Vented

TEST WITNESSED BY

L. R. McFadin

35. LIST OF ATTACHMENTS

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records

SIGNED

Pat Thompson

TITLE

Agent

DATE

May 19, 1964

\*(See Instructions and Spaces for Additional Data on Reverse Side)

# INSTRUCTIONS

**General:** This form is designed for submitting a complete and correct well completion report and log on all types of lands and leases to either a Federal agency or a State agency, or both, pursuant to applicable Federal and/or State laws and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State office. See instructions on items 22 and 24, and 33, below regarding separate reports for separate completions.

If not filed prior to the time this summary record is submitted, copies of all currently available logs (drillers, geologists, sample and core analysis, all types electric, etc.), formation and pressure tests, and directional surveys, should be attached hereto, to the extent required by applicable Federal and/or State laws and regulations. All attachments should be listed on this form, see item 35.

**Item 4:** If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

**Item 18:** Indicate which elevation is used as reference (where not otherwise shown) for depth measurements given in other spaces on this form and in any attachments.

**Items 22 and 24:** If this well is completed for separate production from more than one interval zone (multiple completion), so state in item 22, and in item 24 show the producing interval or intervals, top(s), bottom(s) and name(s) (if any) for only the interval reported in item 33. Submit a separate report (page) on this form, adequately identified, for each additional interval to be separately produced, showing the additional data pertinent to such interval.

**Item 29:** "Sacks Cement": Attached supplemental records for this well should show the details of any multiple stage cementing and the location of the cementing tool.

**Item 33:** Submit a separate completion report on this form for each interval to be separately produced. (See instruction for items 22 and 24 above.)

## 37. SUMMARY OF POROUS ZONES:

SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF; COHED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL, TESTED, CUSHION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH	TRUE VERT. DEPTH
	0 520 1013	520 1013 1078	Red bed, sand, shale & lime Dol., Anhy, Gyp, shale Dol., sucroseic, Anhy. fossils			

38.

## GEOLOGIC MARKERS

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN TRIPPLICATE\*  
(Other instructions on re-verse side)

Form approved.  
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

FED. LC-068127

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

FEDERAL

9. WELL NO. 1-England Federal  
Fed. #3

10. FIELD AND POOL, OR WILDCAT

LINDA SAN ANDRES

11. SEC., T., R., M., OR BLK. AND  
SURVEY OR AREA

S.33-T6S-R26E

12. COUNTY OR PARISH 13. STATE  
Chaves N.M.

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.  
Use "APPLICATION FOR PERMIT—" for such proposals.)

1.

OIL WELL ☒ GAS WELL ☐ OTHER

2. NAME OF OPERATOR

H. E. Prince

3. ADDRESS OF OPERATOR

606 N. Atkinson, "oswell, New Mexico, 88201

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.\*

See also space 17 below.)

At surface

Unit Letter K - 2328.9' From W. Line  
2310' From S. Line.

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

3608 GR

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐

FRACTURE TREAT ☐

SHOOT OR ACIDIZE ☐

REPAIR WELL ☐

(Other)

PULL OR ALTER CASING ☐

MULTIPLE COMPLETE ☒

ABANDON\* ☐

CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐

FRACTURE TREATMENT ☐

SHOOTING OR ACIDIZING ☐

(Other)

REPAIRING WELL ☐

ALTERING CASING ☐

ABANDONMENT\* ☐

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)\*

Plug and abandon as follows:

Well Depth 1070'

Run 15 sacks of cement from 1070 back to 888.10

Cut Casing at 814.50' from surface

Run Mud from 888.10 back to 142'

Run 100' cement plug 50' in and 50' out of Surface pipe

Run Mud from 42' back to 10'

Run Cement to surface and set marker

Clean debris from site.

RECEIVED  
MAR 25 1975  
U.S. GEOLOGICAL SURVEY  
ARTESIA, NEW MEXICO

18. I hereby certify that the foregoing is true and correct

SIGNED H. E. Prince

TITLE owner

DATE 3-20-75

(This space for Federal or State office use)

APPROVED BY  
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

\*See Instructions on Reverse Side



UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN DUPLIC.

(See other instructions on reverse side)

Form approved.  
Budget Bureau No. 42-R355.5.

