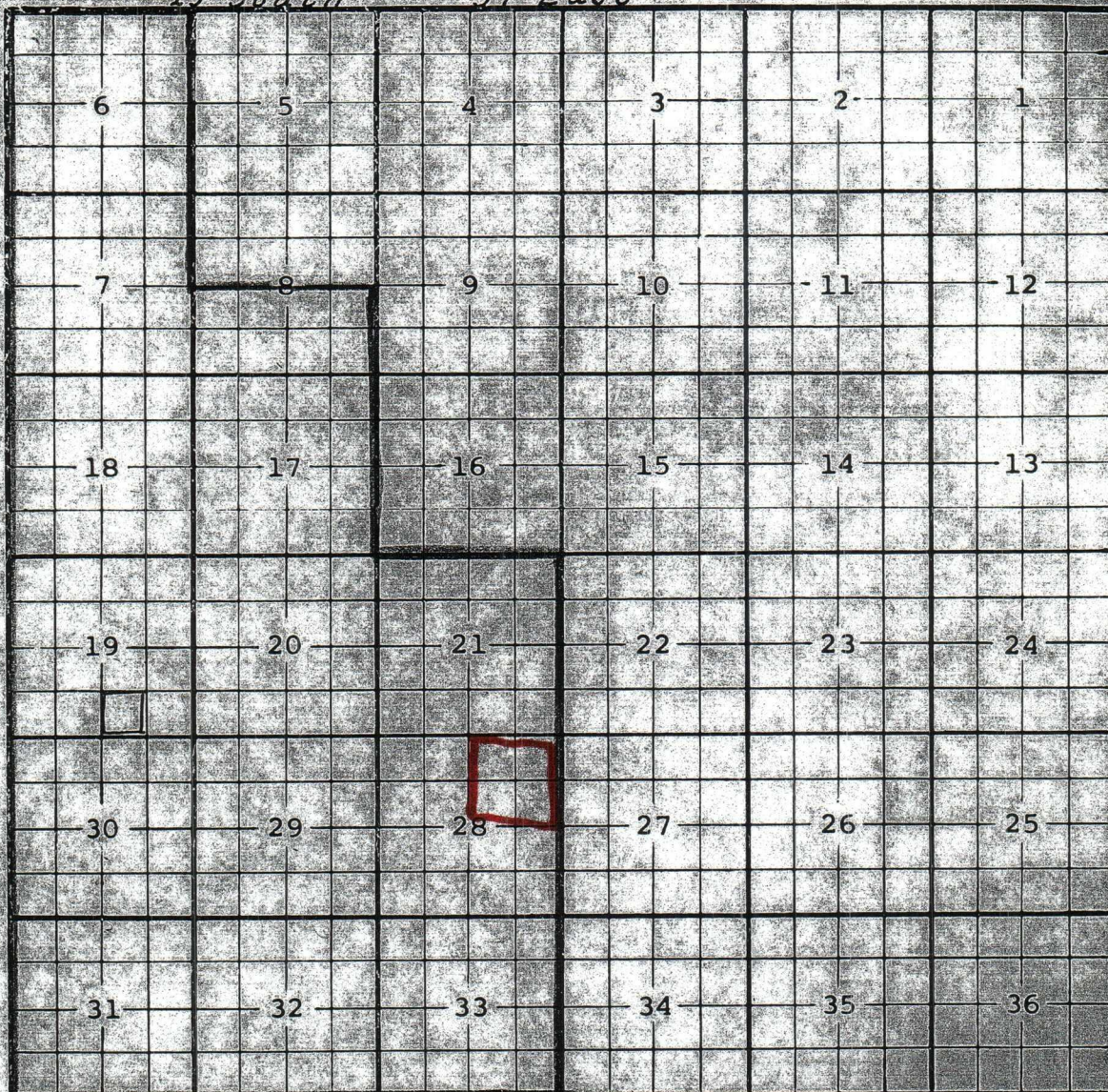


COUNTY Lea POOL Talmat Gas (T-Y-SR)

TOWNSHIP 23-South RANGE 37-East NMPM



Description: All Secs. 6 & 7; $\frac{1}{2}$ Sec. 8; All Secs. 17 thru 21;
All Secs. 28 thru 33, (R-520, 8-12-54).

Contract vertical limits to a subsurface depth of 3362 feet $\frac{SW}{4}$ $\frac{SE}{4}$ Sec. 19
(A-6618, 3-6-81)

CMD : ONGARD 08/13/04 09:54:42
OG6IWCM INQUIRE WELL COMPLETIONS OGOMES -TPWK

API Well No : 30 25 22402 Eff Date : 04-05-1994 WC Status : A
Pool Idn : 58300 TEAGUE;PADDOCK-BLINEBRY
OGRID Idn : 962 ARCH PETROLEUM INC
Prop Idn : 14898 C E LAMUNYON

Well No : 023
GL Elevation: 3311

U/L	Sec	Township	Range	North/South	East/West	Prop/Act (P/A)
---	---	---	---	---	---	---
B.H. Locn	: B 28	23S	37E	FTG 660 F N	FTG 1980 F E	A

Lot Identifier:

Dedicated Acre: 40.00

Lease Type : F

Type of consolidation (Comm, Unit, Forced Pooling - C/U/F/O) :

E6317: No more recs. for this api well no.

