

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPI
(Other instructions
verse side)

TE*
re-

Form approved.
Budget Bureau No. 42-R1424.
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 13. STATE

Lea

New Mexico

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

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.

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:

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 perti-
nent 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

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

*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.

NOV 3 11 44 AM '62

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

HOBBY SUBMIT IN TRIPL
verse side) CE O.C.L.

Form approved.
Budget Bureau No. 42-R1424.

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. Calif. Pet. Fed.

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Lusk Strawn

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SURVEY OR AREA

NE 1/4 of SE 1/4 of Sec. 29
19-S 32-E

12. COUNTY OR PARISH

Lee

13. STATE

New Mexico

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.)

OIL
WELL

☐

GAS
WELL

☒

OTHER

Drilling

2. NAME OF OPERATOR

Southern New Mexico Oil Corp.

3. ADDRESS OF OPERATOR

P. O. Box 1639, Midland, Texas

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 & 1630' from South
Line of Sec. 29

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:

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

☒
☐
☐

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.)*

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. Greve

O.H. Greve

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.

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HOURS OF COP. RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL GAS
PRODUCTION 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.

New Well
Recompletion

MAY 11 7 56 AM '64

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 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.

Midland, Texas

May 8, 1964

(Place)

(Date)

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

So. N.M. Oil Corp.

So. Calif. Pet. Federal

Well No. 4

NE

SE

1/4

(Company or Operator)

(Lease)

I

Sec. 29

T 19-S

R 32-E

NMPM.

Lusk Strawn

Pool

Lea

Please indicate location:

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

County. Date Spudded March 8, 1964

Date Drilling Completed

4/19/64

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

11446'

Depth

11340'

OIL WELL TEST - May 8, 1964

Natural Prod. Test: _____ 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): 114.67 bbls. oil, 0 bbls water in 6 hrs, 0 min. 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 1190

Tubing 1050

Date first new

May 8, 1964

Oil Transporter

The Permian Corp.

Gas Transporter

Phillips Petroleum Co.

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: _____, 19____

Southern New Mexico Oil Corporation

(Company or Operator)

OIL CONSERVATION COMMISSION

By: _____

O.H. Crews

(Signature)

Title

Agent

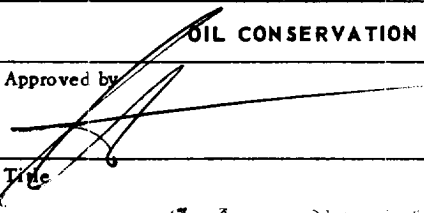
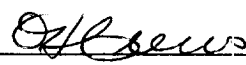
Send Communications regarding well to:

Name Southern New Mexico Oil Corporation

Address Box 1659, Midland, Texas

By: _____
Engineer: _____

Title _____

NUMBER OF COPIES RECEIVED		NEW MEXICO OIL CONSERVATION COM. SION				FORM C-110			
DISTRIBUTION		SANTA FE, NEW MEXICO				(Rev. 7-60)			
SANTA FE		CERTIFICATE OF COMPLIANCE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS HOBBS OFFICE O.C.C. MAY 11 7 55 AM '64							
FILE									
U.S.G.S.									
LAND OFFICE									
TRANSPORTER									
OPERATION OFFICE		FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE							
OPERATOR		Company or Operator				Lease		Well No.	
		Southern New Mexico Oil Corporation				So. Calif. Sub. 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				Unit Letter		Section		Township	
give location of tanks				F		29		19-S	
ACT								Range	
								32-E	
Authorized transporter of oil ☒ 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 ☒ No ☐									
Authorized transporter of casing head gas ☒ 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 ☒ Change in Ownership ☐									
Change in Transporter (check one) Other (explain below)									
Oil ☐ Dry Gas ☐									
Casing head gas ☐ Condensate ☐									
Remarks									
The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.									
Executed this the <u>8</u> day of <u>May</u>, 19 <u>64</u>.									
Approved by					By				
									
Title					Title				
Engineer					Agent				
Company					Company				
Southern New Mexico Oil Corporation					Southern New Mexico Oil Corporation				
Date					Address				
MAY 11 1964					Box 1659, Midland, Texas				