Form 9-331
(May 1963)

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE* (Other instructions 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 [X] GAS WELL [ ] OTHER

Nov 3 11 44 AM '65

2. NAME OF OPERATOR
SOUTHERN NEW MEXICO OIL CORPORATION

3. ADDRESS OF OPERATOR
Box 1659, Midland, Texas

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.)
At surface
Unit Letter I, 990' from East Line, 1650' from South Line of Section 29.

5. LEASE DESIGNATION AND SERIAL NO.
LC - 063586

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
So. Cal. Fed. Federal

9. WELL NO.
4

10. FIELD AND POOL, OR WILDCAT
Lusk Strawn

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
NE/4 of SE/4 of Sec. 29
T-19-S, R-32-E

12. COUNTY OR PARISH
Lea

13. STATE
New Mexico

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
3552 GR

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

NOTICE OF INTENTION TO:				SUBSEQUENT REPORT OF:			
TEST WATER SHUT-OFF	[ ]	PULL OR ALTER CASING	[ ]	WATER SHUT-OFF	[ ]	REPAIRING WELL	[ ]
FRACTURE TREAT	[ ]	MULTIPLE COMPLETE	[ ]	FRACTURE TREATMENT	[ ]	ALTERING CASING	[ ]
SHOOT OR ACIDIZE	[ ]	ABANDON*	[ ]	SHOOTING OR ACIDIZING	[X]	ABANDONMENT*	[ ]
REPAIR WELL	[ ]	CHANGE PLANS	[ ]				
(Other)				(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.) *

10-7-65 Acidized perforations 11,322' to 11,366 with 10,000 gallons 15% Reactrol and 5,000 gallons low tension acid.

On test 10-27-65 Well produced 393 bbls. of oil at GOR of 3463 cu. ft. per bbl.

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

SIGNED O. H. Crews TITLE Agent DATE Nov. 2, 1965

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

Instructions

General: This form is designed for submitting proposals to perform certain well operations, and reports of such operations when completed, as indicated, on Federal and Indian lands pursuant to applicable Federal law and regulations, and, if approved or accepted by any State, on all lands in such State, pursuant to applicable State law 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.

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 17: Proposals to abandon a well and subsequent reports of abandonment should include such special information as is required by local Federal and/or State offices. In addition, such proposals and reports should include reasons for the abandonment; data on any former or present productive zones, or other zones with present significant fluid contents not sealed off by cement or otherwise; depths (top and bottom) and method of placement of cement plugs; mud or other material placed below, between and above plugs; amount, size, method of parting of any casing, liner or tubing pulled and the depth to top of any left in the hole; method of closing top of well; and date well site conditioned for final inspection looking to approval of the abandonment.

U.S. GOVERNMENT PRINTING OFFICE: 1963—O-685229

867-851

Form 9-331
(May 1963)

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE* (Other instructions reverse side)

HOBBS OFFICE O. C. C.
MAY 5 10 '64

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.)

5. LEASE DESIGNATION AND SERIAL NO.: LC - 063586

6. IF INDIAN, ALLOTTEE OR TRIBE NAME:

7. UNIT AGREEMENT NAME:

1. OIL WELL ☐ GAS WELL ☒ OTHER: Drilling

2. NAME OF OPERATOR: Southern New Mexico Oil Corp.

8. FARM OR LEASE NAME: So. Calif. Pet. Fed.

3. ADDRESS OF OPERATOR: P. O. Box 1659, Midland, Texas

9. WELL NO.: 4

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface: 990' from East line & 1650' from South Line of Sec. 29

10. FIELD AND POOL, OR WILDCAT: Lusk Strawn

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA: NE/4 of SE/4 of Sec. 29 19-S 32-E

14. PERMIT NO.:

15. ELEVATIONS (Show whether DF, RT, GR, etc.): 3552' GR

12. COUNTY OR PARISH: Lea

13. STATE: New Mexico

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

NOTICE OF INTENTION TO:				SUBSEQUENT REPORT OF:			
TEST WATER SHUT-OFF	☐	PULL OR ALTER CASING	☐	WATER SHUT-OFF	☒	REPAIRING WELL	☐
FRACTURE TREAT	☐	MULTIPLE COMPLETE	☐	FRACTURE TREATMENT	☐	ALTERING CASING	☐
SHOOT OR ACIDIZE	☐	ABANDON*	☐	SHOOTING OR ACIDIZING	☐	ABANDONMENT*	☐
REPAIR WELL	☐	CHANGE PLANS	☐	(Other)			☐
(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.) *

On April 21, 11,433' of 4 1/2" N-80, J-55, 13.5# & 11.5# new casing was cemented at 11,446' with 600 sacks of regular cement plus 200 cu. ft. stratacrete plus 4% gel. Plug was down at 1:00 PM. After 24 hrs. a pressure of 1500 psi was applied at the surface for 30 min. There was no pressure drop. The well will be logged, perforated and properly tested.