PF01 HELP	PF02	PF03 EXIT	PF04 GoTo	PF05	PF06
PF07	PF08	PF09	PF10 NEXT-WC	PF11 HISTORY	PF12 NXTREC

District RC
PO Drawer DD, Artesia, NM 88211-0719

OIL CONSERVATION DIVISION

Instruction on back
Submit to Appropriate District Office

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

PO Box 2088

Santa Fe, NM 87504-2088

5 Copies

District IV
PO Box 2088, Santa Fe, NM 87504-2088

☐ AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

¹ Operator Name and Address ARCH PETROLEUM INC. 10 DESTA DRIVE, STE. 420E Midland, TX 79705		² OGRID Number 000962
		³ Reason for Filing Code CHANGE OF POD EFFECTIVE 4-1-96
⁴ API Number 30-025-22402	⁵ Pool Name <i>Reddock</i> TEAGUE/BLINEBRY	⁶ Pool Code 58300
⁷ Property Code 014898	⁸ Property Name C. E. LAMUNYON	⁹ Well Number 23

II. ¹⁰ Surface Location

UI or Lot. No.	Section	Township	Range	Lot Idn.	Feet from the	North/South Line	Feet from the	East/West Line	County
B	28	23S	37E		660	NORTH	1980	EAST	LEA

¹¹ Bottom Hole Location

UI or Lot. No.	Section	Township	Range	Lot Idn.	Feet from the	North/South Line	Feet from the	East/West Line	County

¹² Lse Code F	¹³ Producing Code P	¹⁴ Gas Connection Date 1/92	¹⁵ C-129 Permit Number	¹⁶ C-129 Effective Date	¹⁷ C-129 Expiration Date
------------------------------------	--	--	-----------------------------------	------------------------------------	-------------------------------------

III. Oil and Gas Transporters

¹⁸ Transporter OGRID	¹⁹ Transporter Name and Address	²⁰ POD	²¹ O/G	²² POD ULSTR Location and Description
007440 37480	EOTT ENERGY PIPELINE LTD. PARTNERSHIP, P. O. BOX 1660 MIDLAND, TX 79702	709610	O	
020809	SID RICHARDSON 201 MAIN ST. FORT WORTH, TX 76102	709730 6	G	

IV. Produced Water

²³ POD 709650	²⁴ POD ULSTR Location and Description
------------------------------------	--

V. Well Completion Data

²⁵ Spud Date	²⁶ Ready Date	²⁷ TD	²⁸ PBDT	²⁹ Perforations

³⁰ Hole Size	³¹ Casing & Tubing Size	³² Depth Set	³³ Sacks Cement

VI. Well Test Data

³⁴ Date New Oil	³⁵ Gas Delivery Date	³⁶ Test Date	³⁷ Test Length	³⁸ Tbg. Pressure	³⁹ Csg. Pressure
⁴⁰ Choke Size	⁴¹ Oil	⁴² Water	⁴³ Gas	⁴⁴ AOF	⁴⁵ Test Method

⁴⁶ I hereby certify that the rules of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Signature: *Bobbie Brooks*

OIL CONSERVATION DIVISION
Approved by: **ORIGINAL SIGNED BY JERRY SEXTON**
DISTRICT I SUPERVISOR

Printed Name:
BOBBIE BROOKS

Title:

Title:
PRODUCTION ANALYST

Approved Date:

APR 19 1996

Date:
APRIL 16, 1996

Phone:
915-685-1961

⁴⁷ If this is a change of operator fill in the OGRID number and name of the previous operator

Previous Operator Signature	Printed Name	Title	Date

Submit 5 Copies
Appropriate District Office
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

Form C-104
Revised 1-1-89
See Instructions
at Bottom of Page

OIL CONSERVATION DIVISION

P. O. Box 2088

Santa Fe, New Mexico 87504-2088

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.

Operator Arch Petroleum Inc.		Well API No. 30 - 025-22402
Address 777 Taylor St., Penthouse II-A, Ft. Worth Club Tower, Ft. Worth, TX 76102		
Reason (s) for Filling (check proper box) ☒ Other (Please explain) EFFECTIVE APRIL 1, 1994		
New Well ☐	Change in Transporter of: Oil ☐ Dry Gas ☐	
Recompletion ☐	Casinghead Gas ☐ Condensate ☐	
Change in Operator ☒		

If change of operator give name and address of previous operator **Chevron U.S.A., Inc., P. O. Box 1150, Midland, TX 79702**

II. DESCRIPTION OF WELL AND LEASE

Lease Name C. E. Lamunyon	Well No. 23	Pool Name, Including Formation Teague Blinbry 52300	Kind of Lease State, Federal or Fee	Lease No.
Location Unit Letter: B : 0660 Feet From The North Line and 1980 Feet From The East Line Section 28 Township 23S Range 37E , NMPM, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil or Condensate ☐	Address (Give address to which approved copy of this form is to be sent) P. O. Box 2648, Houston, TX 77252					
Name of Authorized Transporter of Casinghead Gas or Dry Gas ☐	Address (Give address to which approved copy of this form is to be sent) 201 Main St., Ste. 2300, Ft. Worth, TX 76102					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected ? Yes	When ? Unknown

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plugback	Same Res'v	Diff Res'v
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P. B. T. D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
Perforations					Depth Casing			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			

V. TEST DATA AND REQUEST FOR ALLOWABLE

OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back press.)	Tubing Pressure (Shut - in)	Casing Pressure (Shut - in)	Choke Size

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Rick Vanderslice

Signature

Rick Vanderslice

Printed Name

3/31/94

Date

Oper. Mgr.

Title

(915)685-1961

Telephone No.

OIL CONSERVATION DIVISION

Date Approved

APR 04 1994

By

Title

Orig. Signed by
Paul Kautz
Geologist

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C - 104 must be filed for each pool in multiply completed wells.

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT-" for such proposals

SUBMIT IN TRIPLICATE

1. Type of well
☒ Oil ☐ Gas ☐ Other

2. Name of Operator
CHEVRON U.S.A. INC.

3. Address and Telephone No.
P.O. BOX 1150 MIDLAND, TEXAS 79702 ATTN: P.R. MATTHEWS, ROOM 4115-A

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
1980' FEL & 660' FNL
SEC. 28, T23S, R37E
UNIT C

5. Lease Designation and Serial No.
LC-030187

6. If Indian, Allottee or Tribe Name
N/A

7. If Unit or CA, Agreement Designation
N/A

8. Well Name and No.
C.E. LAMUNYON #23

9. API Well No.
30-025-22402

10. Field and Pool, or Exploratory Area
BLINEBRY

11. County or Parish, State
LEA COUNTY, NEW MEXICO

CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

12	TYPE OF SUBMISSION	TYPE OF ACTION	
	☐ Notice of Intent	☐ Abandonment	☐ Change of Plans
	☒ Subsequent Report	☐ Recompletion	☐ New Construction
	☐ Final Abandonment Notice	☐ Plugging Back	☐ Non-Routine Fracturing
		☐ Casing Repair	☐ Water Shut-Off
		☐ Altering Casing	☐ Conversion to Injection
		☒ Other PERF & STIM.	☐ Dispose Water