WELL OR RECOMPLETION REPORT AND LOG \*

1. WELL ☒ GAS WELL ☐ DRY ☐ Other ☐

b. TYPE OF COMPLETION

NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other ☐

2. NAME OF OPERATOR

Mr. and Mrs. Dunn

3. ADDRESS OF OPERATOR

P.O. Box 192, Lordsburg, New Mexico, 88020

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)\*

At surface 2 1/2 mi. from the south line of 23rd St. from the east line

At top prod. interval reported below 5000

At total depth 10000

14. PERMIT NO.

DATE ISSUED

15. DATE SPUDDED

6-1-66

16. DATE T.D. REACHED

7-6-66

17. DATE COMPL. (Ready to prod.)

10-1-67

18. ELEVATIONS (DF, R&B, RT, GR, ETC.)\*

2500 GR

19. ELEV. CASINGHEAD

20. TOTAL DEPTH, MD & TVD

1094

21. PLUG, BACK T.D., MD & TVD

1093

22. IF MULTIPLE COMPL., HOW MANY\*

23. INTERVALS DRILLED BY

ROTARY TOOLS

Rotary

CABLE TOOLS

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)\*

1040-1050 Blaughter San Andres

25. WAS DIRECTIONAL SURVEY MADE

No

26. TYPE ELECTRIC AND OTHER LOGS RUN

Gamma Ray Neutron

27. WAS WELL CORED

Yes

28. CASING RECORD (Report all strings set in well)

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
5 1/2	32	144	11	125 sacks	None
4 1/2	20	1094	6 3/4	125 sacks 50-60 psi.	None
				2 1/2 gal	

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)

30. TUBING RECORD

SIZE	DEPTH SET (MD)	PACKER SET (MD)
2"	1075	

31. PERFORATION RECORD (Interval, size and number)

1040-1050-1070-1072  
1070-1077-1079-1080 total 32 holes  
2-3/4" hole, per foot

32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
1040-1077	10,000 gal. 14.2521

33. PRODUCTION

DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)				WELL STATUS (Producing or shut-in)	
10-1-67		7" x 1 1/2" 5" Danmon Working Barrel				Producing	
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
10-1-67	24		→	2.70	1.21	1.38	
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)	
		→	2.70	1.21	1.38	10	

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)

TEST WITNESSED BY

J. N. Sutherland

35. LIST OF ATTACHMENTS

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records

SIGNED

TITLE

DATE

10-21-67

\*(See Instructions and Spaces for Additional Data on Reverse Side)

ACCEPTED FOR RECORD

J. N. Sutherland  
District Engineer

OPERATOR'S COPY  
UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE\*  
(Other instructions on re-verse side)

Form approved.  
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

LC-068127

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.  
Use "APPLICATION FOR PERMIT" for such proposals.)

1.

OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR

H. E. Prince

3. ADDRESS OF OPERATOR

P. O. Box 129, Roswell, New Mexico, 88201

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.\*

See also space 17 below.)  
At surface

Unit letter J, 2310' from the S. line

2310' from the E. line.

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, OR, etc.)

3622 G R

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Federal

9. WELL NO.

9

10. FIELD AND POOL, OR WILDCAT

Linda San Andres

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

S-33, T 6 S, R 26 E

12. COUNTY OR PARISH

Chaves

13. STATE

N. Mex.

16.

Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐

PULL OR ALTER CASING ☐

FRACTURE TREAT ☐

MULTIPLE COMPLETION ☐

SHOOT OR ACIDIZE ☐

ABANDON\* ☐

REPAIR WELL ☐

CHANGE PLANS ☐

(Other) ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐

REPAIRING WELL ☐

FRACTURE TREATMENT ☐

ALTERING CASING ☐

SHOOTING OR ACIDIZING ☐

ABANDONMENT\* ☒

(Other) ☐

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)\*

Plug and abandon as follows:

Well depth 1093'

Run 15 sacks of cement from 1093 back to 912.10'

Run mud from 912.10 back to 194.43

Run 100' cement plug 50' in and 50' out of surface pipe.

Run mud from 94.43 back to 10'

Run cement to surface and set marker.

Remove all debris from site.

RECEIVED

AUG 16 1976

U. S. GEOLOGICAL SURVEY  
ARTESIA, NEW MEXICO

18. I hereby certify that the foregoing is true and correct

SIGNED

*H. E. Prince*

TITLE

Owner

DATE

8/10/76

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

AUG 19 1976  
K. L. BEEKMAN  
ACTING DISTRICT ENGINEER

\*See Instructions on Reverse Side

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE

(See other instructions on reverse side)

Form approved.  
Budget Bureau No. 42-R355.5.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG \*

WELL ☒ OIL WELL ☐ GAS WELL ☐ DRY ☐ Other \_\_\_\_\_  
DEEP- ☐ PLUG ☐ DIFF. ☐ Other \_\_\_\_\_  
IN BACK RESVR.

