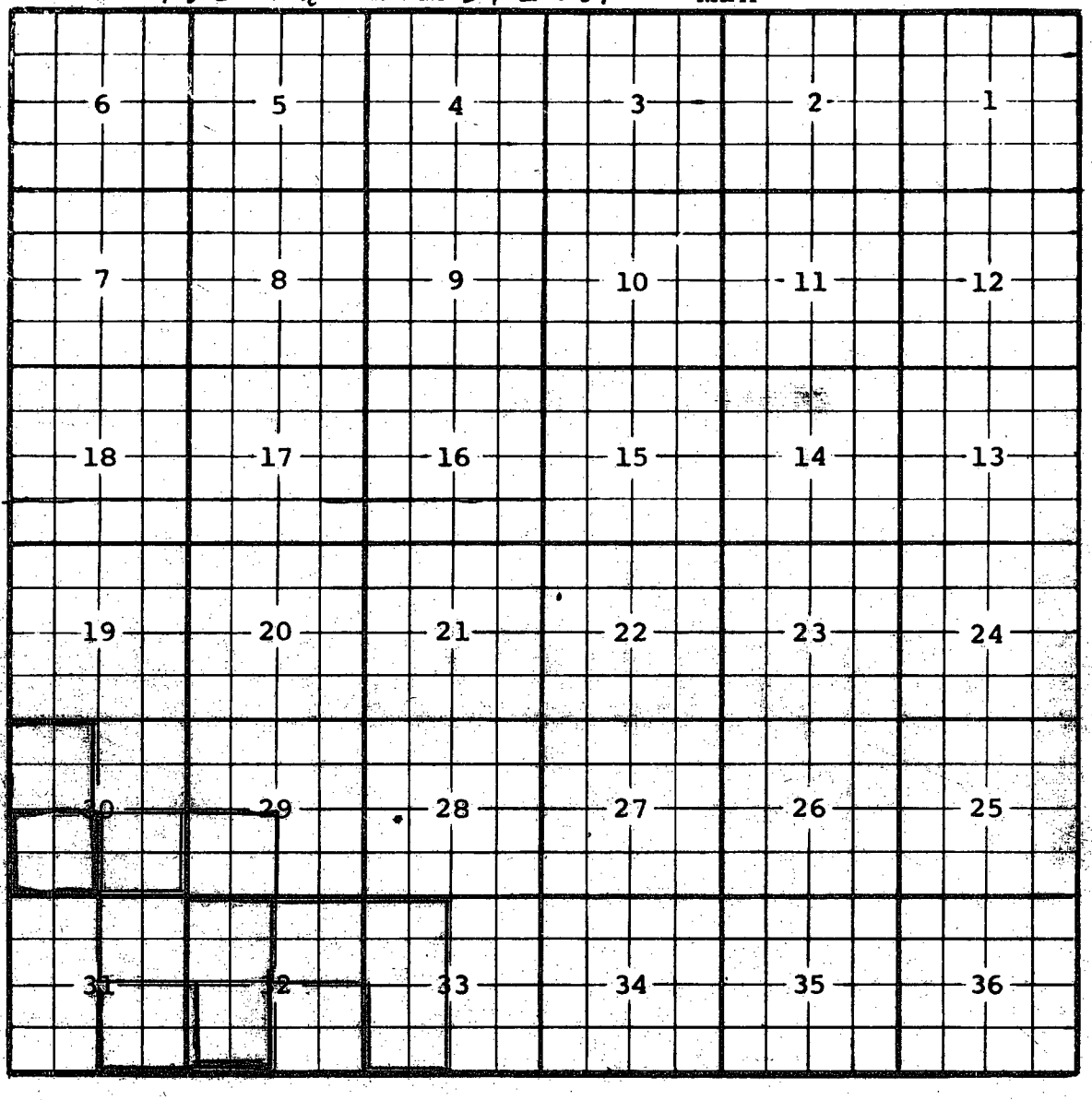