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

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimate date of starting any proposed operations, including subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

MIRU, POOH WITH PRODUCTION EQUIPMENT.
PERF IN BLINEBRY AT 5470'-5330', 30 HOLES, 4" GUNS, 2 JHPF.
ACIDIZE EACH SET OF PERFS WITH 2000 GALS. OF 15% NEFE. SWAB BACK ACID.
FRAC PERFS 5330-5476 WITH 50,000 GALLONS OF XL GEL AND CO2 WITH 99,000 # OF SAND.
MAX. PRESSURE = 5898, AVG. PRESSURE = 5200, AVG. RATE 25 BPM.
FLOW WELL BACK THROUGH CHOKE, TIH WITH COIL TBG. AND CLEAN WELL OUT.
TIH WITH 2.375" TBG. TO 5236', PACKER SET 5245'.
LOAD ANN. WITH 3 % KCL PKR. FLUID AND TEST TO 500# OK.
PULL PLUG AND RETURN WELL TO PRODUCTION ON 6-3-92.

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

Signed P.R. Matthews

Title

TECHNICAL ASSISTANT

Date

6/5/92

(This space for Federal or State office use)

Approved by [Signature]

Title

Date

Conditions of approval, if any:

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, or representations as to any matter within its jurisdiction.

*See Instructions on Reverse Side

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

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

5. Lease Designation and Serial No.
LC-030187

6. If Indian, Allottee or Tribe Name
N/A

7. If Unit or CA, Agreement Designation
N/A

8. Well Name and No.
C.E. LAMUNYON #23

9. API Well No.
30-025-22402

10. Field and Pool, or Exploratory Area
BLINEBRY

11. County or Parish, State
LEA CO. NEW MEXICO

SUBMIT IN TRIPLICATE

1. Type of Well
☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator
CHEVRON U.S.A. INC.

3. Address and Telephone No.
P.O. BOX 1150 MIDLAND, TX 79702 ATTN: P.R. MATTHEWS

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
E
1980 FSL & 660 FNL
SEC 28, T23S, R37E

12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION	
☒ Notice of Intent	☐ Abandonment	☐ Change of Plans
☐ Subsequent Report	☐ Recompletion	☐ New Construction
☐ Final Abandonment Notice	☐ Plugging Back	☐ Non-Routine Fracturing
	☐ Casing Repair	☐ Water Shut-Off
	☐ Altering Casing	☐ Conversion to Injection
	☒ Other ADD PAY & STIMULATE	☐ Dispose Water

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

13. 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.)*

IT IS PROPOSED TO:

POOH WITH PRODUCTION EQUIP. TIH WITH BIT TO TD AT 5923'.
TIH WITH RBP AND SET AT 5500'. PERF WITH 4" GUNS, 90 DEG. PHSD. AT 5330-5470.
TIH AND SET PACKER AT 5275', ACDZ PERFS WITH 2000 GALS OF 15% NEFE., SWAB BACK.
FRAC PERFS WITH 50,000 GALS OF XL GEL AND CO2, 99,000 lbs. OF 20/20 SAND.
FLOW BACK WELL, CLEAN OUT SAND AND RETURN TO PRODUCTION.
WORK WILL BEGIN ON APPROVAL OF PERMIT.

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

Signed P.R. Matthews Title TECHNICAL ASSISTANT

Date 4-2-92

(This space for Federal or State office use)

Approved by _____
Conditions of approval, if any:

Title _____

Date 4/8/92

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

*See Instruction on Reverse Side

OIL CONSERVATION DIVISION

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

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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator Chevron U.S.A., Inc.		Well API No. 30-025-22402
Address P.O. Box 1150 Midland, TX 79702		
Reason(s) for Filing (Check proper box) ☐ Other (Please explain)		
New Well ☐	Change in Transporter of: Oil ☐ Dry Gas ☐	
Recompletion ☐	Casinghead Gas ☒ Condensate ☐	
Change in Operator ☐		
If change of operator give name and address of previous operator		

II. DESCRIPTION OF WELL AND LEASE

Lease Name C. E. LaMunyon	Well No. 23	Pool Name, Including Formation Teague Blinbry	Kind of Lease State, Federal or Fee Fed	Lease No. LC030187
Location Unit Letter B, 660 Feet From The North Line and 1980 Feet From The East Line Section 28 Township 23S Range 37E, NMPM, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil or Condensate ☒ Shell Pipeline Corp	Address (Give address to which approved copy of this form is to be sent)	
Name of Authorized Transporter of Casinghead Gas or Dry Gas ☒ Sid Richardson Carbon & Gasoline	Address (Give address to which approved copy of this form is to be sent) 201 Main St., Suite 3000, Ft. Worth, TX 76102	
If well produces oil or liquids, give location of tanks	Unit	Sec.
	Twp.	Rgn.
Is gas actually connected?	Yes	When?
		Unknown

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded	Date Compl. Ready to Prod.		Total Depth			P.B.T.D.		
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay			Tubing Depth		
Perforations						Depth Casing Shoe		
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			

V. TEST DATA AND REQUEST FOR ALLOWABLE

OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours.)