2. NAME OF OPERATOR

Yates Petroleum Corporation

3. ADDRESS OF OPERATOR

207 South 4th St., Artesia, NM 88210

4. LOCATION OF WELL (Report location clearly and in accordance with applicable State requirements)

At surface 330' FNL & 1650' FWL

At top prod. interval reported below

At total depth

14. PERMIT NO.

DATE ISSUED

12. COUNTY OR PARISH

13. STATE

Chaves

NM

15. DATE SPUDDED

4-6-81

16. DATE T.D. REACHED

4-13-81

17. DATE COMPL. (Ready to prod.)

5-16-81

18. ELEVATIONS (DF, RBB, RT, GR, ETC.) \*

3657.2' GR

19. ELEV. CASINGHEAD

20. TOTAL DEPTH, MD & TVD

1150'

21. PLUG, BACK T.D., MD & TVD

1137'

22. IF MULTIPLE COMPL., HOW MANY \*

23. INTERVALS DRILLED BY

ROTARY TOOLS

CABLE TOOLS

0-1150'

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD) \*

1098-1128' San Andres

25. WAS DIRECTIONAL SURVEY MADE

No

26. TYPE ELECTRIC AND OTHER LOGS RUN

Gamma Ray Neutron

27. WAS WELL CORED

No

28. CASING RECORD (Report all strings set in well)

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
10-3/4"	35.5#	200'	14-3/4"	200	
4-1/2"	9.5#	1150'	9-1/2"	225	

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT	SCREEN (MD)
			ACCEPTED FOR RECORD	
			ROGER A. CHAPMAN	

30. TUBING RECORD

SIZE	DEPTH SET (MD)	PACKER SET (MD)
2-3/8"	1085'	

31. PERFORATION RECORD (Interval, size and number)

1098-1128' w/15 .50" holes

MAY 27 1981

U.S. GEOLOGICAL SURVEY  
ROSWELL, NEW MEXICO

32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

DETAILED INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
	Acidized perms w/2500 g. 15% DS-30 & ball sealers.

33. PRODUCTION

DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)				WELL STATUS (Producing or shut-in)	
5-16-81		Pumping				Producing	
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
5-18-81	24	-	→	5	TSTM	40	-
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)	
-	-	→	5	TSTM	40	26	

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)

None

NTL-26 REQ

TEST WITNESSED BY

Bill Hansen

35. LIST OF ATTACHMENTS

Deviation Survey

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records

Engineering

SIGNED

TITLE

Secretary

DATE

5-20-81

\*(See Instructions and Spaces for Additional Data on Reverse Side)

NOTED BY DAN

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE\*  
(Other instructions on re-  
verse side)

Form approved.  
Budget Bureau No. 1004-0135  
Expires August 31, 1985

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.  
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> P&A		5. LEASE DESIGNATION AND SERIAL NO. NM 27916	
2. NAME OF OPERATOR Yates Petroleum Corporation		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR 207 South 4th St., Artesia, NM 88210		7. UNIT AGREEMENT NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 330 FNL & 1650 FWL, Sec. 4-T7S-R26E		8. FARM OR LEASE NAME North Sturgeon PR Federal	
14. PERMIT NO.		9. WELL NO. 1	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3657.2' GR		10. FIELD AND POOL, OR WILDCAT Linda San Andres	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Unit C, Sec. 4-T7S-R26E	
		12. COUNTY OR PARISH Chaves	13. STATE NM

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF	<input type="checkbox"/>	PULL OR ALTER CASING	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	MULTIPLE COMPLETION	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	ABANDON*	<input checked="" type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	CHANGE PLANS	<input type="checkbox"/>
(Other)	<input type="checkbox"/>		

SUBSEQUENT REPORT OF:

WATER SHUT-OFF	<input type="checkbox"/>	REPAIRING WELL	<input type="checkbox"/>
FRACTURE TREATMENT	<input type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
SHOOTING OR ACIDIZING	<input type="checkbox"/>	ABANDONMENT*	<input type="checkbox"/>
(Other)	<input type="checkbox"/>		

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)\*

Verbal permission to plug and abandon well obtained from Peter Chester, BLM, Roswell 5-31-85, by Ray Stall, YPC, as follows:

Set CIBP at 1050' w/35' cement on top.  
Set 50' or 15 sacks surface plug.

Call BLM, Roswell, 24 hours before plugging well. BLM phone no. 624-1790.

Clean location and set P&A marker.



18. I hereby certify that the foregoing is true and correct

SIGNED Peter W. Chester TITLE Production Supervisor DATE 5-31-85  
(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

APPROVED  
PETER W. CHESTER  
DATE

JUN 4 1985

BUREAU OF LAND MANAGEMENT  
ROSWELL RESOURCE AREA

\*See Instructions on Reverse Side

FIELD ENG. LOG

WELL RECORD

INSTRUCTIONS: This form should be executed in triplicate, preferably typewritten, nearest district office of the State Engineer. All sections, except Section 5, shall be as accurately as possible when any well is drilled, repaired or deepened. When this for record, only Section 1A and Section 5 need be completed.