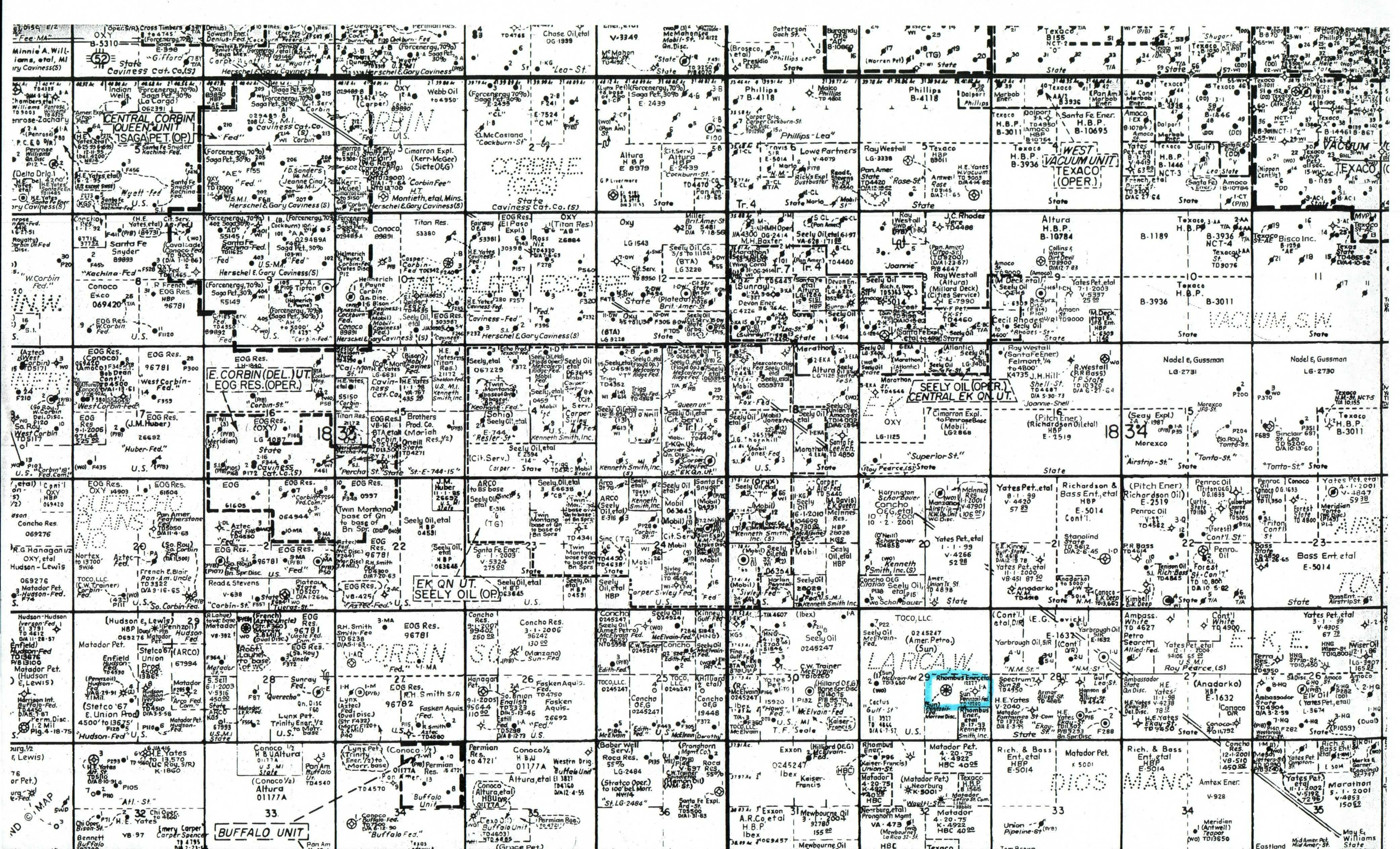
COUNTY Lea POOL EK - Bone Springs