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

SIGNED O.H. Crews TITLE Agent DATE 4/23/64

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

Instructions

General: This form is designed for submitting proposals to perform certain well operations, and reports of such operations when completed, as indicated, on Federal and Indian lands pursuant to applicable Federal law and regulations, and, if approved or accepted by any State, on all lands in such State, pursuant to applicable State law 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.

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 17: Proposals to abandon a well and subsequent reports of abandonment should include such special information as is required by local Federal and/or State offices. In addition, such proposals and reports should include reasons for the abandonment; data on any former or present productive zones, or other zones with present significant fluid contents not sealed off by cement or otherwise; depths (top and bottom) and method of placement of cement plugs; mud or other material placed below, between and above plugs; amount, size, method of parting of any casing, liner or tubing pulled and the depth to top of any left in the hole; method of closing top of well; and date well site conditioned for final inspection looking to approval of the abandonment.

U.S. GOVERNMENT PRINTING OFFICE: 1963—O-685229

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

NEW MEXICO OIL CONSERVATION COMMISSION

Santa Fe, New Mexico

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

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

HOBBS OFFICE O. C. C.

MAY 11 7 56 AM '64

New Well / Recompletion

This form shall be submitted 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.

Midland, Texas (Place) May 8, 1964 (Date)

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

So. N.M. Oil Corp. (Company or Operator) So. Calif. Pet. Federal (Lease), Well No. 4, in NE ¼ SE ¼,

I (Unit Letter), Sec. 29, T. 19-S, R. 32-E, NMPM., Lusk Strawn Pool

Lea County. Date Spudded March 8, 1964 Date Drilling Completed 4/19/64

Please indicate location:

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

(FOOTAGE)

Elevation 3552 GR. Total Depth 11446 PBTD 11410

Top Oil/Gas Pay 11322 Name of Prod. Form. Strawn

PRODUCING INTERVAL -

Perforations 11322-11336

Open Hole ____ Depth Casing Shoe 11446' Depth Tubing 11340'

OIL WELL TEST - May 8, 1964

Natural Prod. Test: ____ bbls.oil, ____ bbls water in ____ hrs, ____ min. Choke Size ____

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): 114.67 bbls.oil, 0 bbls water in 6 hrs, 0 min. Choke Size 14/64

GAS WELL TEST -

Natural Prod. Test: ____ 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 mud acid plus 5000 gal regular acid.

Casing Press. 1190 Tubing Press. 1050 Date first new oil run to tanks May 8, 1964

Oil Transporter The Permian Corp.

Gas Transporter Phillips Petroleum Co.

Tubing, Casing and Cementing Record

Size	Feet	Sax
13 3/8	858	775
8 5/8	3820	2600
4 1/2	11433	800

Remarks: Well produces through two stage gas separation.

G.O.R. 1338 to 1 Gravity 46

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

Approved MAY 11 1964, 19....

OIL CONSERVATION COMMISSION

By: [signature] Engineer District II

Title ____

Southern New Mexico Oil Corporation (Company or Operator)

By: [signature] O.H. Crews (Signature)

Title Agent

Send Communications regarding well to:

Name Southern New Mexico Oil Corporation

Address Box 1659, Midland, Texas

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

NEW MEXICO OIL CONSERVATION COMMISSION
SANTA FE, NEW MEXICO

CERTIFICATE OF COMPLIANCE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

HOBBS OFFICE O. C. C.
MAY 11 7 55 AM '64

FORM C-110
(Rev. 7-60)

FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE

Company or Operator	Lease	Well No.
Southern New Mexico Oil Corporation	So. Calif. Com. Fed.	4

Unit Letter	Section	Township	Range	County
I	29	19-S	32-E	Lea

Pool	Kind of Lease (State, Fed, Fee)
Lusk Strawn	Federal

If well produces oil or condensate give location of tanks	Unit Letter	Section	Township	Range
ACT	F	29	19-S	32-E

Authorized transporter of oil [X] or condensate [ ]	Address (give address to which approved copy of this form is to be sent)
The Permian Corp.	Box 3119, Midland, Texas

Is Gas Actually Connected? Yes X No ____

Authorized transporter of casing head gas [X] or dry gas [ ]	Date Connected	Address (give address to which approved copy of this form is to be sent)
Phillips Petroleum Co.	5-4-64	Phillips Bldg., Odessa, Texas

If gas is not being sold, give reasons and also explain its present disposition:

REASON(S) FOR FILING (please check proper box)

New Well . . . . . [X]
Change in Transporter (check one)
Oil . . . . . [ ] Dry Gas . . . . [ ]
Casing head gas . [ ] Condensate . . [ ]
Change in Ownership . . . . . [ ]
Other (explain below)

Remarks

The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.

Executed this the 8 day of May, 19 64.

OIL CONSERVATION COMMISSION	By
Approved by	O.H. Crews
Title	Title: Agent
Date: MAY 11 1964	Company: Southern New Mexico Oil Corporation
	Address: Box 1659, Midland, Texas