Section 1


(A) Owner of well COOPER  
Street and Number 013  
City ROSELLE State N. Mex.  
Well was drilled under Permit No. PB-31 and is located in the NW 1/4 SW 1/4 of Section 33 Twp. 6S Rge. 26E  
(B) Drilling Contractor \_\_\_\_\_ License No. D115  
Street and Number \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_  
Drilling was commenced APRIL 25 1965  
Drilling was completed APRIL 24 1966

(Plat of 640 acres)

Elevation at top of casing in feet above sea level 3500 Total depth of well 76  
State whether well is shallow or artesian SHALLOW Depth to water upon completion 6

Section 2

PRINCIPAL WATER-BEARING STRATA

No.	Depth in Feet		Thickness in Feet	Description of Water-Bearing Formation
	From	To		
1	10	20	10	SAND AND GRAVEL
2	24	40	22	FINE SAND
3	37	67	10	SAND AND GRAVEL
4				
5				

Section 3

RECORD OF CASING

Dia in.	Pounds ft.	Threads in	Depth		Feet	Type Shoe	Perforations	
			Top	Bottom			From	To
14	20	welded	0	76	76	welded PLATE	52	76

Section 4

RECORD OF MUDDING AND CEMENTING

Depth in Feet		Diameter Hole in in.	Tons Clay	No. Sacks of Cement	Methods Used
From	To				

Section 5

PLUGGING RECORD

Name of Plugging Contractor \_\_\_\_\_ License No. \_\_\_\_\_  
Street and Number \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_  
Tons of Clay used \_\_\_\_\_ Tons of Roughage used \_\_\_\_\_ Type of roughage \_\_\_\_\_  
Plugging method used \_\_\_\_\_ Date Plugged \_\_\_\_\_  
Plugging approved by: \_\_\_\_\_ Cement Plugs were placed as follows:

Basin Supervisor

FOR USE OF STATE ENGINEER ONLY

Date Received APR 26 1966

File No. FS-31 Use John Location No. 626, 33, 331

No.	Depth of Plug		No. of Sacks Used
	From	To	

## LOG OF WELL

The undersigned hereby certifies that, to the best of his knowledge and belief, the foregoing is a true and correct record of the above described well.

B. E. Greenwood, Valley Drilling

682

ED MAIL

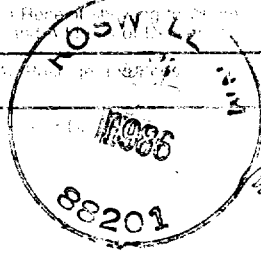
XIV,

ORP.

★ U.S.G.P.O. 1959-4

PS Form 3870, June 1965

No.	
SUNWEST CENTER	
Roswell, N.M. 88201	
Postage	22
Contract Fee	75
Special Delivery Fee	
Registered Delivery Fee	
Return Receipt showing Weight and Date Delivered	20
Postage and Fees (to be paid by addressee)	167
Total (to be paid by addressee)	





# H. E. PRINCE

Construction & Petroleum

BOX 129

ROSWELL, NEW MEXICO 88201 U.S.A.

622-7708



July 15, 1986

Re: Disposal Well  
NW $\frac{1}{4}$  of SE $\frac{1}{4}$   
Sec. 33, T6S, R26E  
Certified Number  
P 299 873 682

Yates Energy Corp.  
Sunwest Center  
Roswell, N.M. 88201

Dear Sir,

Enclosed is a copy of the application that has been submitted to the Oil Commission for salt water disposal.

I am no longer using the pit for disposal and instead will be injecting the produced water back into the same formation it is produced from.

The disposalable well is a well I drilled near the pit. It is drilled to 1071 feet and is cased from surface to 1019 feet and it is cement from 1019 feet back to surface.

I only produce 20 barrels of water per day and this well will handle this amount and more on gravity flow.

This well will make an excellent disposalable well because of it being located only 250 feet from the tank battery and it being cemented from 1019 to the surface and also handling the water on gravity flow.

Sincerely,

*H. E. Prince*  
H. E. Prince



Case 8984

## APPLICATION FOR AUTHORIZATION TO INJECT

- I. Purpose: ☐ Secondary Recovery ☐ Pressure Maintenance ☒ Disposal ☐ Storage  
Application qualifies for administrative approval? ☐ yes ☐ no

II. Operator: H.E. PRINCE  
Address: P.O. BOX 129 ROSWELL, N.M. 88201  
Contact party: H.E. PRINCE Phone: 622-7708

- III. Well data: Complete the data required on the reverse side of this form for each well proposed for injection. Additional sheets may be attached if necessary.