Date First New Oil Run To Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. OPERATOR CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

J. K. Ripley
Signature
J. K. Ripley
Tech Assistant
Printed Name
1/9/92
Date
(915)687-7148
Telephone No.

OIL CONSERVATION DIVISION

JAN 23 '92

Date Approved

By ORIGINAL SIGNATURE

Title

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.A.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-01-78
Format 05-01-83
Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator CHEVRON U.S.A. INC.	
Address P. O. Box 670, Hobbs, NM 88240	
Reason(s) for filing (Check proper box)	Other (Please explain)
☐ New Well ☐ Recompletion ☒ Change in Ownership	Change in Transporter of: ☐ Oil ☐ Casinthead Gas ☐ Dry Gas ☐ Condensate
Name Change Effective 7-1-85	

If change of ownership give name and address of previous owner **Gulf Oil Corp., P. O. Box 670, Hobbs, NM 88240**

II. DESCRIPTION OF WELL AND LEASE

Lease Name C.E. Lamunyon	Well No. 23	Pool Name, including Formation Teague Blinberry	Kind of Lease State, Federal or Fee Federal	Lease No. LC 030187
Location Unit Letter B : 660 Feet From The North Line and 1980' Feet From The East Line of Section 28 Township 23S Range 37E . NMPM, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☐ Shell Pipeline Corp.	Address (Give address to which approved copy of this form is to be sent) Box 1910, Midland TX 79701
Name of Authorized Transporter of Casinthead Gas ☐ or Dry Gas ☐ El Paso Natural Gas Co.	Address (Give address to which approved copy of this form is to be sent) Box 1492 El Paso, TX 79999
If well produces oil or liquids, give location of tanks. Unit B Sec. 28 Twp. 23S Rgs. 37E	Is gas actually connected? Yes When 1-31-68

If this production is commingled with that from any other lease or pool, give commingling order number:

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.

R.D. Pate
(Signature)

Area Engineer
(Title)

5-31-85
(Date)

OIL CONSERVATION DIVISION

APPROVED **AUG - 2 1985**, 19

BY **[Signature]**
TITLE **DISTRICT 1 SUPERVISOR**

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.

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

5. LEASE DESIGNATION AND SERIAL NO.

Federal 10 030187

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

C. E. Lamunyon

9. WELL NO.

23

10. FIELD AND POOL, OR WILDCAT

Teague Blinberg

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

28-23-37E

12. COUNTY OR PARISH 13. STATE

Lee

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 ☐	
2. NAME OF OPERATOR Gulf Oil Corporation	
3. ADDRESS OF OPERATOR P. O. Box 980, Kermit, Texas	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 500' FNL and 1930' SBL	
14. PERMIT NO. Dated 4-17-69	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3311' RKB

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 COMPLETION

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.)

Rigged up 4-16-69. Pulled rods, pump and tubing. Ran Baker 5-1/2" BF on tbg., set at 5456'. Spotted 500 gals. 15% NEA on bottom. Spotted 1.5x sand on BF & pulled tbg. Perforated 5365-37' and 5437-3' w/3-3/8" decentralized gun (4 - 0.45" JHPF - 16 holes). Ran to 5203' and loaded hole w/25 gals. mod. brine. Pumped 2000 gals. 7-1/2% NEA down tbg. w/1 - 1" ball sealer every 120 gals. Max press. 3300 psi, AIR = 7 RPM, ISIP = 300 psi. Pulled tbg. and fraced down 5-1/2" casing in two stages w/1,000 gals. gelled pad, 6,000 gals. w/1-1/2 20/40 sand, 2nd stage preceded w/ball sealers and 500 gals. 15% NEA. Avg. press. - 2700 psi, AIR = 34.6 RPM, ISIP 1500 psi. Washed out sand fill and retrieved BF. Ran 2-3/8" tbg., set at 5765', BH = 5734'. Ran rods and pump and returned well to production. Well pumped 105 BO, 70 BW, 40 MCF gas in 24 hr test ending 4-27-69. GOR = 371.

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

SIGNED BY: H. F. Swannaack

SIGNED

H. F. Swannaack

(This space for Federal or State office use)

TITLE

Area Production Manager

DATE

April 28, 1969

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

APPROVED

APR 28 1969

*See Instructions on Reverse Side

GORDON
ACTING DISTRICT ENGINEER

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

5. LEASE DESIGNATION AND SERIAL NO.

10 03437

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

NAME

8. FARM OR LEASE NAME

C. E. Blumhagen

9. WELL NO.

23

10. FIELD AND POOL OR WILDCAT

Tenure Blumhagen

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

23-23-37E

12. COUNTY OR PARISH

Lea

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.)1. OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR

Gulf Oil Corporation

3. ADDRESS OF OPERATOR

P. O. Box 980, Kermit, Texas 77449

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

500' FWL, 1500' TEL

14. PERMIT NO.

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

3311' RKB

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.) *

It is proposed to set BP 5456' and perforate additional
Blumhagen pay from 5335-87' and 5437-37'. Acidize perforations
w/2,000 gallons 7-1/2% HCl w/1-1' RCH well every 120 gallons.
Frac down 5-1/2' OD casing, w/14,000 gelled brine and 13,000/
20-40 mesh sand. Recover BP. Place well on production and
test.

Work to start on approval.

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

ORIGINAL
SIGNED BY: M. F. SWANBACK

SIGNED

TITLE Area Production Manager

DATE April 16, 1964

(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 DUPLICATE*

(See other in-
structions on
reverse side)Form approved.
Budget Bureau No. 42-R3555.