TOWNSHIP 19 South RANGE 34 East NMPM



Description: SE/4 Sec 30 (R-4957, 3-1-75)
Ext: NE/4 Sec 31, NW/4 Sec 32 (R-5102, 10-1-75) Ext: NE/4 Sec 32, W/2 Sec 33 (R-5781, 9-1-78)
Ext: Sec: 30 SW/4 (R-7114 - 10-19-82)
Ext: SW/4 Sec. 29 (R-7602, 2-22-84) Ext: NW/4 Sec. 30 (R-8483, 8-13-87)
Ext: SW/4 Sec. 32 (R-10240, 11-9-94) Ext: SE/4 Sec. 31 (R-12141, 5-10-04)


CENTRAL CORBIN QUEEN UNIT
SAGA PET. (OP.)
E. CORBIN (DEL.) UT.
EOG RES. (OPER.)
EK QN UT
SEELY OIL (OP)
SEELY OIL (OPER.)
CENTRAL EK QN UT.
WEST VACUUM UNIT
TEXACO (OPER.)
VACUUM
TEXACO
BUFFALO UNIT

District I
PO Box 1980, Hobbs, NM 88241-1980
District II
PO Drawer DD, Artesia, NM 88211-0719
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
PO Box 2088, Santa Fe, NM 87504-2088

State of New Mexico
Energy, Minerals & Natural Resources Department

OIL CONSERVATION DIVISION
PO Box 2088
Santa Fe, NM 87504-2088

Form C-104
Revised February 10, 1994
Instructions on back
Submit to Appropriate District Office
5 Copies

☐ AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

[1] Operator name and Address	[2] OGRID Number
Rhombus Operating Co., Ltd. 200 N. Loraine, Suite 1270 Midland, TX 79701	019111
	[3] Reason for Filing Code EF 11-1-97 CO

[4] API Number	[5] Pool Name	[6] Pool Code
30 - 025 - 27013	La Rica Morrow, West (Gas)	79830
[7] Property Code	**[8] Property Name**	**[9] Well Number**
009598	Pennzoil Federal Com.	1

II. [10] Surface Location

Ul or lot no.	Section	Township	Range	Lot.Idn	Feet from the	North/South Line	Feet from the	East/West line	County
J	29	18S	34E		1980	South	1780	East	Lea

[11] Bottom Hole Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South Line	Feet from the	East/West line	County

[12] Lse Code	[13] Producing Method Code	[14] Gas Connection Date	[15] C-129 Permit Number	[16] C-129 Effective Date	[17] C-129 Expiration Date
F	P				

III. Oil and Gas Transporters

[18] Transporter OGRID	[19] Transporter Name and Address	[20] POD	[21] O/G	[22] POD ULSTR Location and Description
138648	Amoco PL ICT <Trucks>	2210910	O	
5073	Conoco Inc.	2210930	G	

IV. Produced Water

[23] POD	[24] POD ULSTR Location and Description
2210950	

V. Well Completion Data

[25] Spud Date	[26] Ready Date	[27] TD	[28] PBTD	[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: Cord Painter

Printed name: Cord Painter

Title: Petroleum Engineer

Date: Phone: (915)683-8873

OIL CONSERVATION DIVISION

Approved by: ORIGINAL SIGNED BY TIM W. GUM DISTRICT SUPERVISOR

Title:

Approval Date:

[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

District I
PO Box 1980, Hobbs, NM 88241-1980
District II
PO Drawer DD, Artesia, NM 88211-0719
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
PO Box 2088, Santa Fe, NM 87504-2088

State of New Mexico
Energy, Minerals & Natural Resources Department

OIL CONSERVATION DIVISION
PO Box 2088
Santa Fe, NM 87504-2088

Form C-104
Revised February 10, 1994
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☐ AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

[1] Operator name and Address	[2] OGRID Number
Rhombus Operating Co., Ltd. 200 N. Loraine, Suite 1270 Midland, TX 79701	019111
	[3] Reason for Filing Code ~~AB~~ CH - Effective 9/1/96

[4] API Number	[5] Pool Name	[6] Pool Code
30 - 0 25-27013	La Rica Morrow, West (Gas)	79830
[7] Property Code	**[8] Property Name**	**[9] Well Number**
009598	Pennzoil Federal Com.	1

II. [10] Surface Location

Ul or lot no.	Section	Township	Range	Lot.Idn	Feet from the	North/South Line	Feet from the	East/West line	County
J	29	18S	34E		1980	South	1780	East	Lea

[11] Bottom Hole Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County

[12] Lse Code	[13] Producing Method Code	[14] Gas Connection Date	[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
34019	Phillips 66 Co.	2210910	O	J -29-185-34E
5073	Conoco Inc.	2210930	G	

IV. Produced Water

[23] POD	[24] POD ULSTR Location and Description
2210950	

V. Well Completion Data

[25] Spud Date	[26] Ready Date	[27] TD	[28] PBTD	[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: Gregory D. Cielinski

Printed name: Gregory D. Cielinski

Title: President of the General Partner (Sarsco, Inc.)