- IV. Is this an expansion of an existing project? ☐ yes ☒ no  
If yes, give the Division order number authorizing the project \_\_\_\_\_.

- V. Attach a map that identifies all wells and leases within two miles of any proposed injection well with a one-half mile radius circle drawn around each proposed injection well. This circle identifies the well's area of review.

- \* VI. Attach a tabulation of data on all wells of public record within the area of review which penetrate the proposed injection zone. Such data shall include a description of each well's type, construction, date drilled, location, depth, record of completion, and a schematic of any plugged well illustrating all plugging detail.

- VII. Attach data on the proposed operation, including:

1. Proposed average and maximum daily rate and volume of fluids to be injected;
2. Whether the system is open or closed;
3. Proposed average and maximum injection pressure;
4. Sources and an appropriate analysis of injection fluid and compatibility with the receiving formation if other than reinjected produced water; and
5. If injection is for disposal purposes into a zone not productive of oil or gas at or within one mile of the proposed well, attach a chemical analysis of the disposal zone formation water (may be measured or inferred from existing literature, studies, nearby wells, etc.).

- \* VIII. Attach appropriate geological data on the injection zone including appropriate lithologic detail, geological name, thickness, and depth. Give the geologic name, and depth to bottom of all underground sources of drinking water (aquifers containing waters with total dissolved solids concentrations of 10,000 mg/l or less) overlying the proposed injection zone as well as any such source known to be immediately underlying the injection interval.

- IX. Describe the proposed stimulation program, if any.

- \* X. Attach appropriate logging and test data on the well. (If well logs have been filed with the Division they need not be resubmitted.)

- \* XI. Attach a chemical analysis of fresh water from two or more fresh water wells (if available and producing) within one mile of any injection or disposal well showing location of wells and dates samples were taken.

- XII. Applicants for disposal wells must make an affirmative statement that they have examined available geologic and engineering data and find no evidence of open faults or any other hydrologic connection between the disposal zone and any underground source of drinking water.

- XIII. Applicants must complete the "Proof of Notice" section on the reverse side of this form.

- XIV. Certification

I hereby certify that the information submitted with this application is true and correct to the best of my knowledge and belief.

Name: H.E. PRINCE Title OPERATOR

Signature: H.E. Prince Date: 7/15/86

- \* If the information required under Sections VI, VIII, X, and XI above has been previously submitted, it need not be duplicated and resubmitted. Please show the date and circumstance of the earlier submittal.

## III. WELL DATA

A. The following well data must be submitted for each injection well covered by this application. The data must be both in tabular and schematic form and shall include:

- (1) Lease name; Well No.; location by Section, Township, and Range; and footage location within the section.
- (2) Each casing string used with its size, setting depth, sacks of cement used, hole size, top of cement, and how such top was determined.
- (3) A description of the tubing to be used including its size, lining material, and setting depth.
- (4) The name, model, and setting depth of the packer used or a description of any other seal system or assembly used.

Division District offices have supplies of Well Data Sheets which may be used or which may be used as models for this purpose. Applicants for several identical wells may submit a "typical data sheet" rather than submitting the data for each well.

B. The following must be submitted for each injection well covered by this application. All items must be addressed for the initial well. Responses for additional wells need be shown only when different. Information shown on schematics need not be repeated.

- (1) The name of the injection formation and, if applicable, the field or pool name.
- (2) The injection interval and whether it is perforated or open-hole.
- (3) State if the well was drilled for injection or, if not, the original purpose of the well.
- (4) Give the depths of any other perforated intervals and detail on the sacks of cement or bridge plugs used to seal off such perforations.
- (5) Give the depth to and name of the next higher and next lower oil or gas zone in the area of the well, if any.

## XIV. PROOF OF NOTICE

All applicants must furnish proof that a copy of the application has been furnished, by certified or registered mail, to the owner of the surface of the land on which the well is to be located and to each leasehold operator within one-half mile of the well location.

Where an application is subject to administrative approval, a proof of publication must be submitted. Such proof shall consist of a copy of the legal advertisement which was published in the county in which the well is located. The contents of such advertisement must include:

- (1) The name, address, phone number, and contact party for the applicant;
- (2) the intended purpose of the injection well with the exact location of single wells or the section, township, and range location of multiple wells;
- (3) the formation name and depth with expected maximum injection rates and pressures; and
- (4) a notation that interested parties must file objections or requests for hearing with the Oil Conservation Division, P. O. Box 2088, Santa Fe, New Mexico 87501 within 15 days.