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 ☐	DEEP-EN ☐	PLUG BACK ☐	DIFF. RESVR. ☐	Other _____
2. NAME OF OPERATOR Gulf Oil Corporation						5. LEASE DESIGNATION AND SERIAL NO. Federal LC 030137	
3. ADDRESS OF OPERATOR P. O. Box 980, Kermit, Texas 79745						8. IF INDIAN, ALLOTTEE OR TRIBE NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 660' from North Line, 1980' from East Line At top prod. interval reported below At total depth						7. UNIT AGREEMENT NAME	
14. PERMIT NO. --						9. WELL NO. 23	
DATE ISSUED 1-5-63						10. FIELD AND POOL, OR WILDCAT Teague Blinbry	
15. DATE SPUDDED 1-3-63						11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA 23-23S-37E	
16. DATE T.D. REACHED 1-22-63						12. COUNTY OR PARISH Lea	
17. DATE COMPL. (Ready to prod.) 2-1-63						13. STATE New Mexico	
18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 3511' RKB						19. ELEV. CASINGHEAD --	
20. TOTAL DEPTH, MD & TVD 5950'		21. PLUG BACK T.D., MD & TVD 5923'		22. IF MULTIPLE COMPL., HOW MANY* --		23. INTERVALS DRILLED BY --	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* Blinbry 5474-5740'						25. WAS DIRECTIONAL SURVEY MADE No	
26. TYPE ELECTRIC AND OTHER LOGS RUN Acoustic Velocity Log and Fracture Finder Micro-Seismogram						27. WAS WELL CORED No	
28. CASING RECORD (Report all strings set in well)							
CASING SIZE		WEIGHT, LB./FT.		DEPTH SET (MD)		HOLE SIZE	
8-5/8"		24.00		935'		11"	
5-1/2"		15.50		5950'		7-7/8"	
29. LINER RECORD							
SIZE		TOP (MD)		BOTTOM (MD)		SACKS CEMENT*	
None							
30. TUBING RECORD							
SIZE		DEPTH SET (MD)		PACKER SET (MD)			
2-3/8"		5753'		None			
31. PERFORATION RECORD (Interval, size and number)							
5474-76', 5568-70', 5672-74', 5733-40' w/4 - 0.75" jet holes per foot, 32 holes							
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.							
DEPTH INTERVAL (MD)				AMOUNT AND KIND OF MATERIAL USED			
5474'-5740'				4000 gals 7-1/2% NE acid, 2000 gals. 15% NE acid, 20,000 gals. gelled brine, 24,000' 20-40 sand, 24 - 1" RCN balls			
33. PRODUCTION							
DATE FIRST PRODUCTION 2-1-63		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Flow				WELL STATUS (Producing or shut-in) Producing	
DATE OF TEST 2-4-63		HOURS TESTED 24		CHOKE SIZE 24/64"		PROD'N. FOR TEST PERIOD	
FLOW. TUBING PRESS. 240		CASING PRESSURE 720		CALCULATED 24-HOUR RATE		OIL—BBL. 186	
						GAS—MCF. 296	
						WATER—BBL. 39	
						OIL GRAVITY-API (CORR.) 40.9°	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Sold						TEST WITNESSED BY Joe Cox	
35. LIST OF ATTACHMENTS Acoustic Velocity Log, Fracture Finder Micro-Seismogram							
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records							
SIGNED <i>H. E. Swannack</i>		TITLE Area Production Manager				DATE February 5, 1968	

*(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 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 33.

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	MEAS. DEPTH	TRUS VERT. DEPTH
Kelly Bushing	0	12	No cores or DST's taken	Rustler	1032	
Sand	12	165		Top Salt	1148	
Red Bed	165	1032		Yates	2510	
Anhyd.	1032	1148		7 Rivers	2763	
Salt	1148	2365		Pearose	3360	
Anhyd., Sand, Dolo	2365	3537		Grayburg	3537	
Dolo.	3537	5950 (T.D.)		San Andres	3795	
				Glorieta	4950	
				Blainebury	5346	
Lammyon No. 23						

Gulf Oil Corporation P.O. Box 980, Kermit, Texas

C.B. La Munion Well No. 23 T-23 Undersigned

19801 SUL, 19801 FEL, Sec. 25, T-23 south, Range 37 east

INCLINATION RECORD

	Angle		Plum line
	3.75	16.4500	16.4500
	3.06	33.8003	55.2508
	3.93	8.1315	63.3859
	3.50	3.8500	67.2359
	2.62	6.5500	73.7859
	3.93	4.1265	77.9124
	2.62	3.7990	81.7114
	1.75	3.6750	85.3864
	1.75	3.7625	89.1489
	1.31	2.7243	91.8737
	1.75	3.5175	95.3912
	3.06	9.3636	104.7548
	4.37	18.1792	122.9340
	3.50	7.6650	130.5990
	3.50	7.1750	137.7740
	6.12	23.6844	161.4584
	6.12	7.5888	169.0472
	7.00	13.5800	182.6272
	6.12	14.6880	197.3152

I, the undersigned, certify that the above is true and correct to the best of my knowledge and belief.

C.B. La Munion

Drilling Sup:

Drilling Sup:

Witness:

The undersigned hereby appeared Melvin Proctor, who is the person whose name is subscribed hereto, and he has sworn under oath that he is acting for and on behalf of the operator of the well identified above, and that the facts of his knowledge and belief such well was not a dry hole, and that the above is a true and correct statement.

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIP
(Other instruction
verse side)ATE
reForm approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

Federal IC 030187

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

C. E. Lammyon

9. WELL NO.

23

10. FIELD AND POOL, OR WILDCAT

Teague Minebry

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

Sec. 28-238-37E

14. PERMIT NO.

1-5-68

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

3311' KB

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:

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.)*

Perforated 5-1/2" OD casing 5474-76', 5568-70', 5672-74' and 5738-40' in 500 gallons 15% HCl acid with 4 - 0.75" JHFF. Set packer at 5438' and pumped 4,000 gallons of 7-1/2% HCl acid w/1 - 1" RCN ball sealer every 120 gallons, IR 5.4 BPM at 3300 psi, SIP 1200 psi. Pulled packer. Frac down casing with 4 stages 500 gallons 15% HCl acid, 1,000 gallons gelled brine, 4,000 gallons gelled brine with 1-1/2% per gallon 20-40 mesh sand, and 8 - 1" RCN ball sealers between stages. IR 38 BPM @ 2200 psi, SIP 1450 psi. Set 2-3/8" OD tubing at 5753'. Swabbed well in. Flowed 186 BO, 39 BW, 296 MCF in 24 hours on 24/64" choke, FTP 240 psi. Oil gravity 40.9° at 60° F.

