

State of New Mexico
Energy, Minerals &
Natural & Resources Dept.

Oil Conservation Division
P.O. Box 2088
Santa Fe, New Mexico 87501

Gas
Supplement
No.: SE 6352
Date: 6/28/91

NOTICE OF ASSIGNMENT OF ALLOWABLE TO A GAS WELL

The operator of the following well has complied with all the requirements of the Oil Conservation Division and the well is hereby assigned an allowable as shown below.

#80 #59
Date of Connection 1/31/91 & 1/3/91 Date of First Allowable or Allowable Change 6/28/91
Purchaser X-Cel Gas Co. Pool Jalmat
Operator Hal J. Rasmussen Operating Inc. Lease State A A/c-1
Well No. *#80 & #59 Unit Letter G & E Sec. 15 Twn. 23 S Rge. 36 E
Dedicated Acreage *48 Revised Acreage Difference
Acreage Factor *3.00 Revised Acreage Factor Difference
Deliverability Revised Deliverability Difference
A x D Factor Revised A x D Factor Difference

* #80-G & #59-E are new wells
they share established 480-ac PU
w/#31-H, #33-F, #82-B 15-23-36
& #28-F & #102-D 14-23-36

OCD Dist. No. I

CALCULATION OF SUPPLEMENTAL ALLOWABLE

Previous Status Adjustments.....

MO.	PREV. ALLOW.	REV. ALLOW.	PREV. PRCD.	REV. PROD.	REMARKS
Apr					
May					
Jun					
Jul					
Aug					
Sep					
Oct					
Nov					
Dec					
Jan					
Feb					
Mar					
Apr					
May					
Jun					
Jul					
Aug					
Sep					
Oct					
Nov					
Dec					
Jan					
Feb					
Mar					

TOTALS

Allowable Production Difference.....

Schedule O/U Status.....

Revised O/U Status.....

Effective In Schedule
Current Classification To

Note: All gas volumes are in MCF@15.025 psia.

William J. LeMay, Division Director

By _____

Submit to Appropriate
District Office
State Lease - 6 copies
Fee Lease - 5 copies
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

Form C-105
Revised 1-1-89

WELL API NO.

30 025 10724

5. Indicate Type of Lease

STATE ☒

FEE ☐

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name

State "A" A/C 1

8. Well No.

80

9. Pool name or Wildcat

Jalmat Tns1-Yts-7R

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

1a. Type of Well:

OIL WELL ☐

GAS WELL ☒

DRY ☐

OTHER ☐

b. Type of Completion:

NEW WELL ☐

WORK OVER ☒

DEEPEN ☐

PLUG BACK ☒

DIFF RESVR ☐

OTHER ☐

2. Name of Operator

Hal J. Rasmussen Operating, Inc.

3. Address of Operator

Six Desta Drive, Suite 2700, Midland, Texas 79705

4. Well Location

Unit Letter G: 1980 Feet From The North Line and 1980 Feet From The East Line

Section 15 Township 23 S Range 36 E NMPM Lea County

10. Date Spudded

1-12-60

11. Date T.D. Reached

1-21-60

12. Date Compl. (Ready to Prod.)

2/15/90

13. Elevations (DF& RKB, RT, GR, etc.)

14. Elev. Casinghead

15. Total Depth

3625' DIF

16. Plug Back T.D.

3524

17. If Multiple Compl. How Many Zones?

18. Intervals Drilled By

Rotary Tools

Cable Tools

19. Producing Interval(s), of this completion - Top, Bottom, Name

2891-2957 Tansill

20. Was Directional Survey Made

21. Type Electric and Other Logs Run

22. Was Well Cored

CASING RECORD (Report all strings set in well)

CASING SIZE	WEIGHT LB/FT.	DEPTH SET	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
9 5/8	32	336		300 sx	
7	20	3572		250 sx	

24. LINER RECORD

SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN	25. TUBING RECORD	SIZE	DEPTH SET	PACKER SET
						2 7/8	2992	

26. Perforation record (interval, size, and number)

2891, 93, 2909, 10, 16, 19, 32, 34, 50, 57

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

DEPTH INTERVAL

AMOUNT AND KIND MATERIAL USED

2891-2957

Acidize w/ 200 gal 15%

NEFe

28. PRODUCTION

Date First Production

2/15/90

Production Method (Flowing, gas lift, pumping - Size and type pump)

Pump

Well Status (Prod. or Shut-in)

Production

Date of Test	Hours Tested	Choke Size	Prod'n For Test Period	Oil - Bbl	Gas - MCF	Water - Bbl	Gas - Oil Ratio
3/17/90	24			0	17	0	0
Flow Tubing Press.	Casing Pressure	Calculated 24-Hour Rate	Oil - Bbl	Gas - MCF	Water - Bbl	Oil Gravity - API - (Corr.)	
			0	17	0		

29. Disposition of Gas (Sold, used for fuel, vented, etc.)

Sold

Test Witnessed By

30. List Attachments

31. I hereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief

Signature

Printed Name

Jay Chereki

3A
Lung
matter

Submit to Appropriate
District Office
State Lease - 4 copies
Fee Lease - 3 copies