NO ACTION WILL BE TAKEN ON THE APPLICATION UNTIL PROPER PROOF OF NOTICE HAS BEEN SUBMITTED.

---

NOTICE: Surface owners or offset operators must file any objections or requests for hearing of administrative applications within 15 days from the date this application was mailed to them.

73 681

ERTIFIED MAIL

XIV.

★ U.S.G.P.O. 1965 78c

PS Form 3820, June 1957

TOM COOPER	
SUITE 410, FIRST NATIONAL Tower	
LAS CRUCES, N.M. 88001	
22	75
70	167
1986	
88201	



# H. E. PRINCE

Construction & Petroleum

BOX 129

ROSWELL, NEW MEXICO 88201 U.S.A.

622-7708



July 15, 1986

Mr. Tom Cooper  
Suite 410 First Nation Towers  
Las Cruces, New Mexico, 88001

Re: Disposal Well  
NW $\frac{1}{4}$  of SE $\frac{1}{4}$   
Sec. 33, T6S, R26E  
Certified Number  
P 299 873 681

Dear Mr. Tom Cooper,

Enclosed is a copy of the application that has been submitted to the Oil Commission for salt water disposal.

I am no longer using the pit for disposal and instead will be injecting the produced water back into the same formation it is produced from.

The disposalable well is a well I drilled near the pit. It is drilled to 1071 feet and is cased from surface to 1019 feet and it is cement from 1019 feet back to surface.

I only produce 20 barrels of water per day and this well will handle this amount and more on gravity flow.

This well will make an excellent disposalable well because of it being located only 250 feet from the tank battery and it being cemented from 1019 to the surface and also handling the water on gravity flow.

Sincerely,

*H. E. Prince*  
H. E. Prince

## APPLICATION FOR AUTHORIZATION TO INJECT

- I. Purpose: ☐ Secondary Recovery ☐ Pressure Maintenance ☒ Disposal ☐ Storage  
Application qualifies for administrative approval? ☐ yes ☐ no

II. Operator: H.E. PRINCE  
Address: P.O. Box 129 Roswell, N.M. 88201  
Contact party: H.E. PRINCE Phone: 622-7708

III. Well data: Complete the data required on the reverse side of this form for each well proposed for injection. Additional sheets may be attached if necessary.

IV. Is this an expansion of an existing project? ☐ yes ☒ no  
If yes, give the Division order number authorizing the project \_\_\_\_\_.

V. Attach a map that identifies all wells and leases within two miles of any proposed injection well with a one-half mile radius circle drawn around each proposed injection well. This circle identifies the well's area of review.

\* VI. Attach a tabulation of data on all wells of public record within the area of review which penetrate the proposed injection zone. Such data shall include a description of each well's type, construction, date drilled, location, depth, record of completion, and a schematic of any plugged well illustrating all plugging detail.

VII. Attach data on the proposed operation, including:

1. Proposed average and maximum daily rate and volume of fluids to be injected;
2. Whether the system is open or closed;
3. Proposed average and maximum injection pressure;
4. Sources and an appropriate analysis of injection fluid and compatibility with the receiving formation if other than reinjected produced water; and
5. If injection is for disposal purposes into a zone not productive of oil or gas at or within one mile of the proposed well, attach a chemical analysis of the disposal zone formation water (may be measured or inferred from existing literature, studies, nearby wells, etc.).

\* VIII. Attach appropriate geological data on the injection zone including appropriate lithologic detail, geological name, thickness, and depth. Give the geologic name, and depth to bottom of all underground sources of drinking water (aquifers containing waters with total dissolved solids concentrations of 10,000 mg/l or less) overlying the proposed injection zone as well as any such source known to be immediately underlying the injection interval.

IX. Describe the proposed stimulation program, if any.

\* X. Attach appropriate logging and test data on the well. (If well logs have been filed with the Division they need not be resubmitted.)

\* XI. Attach a chemical analysis of fresh water from two or more fresh water wells (if available and producing) within one mile of any injection or disposal well showing location of wells and dates samples were taken.

XII. Applicants for disposal wells must make an affirmative statement that they have examined available geologic and engineering data and find no evidence of open faults or any other hydrologic connection between the disposal zone and any underground source of drinking water.

XIII. Applicants must complete the "Proof of Notice" section on the reverse side of this form.

XIV. Certification

I hereby certify that the information submitted with this application is true and correct to the best of my knowledge and belief.