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

SIGNED

H. F. Swannack

TITLE

Area Production Manager

DATE

February 5, 1968

(This space for Federal or State office use)

APPROVED BY

TITLE

NOTED

DATE

APPROVED

CONDITIONS OF APPROVAL, IF ANY:

FEB 6 1968

FEB 6 1968

*See Instructions on Reverse Side

GORDON

J. L. GORDON
ACTING DISTRICT ENGINEER

NO. OF COPIES RECEIVED	
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LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

**NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS**

Form C-104
Supersedes Old C-104 and C-105
Effective 1-1-65

I. OPERATOR

Operator **Gulf Oil Corporation**

Address **P. O. Box 980, Kermit, Texas 79745**

Reason(s) for filing (Check proper box)

New Well ☒	Change in Transporter of:	Other (Please explain)
Recompletion ☐	Oil ☐	Dry Gas ☐
Change in Ownership ☐	Casinghead Gas ☐	Condensate ☐

If change of ownership give name and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name C. E. Lammyon	Well No. 23	Pool Name, including Formation Teague Blinebry	Kind of Lease State, Federal or Fee Federal	Lease No. LC 030187
Location: Unit Letter B : 660' Feet From The North Line and 1980' Feet From The East				
Line of Section 28 Township 23S Range 37E , NMPM, Lee County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐ Shell Pipe Line Corporation	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1910, Midland, Texas 79701
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐ El Paso Natural Gas Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1334, Jal, New Mexico 88252
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When
	B 28 23S 37E Yes 1-31-68

If this production is commingled with that from any other lease or pool, give commingling order number: _____

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well ☒	Gas Well ☐	New Well ☒	Workover ☐	Deepen ☐	Plug Back ☐	Same Res'v. ☐	Diff. Res'v. ☐
Date Spudded 1-8-68	Date Compl. Ready to Prod. 2-1-68	Total Depth 5950'	P.B.T.D. 5923'					
Elevations (DF, RKB, RT, GR, etc.) 3311' RKB	Name of Producing Formation Blinebry	Top Oil/Gas Pay 5474'	Tubing Depth 5753'					
Perforations 5738-40, 5672-74, 5568-70, 5474-76			Depth Casing Shoe 5950					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
11"	8-5/8" OD 24.00#	935'	500 sz circulated					
7-7/8"	5-1/2" OD 15.50#	5950'	685 sz TBMC 2285'					
	2-3/8" OD 4.70#	5753'	--					

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

(Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tanks 2-1-68	Date of Test 2-4-68	Producing Method (Flow, pump, gas lift, etc.) Flow	
Length of Test 24	Tubing Pressure 240	Casing Pressure 720	Choke Size 2 1/4"
Actual Prod. During Test 225	Oil - Bbls. 186	Water - Bbls. 39	Gas - MCF 296

GAS WELL Well produced 220 barrels of oil prior to this test.

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

H. F. Swannack
(Signature) **H. F. Swannack**
Area Production Manager
(Title)
February 5, 1968
(Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19____
BY *[Signature]*
TITLE _____

This form is to be filed in compliance with RULE 1104.
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.
All sections of this form must be filled out completely for allowable on new and recompleted wells.
Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.
Separate Forms C-104 must be filed for each pool in multiply completed wells.

1950: FEL, Sec. 24, T-23 south, Range 37 east

DECLASSIFIED BY: 6032 PMS

Angle	Day's position
16.4500	16.4500
33.8008	55.2508
8.1315	63.3859
3.8500	67.2359
6.5500	73.7859
4.1265	77.9124
3.7990	81.7114
3.6750	85.3864
3.7625	89.1489
2.7248	91.8737
3.5175	95.3912
9.3636	104.7548
13.1792	122.9340
7.6650	130.5990
7.1750	137.7740
23.6344	161.4584
7.5888	169.0472
13.5800	182.6272
14.6880	197.3152

...or, possibly, that the above did not, but that it is true and
...or, at least, it is known to be true.

32000 100000 200000 300000 400000 500000 600000 700000 800000 900000 1000000

Drilling Sup:

1. That on the undersigned authority appeared Melvin Proctor, known to me to be the person whose name is subscribed hereto; that on making deposition under oath, states that he is acting for and in behalf of the operator of said mail identified above, and that on the basis of his knowledge and belief such mail was now in the hands of said person and was being transported.

OPERATOR Gulf Oil Corporation ADDRESS P.O. Box 980, Kermit, Texas

LEASE C.E. La Munyon WELL NO. 23 FIELD Undersigned

LOCATION 660' ENL, 1980' FEL, Sec. 28, T-23 south, Range 37 east

INCLINATION RECORD

Depth	Angle	Direction (degrees)	Distance
980	1.75	16.4500	16.4500
1268	3.06	38.8008	55.2508
2015	3.93	8.1315	63.3859
2525	3.50	3.8500	67.2359
2775	2.62	6.5500	73.7859
2880	3.93	4.1265	77.9124
3025	2.62	3.7990	81.7114
3235	1.75	3.6750	85.3864
3450	1.75	3.7625	89.1489
3658	1.31	2.7248	91.8737
3859	1.75	3.5175	95.3912
4165	3.06	9.3636	104.7548
4581	4.37	18.1792	122.9340
4800	3.50	7.6650	130.5990
5005	3.50	7.1750	137.7740
5392	6.12	23.6844	161.4584
5516	6.12	7.5888	169.0472
5710	7.00	13.5800	182.6272
5950	6.12	14.6880	197.3152

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

STATES DRILLING COMPANY

Malvin Proctor
Title Drilling Sup:

Affidavit:

Before me, the undersigned authority appeared Malvin Proctor known to me to be the person whose name is subscribed herebelow who, on making deposition under oath states that he is acting for and in behalf of the operator of the well identified above, and that to the best of his knowledge and belief such well was not intentionally drilled from the area vertical that is over.

Malvin Proctor
(Affiant's signature)

Sworn and subscribed to in my presence on this the 1ST day of February 68

Argene R Brown

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE*
(Other instruction
verse side)Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

Federal IC 030187

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

C. E. Latham

9. WELL NO.

23

10. FIELD AND POOL, OR WILDCAT

Teague Blinberry

11. SEC., T., R., M., OR B.L.E. AND
SURVEY OR AREA

Sec. 28, T-23S, R-37E

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.)

1.