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-102
Revised 1-1-89

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

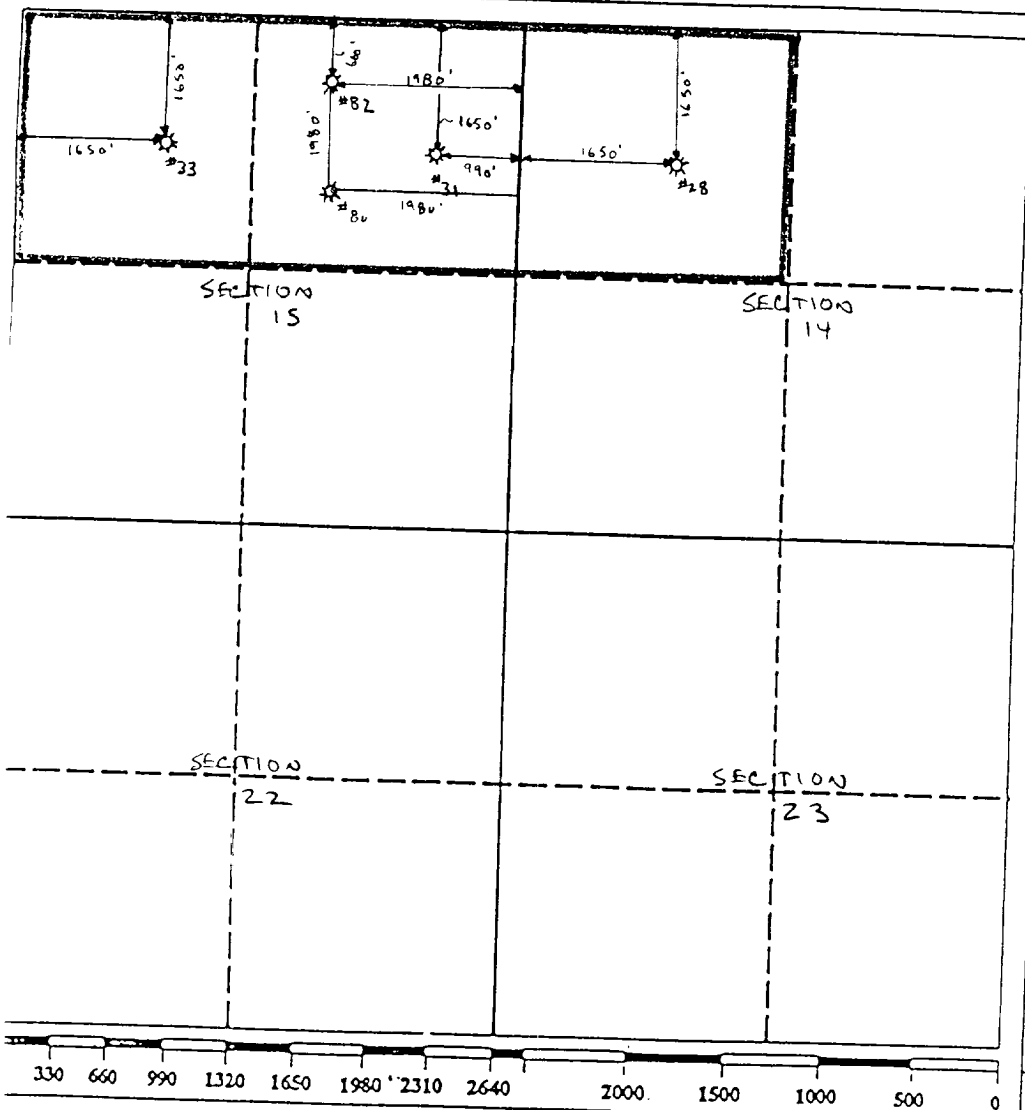
DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

WELL LOCATION AND ACREAGE DEDICATION PLAT

All Distances must be from the outer boundaries of the section

Operator Hal J. Rasmussen Operating, Inc.			Lease State A A/C 1		Well No. 80
Unit Letter G	Section 15	Township 23 S	Range 36E	County Lea	
Actual Footage Location of Well: 1980 feet from the NORTH line and 1980 feet from the EAST line					
Ground level Elev. TANILL-YATES		Pool Jalmat-TNSL-YTS-7R		Dedicated Acreage: 480 Acres	

- Outline the acreage dedicated to the subject well by colored pencil or hatchure marks on the plat below.
- If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).
- If more than one lease of different ownership is dedicated to the well, have the interest of all owners been consolidated by communitization, unitization, force-pooling, etc?
☐ Yes ☐ No If answer is "yes" type of consolidation _____
If answer is "no" list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if necessary).
No allowable will be assigned to the well until all interests have been consolidated (by communitization, unitization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interest, has been approved by the Division.



OPERATOR CERTIFICATION

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

Signature

Printed Name

Jay D. Cherski

Position

Agent

Company

Hal J. Rasmussen Operating, Inc.

Date

SURVEYOR CERTIFICATION

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my knowledge and belief.

Date Surveyed

Signature & Seal of
Professional Surveyor

Certificate No.