Name: H.E. PRINCE Title: OPERATOR

Signature: H.E. Prince Date: 7/15/86

\* If the information required under Sections VI, VIII, X, and XI above has been previously submitted, it need not be duplicated and resubmitted. Please show the date and circumstance of the earlier submittal.

## III. WELL DATA

A. The following well data must be submitted for each injection well covered by this application. The data must be both in tabular and schematic form and shall include:

- (1) lease name; Well No.; location by Section, Township, and Range; and footage location within the section.
- (2) Each casing string used with its size, setting depth, sacks of cement used, hole size, top of cement, and how such top was determined.
- (3) A description of the tubing to be used including its size, lining material, and setting depth.
- (4) The name, model, and setting depth of the packer used or a description of any other seal system or assembly used.

Division District offices have supplies of Well Data Sheets which may be used or which may be used as models for this purpose. Applicants for several identical wells may submit a "typical data sheet" rather than submitting the data for each well.

B. The following must be submitted for each injection well covered by this application. All items must be addressed for the initial well. Responses for additional wells need be shown only when different. Information shown on schematics need not be repeated.

- (1) The name of the injection formation and, if applicable, the field or pool name.
- (2) The injection interval and whether it is perforated or open-hole.
- (3) State if the well was drilled for injection or, if not, the original purpose of the well.
- (4) Give the depths of any other perforated intervals and detail on the sacks of cement or bridge plugs used to seal off such perforations.
- (5) Give the depth to and name of the next higher and next lower oil or gas zone in the area of the well, if any.

## XIV. PROOF OF NOTICE

All applicants must furnish proof that a copy of the application has been furnished, by certified or registered mail, to the owner of the surface of the land on which the well is to be located and to each leasehold operator within one-half mile of the well location.

Where an application is subject to administrative approval, a proof of publication must be submitted. Such proof shall consist of a copy of the legal advertisement which was published in the county in which the well is located. The contents of such advertisement must include:

- (1) The name, address, phone number, and contact party for the applicant;
- (2) the intended purpose of the injection well; with the exact location of single wells or the section, township, and range location of multiple wells;
- (3) the formation name and depth with expected maximum injection rates and pressures; and
- (4) a notation that interested parties must file objections or requests for hearing with the Oil Conservation Division, P. O. Box 2088, Santa Fe, New Mexico 87501 within 15 days.

NO ACTION WILL BE TAKEN ON THE APPLICATION UNTIL PROPER PROOF OF NOTICE HAS BEEN SUBMITTED.

---

NOTICE: Surface owners or offset operators must file any objections or requests for hearing of administrative applications within 15 days from the date this application was mailed to them.

680

XIV

4150 1344

AY

BOX 9128

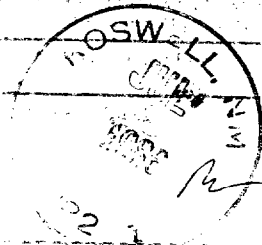
NIDLAND, TEXAS 79708

22

75

70

167





# H. E. PRINCE

Construction & Petroleum

BOX 129

ROSWELL, NEW MEXICO 88201 U.S.A.

622-7708



July 15, 1986

Mr. W. H. Brady  
P.O. Box 9128  
Midland, Texas 79708

Re: Disposal Well  
NW $\frac{1}{4}$  of SE $\frac{1}{4}$   
Sec. 33, T6S, R26E  
Certified Number  
P 299 873 680

Dear Mr. Brady,

Enclosed is a copy of the application that has been submitted to the Oil Commission for salt water disposal.

I am no longer using the pit for disposal and instead will be injecting the produced water back into the same formation it is produced from.

The disposalable well is a well I drilled near the pit. It is drilled to 1071 feet and is cased from surface to 1019 feet and it is cement from 1019 feet back to surface.

I only produce 20 barrels of water per day and this well will handle this amount and more on gravity flow.

This well will make an excellent disposalable well because of it being located only 250 feet from the tank battery and it being cemented from 1019 to the surface and also handling the water on gravity flow.

Sincerely,

H. E. Prince



Case 8984

## APPLICATION FOR AUTHORIZATION TO INJECT

- I. Purpose: ☐ Secondary Recovery ☐ Pressure Maintenance ☒ Disposal ☐ Storage  
Application qualifies for administrative approval? ☐ yes ☐ no

II. Operator: H.E. PRINCE

Address: P.O. BOX 129 ROSWELL, N.M. 88201

Contact party: H.E. PRINCE Phone: 622-7208

III. Well data: Complete the data required on the reverse side of this form for each well proposed for injection. Additional sheets may be attached if necessary.