Date: Phone: (915) 683-8873

OIL CONSERVATION DIVISION

Approved by:

Title:

Approval Date:

[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
Gregory D. Cielinski	Gregory D. Cielinski	President	9/19/96

Rhombus Energy Company OGRID 019111

District I
PO Box 1980, Hobbs, NM 88241-1980
District II
PO Drawer DD, Artesia, NM 88211-0719
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
PO Box 2088, Santa Fe, NM 87504-2088

State of New Mexico
Energy, Minerals & Natural Resources Department

OIL CONSERVATION DIVISION
PO Box 2088
Santa Fe, NM 87504-2088

Form C-104
Revised February 10, 1994
Instructions on back
Submit to Appropriate District Office
5 Copies

☐ AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

[1] Operator name and Address	[2] OGRID Number
Rhombus Energy Company 200 N. Loraine, Suite 1270 Midland, TX 79701	019111
	[3] Reason for Filing Code: CO

[4] API Number	[5] Pool Name	[6] Pool Code
30 - 025-27013	Pennzoil Federal Com	79830
[7] Property Code	**[8] Property Name**	**[9] Well Number**
009598	La Rica Morrow, West (Gas)	1

II. [10] Surface Location

UL or lot no.	Section	Township	Range	Lot.Idn	Feet from the	North/South Line	Feet from the	East/West line	County
I	29	18S	34E						Lea

[11] Bottom Hole Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County

[12] Lse Code	[13] Producing Method Code	[14] Gas Connection Date	[15] C-129 Permit Number	[16] C-129 Effective Date	[17] C-129 Expiration Date
F					

III. Oil and Gas Transporters

[18] Transporter OGRID	[19] Transporter Name and Address	[20] POD	[21] O/G	[22] POD ULSTR Location and Description
34019	Phillips 66 Co.	2210910	O	J-29-18S-34E

IV. Produced Water

[23] POD	[24] POD ULSTR Location and Description

V. Well Completion Data

[25] Spud Date	[26] Ready Date	[27] TD	[28] PBTD	[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: Mabry Kniffen

Printed name: Mabry Kniffen

Title: Administrative Assistant

Date: 08/10/95 Phone: (915) 683-8873

OIL CONSERVATION DIVISION

Approved by:

Title:

Approval Date:

[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

OIL CONSERVATION DIVISION

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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. .

Operator	Well API No.
Rhombus Energy Company	30-025-27013

Address: 200 N. Loraine, Suite 1270 Midland, TX 79701

Reason(s) for Filing *(Check proper box)*

- New Well ☐
- Recompletion ☐
- Change in Operator ☐
- Other *(Please explain)* ☐

Change in Transporter of:
Oil ☐ Dry Gas ☒
Casinghead Gas ☐ Condensate ☐

If change of operator give name and address of previous operator _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease State, (Federal) or Fee	Agreement Lease No.
Pennzoil Federal Com	1	West La Rica Morrow		NMNM 88998

Location
Unit Letter J : 1980 Feet From The South Line and 1780 Feet From The East Line

Section 29 Township 18S Range 34E , 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)*
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒	Address *(Give address to which approved copy of this form is to be sent)*
Conoco, Inc.	P.O. Box 2197, Houston, TX 77252

If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When ?
					Yes	9-2-81

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 *(pitot, 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.

Signature: Gregory D. Cielinski

Printed Name: Gregory D. Cielinski Title: President

Date: 9-28-93 Telephone No.: 915-683-8873

OIL CONSERVATION DIVISION

Date Approved: OCT 01 1993

By: ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

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.

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
rgy, Minerals and Natural Resources Departm

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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.