OIL WELL ☒ GAS WELL ☐ OTHER ☐ Drilling

2. NAME OF OPERATOR

Gulf Oil Corporation

3. ADDRESS OF OPERATOR

P. O. Box 980, Kermit, Texas 79745

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

660' FWL and 1980' FWL

14. PERMIT NO.

Dated 1-5-63

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

3311' KB

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) Production String

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.)*

Ran 189 jts. of 5 1/2" OD 15.5# J-55 casing with shoe. Set shoe at 5950', DV tool at 3725'.

Cemented 1st stage w/165 sacks 16% higel slurry tailed w/260 sacks neat. Pumped plug and pressured to 1400#.

Cemented 2nd stage thru DV tool w/160 sacks 16% higel slurry tailed w/100 sacks neat. Pressured to 2000#. TEST @ 2285'.

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

SIGNED

TITLE

Area Manager

DATE

1-25-63

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

APPROVED

JAN 29 1968

*See Instructions on Reverse Side

J L GORDON
ACTING DISTRICT ENGINEER

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPLY
(Other instruction
verse side)VTE
re-Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

Federal LG 030187

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

C. E. Lanning

9. WELL NO.

23

10. FIELD AND POOL, OR WILDCAT

Teague Blinstry

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

Sec. 28, T-23N, R-37E

12. COUNTY OR PARISH

Lea

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.)

1.

OIL WELL ☐ GAS WELL ☐ OTHER ☒ Drilling

2. NAME OF OPERATOR

Gulf Oil Corporation

3. ADDRESS OF OPERATOR

P. O. Box 980, Kermit, Texas 79745

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

660' FHL and 1980' FHL, Sec. 28, T-23N, R-37E

14. PERMIT NO.

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

3311' KB

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.)*

Spudded 11" hole 1-8-68. On 1-8-68 set 8-5/8" OD 24# J-55 casing at 935'. Cemented w/500 sacks Incor w/1/4# Floccel, 2# Catcl₂. First 300 sacks also contained 4% gal mixed 13.2#/gal neat at 14.7#/gal. Bumped plug 800#. Circulated 135 sacks. WOC.

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

SIGNED

H. F. Swannack

TITLE Area Manager

DATE January 9, 1968

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

APPROVED

JAN 11 1968

*See Instructions on Reverse Side

J L GORDON
ACTING DISTRICT ENGINEER

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1A. TYPE OF WORK

DRILL ☒

DEEPEN ☐

PLUG BACK ☐

B. TYPE OF WELL

OIL
WELL ☒

GAS
WELL ☐

OTHER

SINGLE
ZONE ☐

MULTIPLE
ZONE ☐

2. NAME OF OPERATOR

Gulf Oil Corporation

3. ADDRESS OF OPERATOR

P. O. Box 980, Kermit, Texas 79745

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

At surface

660' FNL and 1980' FEL, Sec. 28, T-23S, R-37E

At proposed prod. zone 300' of surface location

14. DISTANCE IN MILES AND DIRECTION FROM NEAREST TOWN OR POST OFFICE*

11 miles north of Jal, New Mexico

15. DISTANCE FROM PROPOSED*

LOCATION TO NEAREST
PROPERTY OR LEASE LINE, FT.
(Also to nearest drlg. unit line, if any)

660'

16. NO. OF ACRES IN LEASE

1600

17. NO. OF ACRES ASSIGNED

TO THIS WELL 40

18. DISTANCE FROM PROPOSED LOCATION*

TO NEAREST WELL, DRILLING, COMPLETED,
OR APPLIED FOR, ON THIS LEASE, FT.

1400' West

of Well #21

19. PROPOSED DEPTH

6300

20. ROTARY OR CABLE TOOLS

Rotary

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

Later

22. APPROX. DATE WORK WILL START*

Upon approval of Permit

23.

PROPOSED CASING AND CEMENTING PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	QUANTITY OF CEMENT
11"	8-5/8"	24#	850'	Circulate
7-7/8"	5-1/2"	15.50#	6000'	Top at base of Salt (2300')

Will drill to 6300' to test the Teague Blinebry
formation within the interval 5350' to 5900'.

IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM: If proposal is to deepen or plug back, give data on present productive zone and proposed new productive zone. If proposal is to drill or deepen directionally, give pertinent data on subsurface locations and measured and true vertical depths. Give blowout preventer program, if any.

24.

SIGNED

H. F. Swannack

TITLE Area Manager

DATE January 5, 1968

PERMIT NO.