IV. Is this an expansion of an existing project? ☐ yes ☒ no  
If yes, give the Division order number authorizing the project \_\_\_\_\_

V. Attach a map that identifies all wells and leases within two miles of any proposed injection well with a one-half mile radius circle drawn around each proposed injection well. This circle identifies the well's area of review.

VI. Attach a tabulation of data on all wells of public record within the area of review which penetrate the proposed injection zone. Such data shall include a description of each well's type, construction, date drilled, location, depth, record of completion, and a schematic of any plugged well illustrating all plugging detail.

VII. Attach data on the proposed operation, including:

1. Proposed average and maximum daily rate and volume of fluids to be injected;
2. Whether the system is open or closed;
3. Proposed average and maximum injection pressure;
4. Sources and an appropriate analysis of injection fluid and compatibility with the receiving formation if other than reinjected produced water; and
5. If injection is for disposal purposes into a zone not productive of oil or gas at or within one mile of the proposed well, attach a chemical analysis of the disposal zone formation water (may be measured or inferred from existing literature, studies, nearby wells, etc.).

VIII. Attach appropriate geological data on the injection zone including appropriate lithologic detail, geological name, thickness, and depth. Give the geologic name, and depth to bottom of all underground sources of drinking water (aquifers containing waters with total dissolved solids concentrations of 10,000 mg/l or less) overlying the proposed injection zone as well as any such source known to be immediately underlying the injection interval.

IX. Describe the proposed stimulation program, if any.

X. Attach appropriate logging and test data on the well. (If well logs have been filed with the Division they need not be resubmitted.)

XI. Attach a chemical analysis of fresh water from two or more fresh water wells (if available and producing) within one mile of any injection or disposal well showing location of wells and dates samples were taken.

XII. Applicants for disposal wells must make an affirmative statement that they have examined available geologic and engineering data and find no evidence of open faults or any other hydrologic connection between the disposal zone and any underground source of drinking water.

XIII. Applicants must complete the "Proof of Notice" section on the reverse side of this form.

XIV. Certification

I hereby certify that the information submitted with this application is true and correct to the best of my knowledge and belief.

Name: H.E. PRINCE

Title: OPERATOR

Signature: H.E. Prince

Date: 7/15/86

\* If the information required under Sections VI, VIII, X, and XI above has been previously submitted, it need not be duplicated and resubmitted. Please show the date and circumstance of the earlier submittal.

# III. WELL DATA

A. The following well data must be submitted for each injection well covered by this application. The data must be both in tabular and schematic form and shall include:

- (1) Lease name; Well No.; location by Section, Township, and Range; and footage location within the section.

- (2) Each casing string used with its size, setting depth, sacks of cement used, hole size, top of cement, and how such top was determined.

- (3) A description of the tubing to be used including its size, lining material, and setting depth.

- (4) The name, model, and setting depth of the packer used or a description of any other seal system or assembly used.

Division District offices have supplies of Well Data Sheets which may be used or which may be used as models for this purpose. Applicants for several identical wells may submit a "typical data sheet" rather than submitting the data for each well.

B. The following must be submitted for each injection well covered by this application. All items must be addressed for the initial well. Responses for additional wells need be shown only when different. Information shown on schematics need not be repeated.

- (1) The name of the injection formation and, if applicable, the field or pool name.

- (2) The injection interval and whether it is perforated or open-hole.

- (3) State if the well was drilled for injection or, if not, the original purpose of the well.

- (4) Give the depths of any other perforated intervals and detail on the sacks of cement or bridge plugs used to seal off such perforations.

- (5) Give the depth to and name of the next higher and next lower oil or gas zone in the area of the well, if any.

## XIV. PROOF OF NOTICE

All applicants must furnish proof that a copy of the application has been furnished, by certified or registered mail, to the owner of the surface of the land on which the well is to be located and to each leasehold operator within one-half mile of the well location. Where an application is subject to administrative approval, a proof of publication must be submitted. Such proof shall consist of a copy of the legal advertisement which was published in the county in which the well is located. The contents of such advertisement must include:

- (1) The name, address, phone number, and contact party for the applicant;

- (2) the intended purpose of the injection well; with the exact location of single wells or the section, township, and range location of multiple wells;

- (3) the formation name and depth with expected maximum injection rates and pressures; and

- (4) a notation that interested parties must file objections or requests for hearing with the Oil Conservation Division, P. O. Box 2088, Santa Fe, New Mexico 87501 within 15 days.

NO ACTION WILL BE TAKEN ON THE APPLICATION UNTIL PROPER PROOF OF NOTICE HAS BEEN SUBMITTED.

NOTICE: Surface owners or offset operators must file any objections or requests for hearing of administrative applications within 15 days from the date this application was mailed to them.

