

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103  
Supersedes Old  
C-102 and C-103  
Effective 1-1-65

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 RE-DRILL OR TO PLUG BACK TO A DIFFERENT RESERVOIR. USE APPLICATION FOR PERMIT - FORM C-1011 FOR SUCH PROPOSALS.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name
2. Name of Operator W. K. Byrom	8. Firm or Lease Name J. W. Cooper F
3. Address of Operator Box 147 - Hobbs, N. M. 88240	9. Well No. 1 2
4. Location of Well UNIT LETTER <u>D</u> . . . <u>330</u> FEET FROM THE <u>West</u> LINE AND <u>330</u> FEET FROM THE <u>North</u> LINE, SECTION <u>3</u> TOWNSHIP <u>20S</u> RANGE <u>37E</u> N.M.P.M.	10. Field and Pool, or Wildcat Eumont
15. Elevation (Show whether DF, RT, GR, etc.) 3557 Gr.	12. County Lea

16. 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"/>	REMEDIAL WORK <input checked="" type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>
OTHER <input type="checkbox"/>	OTHER <u>gone abandonment</u>
	<u>Eumont - Monument</u>

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any prop work) SEE RULE 1103.

7-30-79: Pull tbg and plugged the Grayburg section off. Ran tbg. to 3590 and started swabbing well to tank battery. Well started gasing, turned down El Paso line.

Well would not buck 45# psi line. Pressure. Installed rotary compressor. Well is delerving about 40 msf per day.

\*Well was plugged by running CIBP to 3595.

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

SIGNED [Signature] TITLE Geologist DATE 8-28-79

APPROVED BY Jerry Sexton TITLE Dist 1, Supv. DATE SEP 4 1979

CONDITIONS OF APPROVAL, IF ANY

M

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

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

**HOBBS OFFICE O. C. C.**  
 NOV 7 3 01 PM '63  
 New Mexico  
 Recompletion

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

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.

Hobbs, N. M.  
 (Place)

November 6, 1963  
 (Date)

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

W. K. Byron Cooper F, Well No. 2, in NW  $\frac{1}{4}$  NW  $\frac{1}{4}$ ,  
 (Company or Operator) (Lease)

D Sec 3, T 20S, R 37E, NMPM., Emont Pool  
 Unit Letter

Lea County. Date Spudded 9-6-63 Date Drilling Completed 10-2-63

Please indicate location:

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

Elevation 3552 Total Depth 3890 PBD

Top Oil/Gas Pay 3520 Name of Prod. Form. Queen

PRODUCING INTERVAL -

Perforations 3521-27. 3538-44. 3576-82. 3586-92.

Open Hole 3680-3890 Depth 3680 Casing Shoe 3680 Depth 3860 Tubing

OIL WELL TEST -

Natural Prod. Test no test 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 Choke load oil used): \_\_\_\_\_ bbls. oil, \_\_\_\_\_ bbls water in \_\_\_\_\_ hrs, \_\_\_\_\_ min. Size \_\_\_\_\_

GAS WELL TEST -

Natural Prod. Test no test MCF/Day; Hours flowed \_\_\_\_\_ Choke Size \_\_\_\_\_

(FOOTAGE)  
 Tubing, Casing and Cementing Record

Size	Feet	Sax
10"	200	150
7"	3680	600
2-7/8"	3600	

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

Test After Acid or Fracture Treatment: 795 MCF/Day; Hours flowed 24

Choke Size 3/4 Method of Testing: Back pressure

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): 12,000 lbs sand. 12,000 gals. oil

Casing Press. 1000 Tubing Press. 4200 Date first new oil run to tanks 9-8-63

Oil Transporter Shell Pipe Line Corporation

Gas Transporter No connection

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

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

Approved: \_\_\_\_\_, 19\_\_\_\_

W. K. Byron  
 (Company or Operator)

OIL CONSERVATION COMMISSION

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

By: Leon C. Thompson  
 (Signature)

Title Prod. Foreman  
 Send Communications regarding well to:  
 Name W. K. Byron

Box 147 - Hobbs, N. M.