APPROVAL DATE

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

DISTRICT ENGINEER

*See Instructions On Reverse Side

NEW MEXICO OIL CONSERVATION COMMISSION
WELL LOCATION AND ACREAGE DEDICATION PLAT

Form O-102
Supersedes O-128
Effective 1-1-65

All distances must be from the outer boundaries of the Section

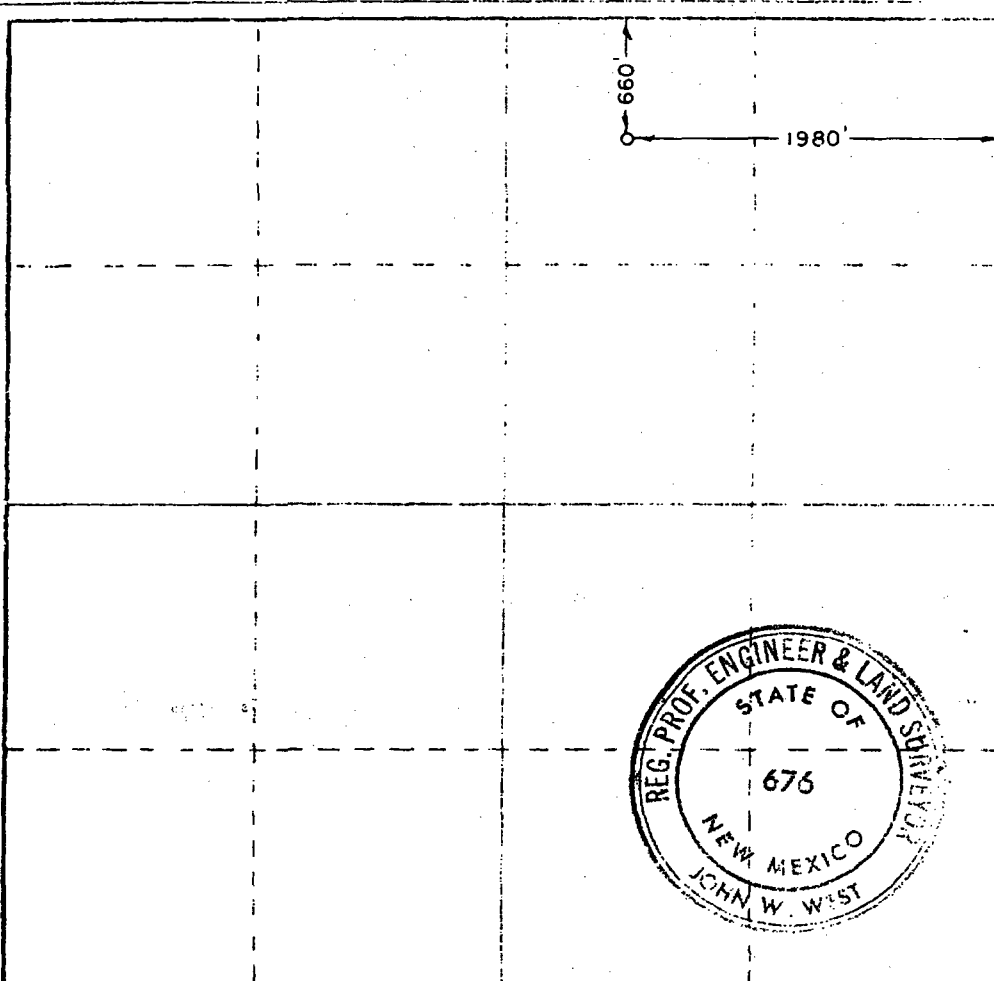
Gulf Oil Corp.		C. E. LaMunyon		23
B	28	23 South	37 East	Lea
Actual Elevation of Well: 660 North 1980 East				
3302.7	Blinebry	Teague Blinebry		NW $\frac{1}{4}$ NE $\frac{1}{4}$ 40

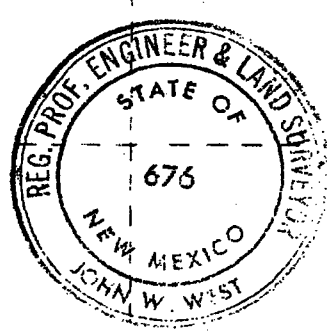
1. Outline the acreage dedicated to the subject well by colored pencil or fastener marks on the plat below.
2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).
3. If more than one lease of different ownership is dedicated to the well, have the interests 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 interests, has been approved by the Commission.





CERTIFICATION

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

John W. West
Agent

Gulf Oil Corp.

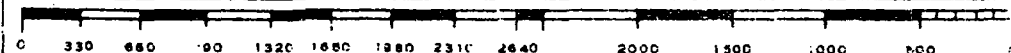
1-5-1968

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
January 3, 1968

Registered Professional Engineer and/or Land Surveyor
John W. West

Certificate No. **676**



COUNTY	LEA	FIELD	Teague	STATE	NM
OPR	GULF OIL CORP.				MAP
	23 LaMunyon, C. E.				
	Sec. 28, T-23-S, R-37-E				CO-ORD
	660' FNL, 1980' FEL of Sec.				30-025-22402
	Spd 1-8-68				EL [REDACTED]
	Cmp 2-4-68				CLASS
		FORMATION	DATUM	FORMATION	DATUM
CSG & SX - TUBING					
	8 5/8"	935'	800		
	5 1/2"	5950'	685		
LOGS EL GR RA IND HC A					
TD 5950', PBD 5923'					

IP Blinebry Perfs 5474-5740' Flwd 186 BOPD + 39 BW. Pot. Based on 24 hr test thru 24/64" chk., TP 240#, CP 720#, GOR 1591.

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CONT. Cactus Drlg. Co. PROP DEPTH 6300' TYPE RT
DATE

F.R. 1-11-68; Elev. 3311' KB
PD 6300' - Blinebry
Cactus - Contractor
1-18-68 AMEND TO ADD REFERENCE NUMBER
1-15-68 Drlg. 3695'.
1-22-68 Drlg. 5824' lm.
1-29-68 TD 5950', PBD 5923', SI.
2-5-68 TD 5950', PBD 5923', COMPLETE
Perf 5474-76', 5568-70', 5672-74', 5738-40'
W/4 SPF
Acid (5474-5740') 500 gals 15%
Acid (5474-5740') 6000 gals.
Frac (5474-5740') 12,000 gals + 18,000# sd.
LOG: Glorieta 4950', Blinebry 5315'.

OWWO

COUNTY	LEA	FIELD	Teague	STATE	NM	30-025-22402
OPR	GULF OIL CORP.				MAP	
	23 LaMunyon, C. E.					
	Sec 28, T-23-S, R-37-E				CO-ORD	
	660' FNL, 1980' FEL of Sec.					

Re-Cmp 4-27-69		CLASS		EL	
		FORMATION	DATUM	FORMATION	DATUM
CSG & SX - TUBING 8 5/8" at 935' w/500 sx 5 1/2" at 5950' w/685 sx					
LOGS EL GR RA IND HC A					
		TD 5950'; PBD 5456'			
(Blinebry) Perfs 5385-5439' NO NEW POTENTIAL.					

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CONT.	PROP DEPTH 5439'	TYPE WO
DATE		

F.R.C. 6-5-69
 PD 5439' WO (Blinebry)
 (Orig. comp 2-4-68 thru Perfs 5474-5740', OTD 5950', OPB 5923')
 6-2-69 TD 5950'; PBD 5456'; COMPLETE
 BP @ 5456'
 Perf 5385-87', 5437-39' w/4 SPF
 Acid (5385-5439') 2000 gals 7½%
 Frac (5385-5439') 12,000 gals + 18,000# sd
 Ppd 105 BO + 70 BW in 24 hrs (5385-5439')
 6-5-69 COMPLETION REPORTED