Operator	Well API No.
Rhombus Energy Company	30-025-27013 ✓

Address: 200 N. Loraine, Suite 1270 Midland, TX 79701

Reason(s) for Filing (Check proper box)

- New Well ☐
- Recompletion ☐
- Change in Operator ☐
- Other (Please explain) ☐

Change in Transporter of:
Oil ☐ Dry Gas ☐
Casinghead Gas ☐ Condensate ☒

If change of operator give name and address of previous operator _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease State, (Federal) or Fee	Lease No.
Pennzoil Federal Com	1	West La Rica Morrow		NM 12277

Location
Unit Letter J : 1980 Feet From The South Line and 1780 Feet From The East Line
Section 29 Township 18S Range 34E, 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)
Koch Oil Company	Box 3609 Midland, TX 79702
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒	Address (Give address to which approved copy of this form is to be sent)
~~Enron Gas Processing Company~~ Northern Natural Gas	P.O. Box 1188 Houston, TX 77251-1188

If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When ?
	J	29	18S	34E	Yes	9-2-81

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 (pitot, 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.

Signature: Gregory D. Cielinski
Printed Name: Gregory D Cielinski
Title: President
Date: 4-8-93
Telephone No.: 915-683-8873

OIL CONSERVATION DIVISION

Date Approved: APR 14 1993

By _____

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.

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 Departm

OIL CONSERVATION DIVISION

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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.

Operator	Well API No.
RHOMBUS ENERGY COMPANY	30-025-27013

Address: 200 N. LORAINE, STE 1270, MIDLAND, TX 79701

Reason(s) for Filing (Check proper box)

- New Well [ ]
- Recompletion [ ]
- Change in Operator [X]
- Change in Transporter of: Oil [ ] Dry Gas [ ] Casinghead Gas [ ] Condensate [X]
- Other (Please explain) [ ]

If change of operator give name and address of previous operator: ORYX ENERGY COMPANY, P.O. BOX 2880, DALLAS, TX 75221-2880

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease State, Federal or Fee	Lease No.
Pennzoil Fed. Com ~~Pennzoil~~	1	West LA RICA MORROW	(Federal)	NM12277

Location
Unit Letter J : 1980 Feet From The South Line and 17/80 Feet From The EAST Line
Section 29 Township 18S Range 34E, 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)
SUN ~~REFINING & MKTG~~ CO.	[X]	P.O. BOX 2436 ABILENE, TX 75605
Name of Authorized Transporter of Casinghead Gas	or Dry Gas [X]	Address (Give address to which approved copy of this form is to be sent)
NORTHERN NATURAL GAS CO.		P.O. BOX 2300 MIDLAND, TX 79702

If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When ?
	J	29	18S	34E	YES	9-2-81

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 (pitot, 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.

Signature: Gregory D. Cielinski
GREGORY D. CIELINSKI — PRESIDENT
Printed Name — Title
11-18-92 — (915) 683-8873
Date — Telephone No.

OIL CONSERVATION DIVISION

Date Approved: DEC 01 '92

By: ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

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.

PENNZOIL FED. COM

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

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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.

Operator	Well API No.
Oryx Energy Company	30-025-27013
Address	
P. O. Box 1861, Midland, TX 79702	

Reason(s) for Filing *(Check proper box)*

New Well ☐ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Operator ☐ Casinghead Gas ☐ Condensate ☒
☐ Other *(Please explain)*: Change Condensate Gatherer effective 2-1-91

If change of operator give name and address of previous operator _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease State, Federal or Fee	Lease No.
Pennzoil Federal Com.	1	La Rica Morrow, West (Gas)	Federal	NM-12277

Location

Unit Letter J : 1980 Feet From The South Line and 1780 Feet From The East Line

Section 29 Township 18-S Range 34-E, 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)*
Pride Pipeline ~~Limited Partnership~~	Box 2436, Abilene, TX 79604
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒	**Address *(Give address to which approved copy of this form is to be sent)***
Northern Natural Gas Co.	Box 2300, Midland, TX 69702

If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When ?
	J	29	18	34	Yes	9-2-81

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 *(pitot, 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.

Signature: Maria L. Perez
Printed Name: Maria L. Perez
Title: Proration Analyst
Date: 1-23-91
Telephone No.: 915/688-0375

OIL CONSERVATION DIVISION

Date Approved _____

By _____

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.

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

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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.

Operator	Well API No.
Oryx Energy Company	30-025-27013
Address	
P. O. Box 1861, Midland, Texas 79702	

Reason(s) for Filing (Check proper box) — Other (Please explain)

New Well ☐ — Change in Transporter of:
Recompletion ☐ — Oil ☒ Dry Gas ☐
Change in Operator ☐ — Casinghead Gas ☐ Condensate ☐

Change Oil Gatherer effective 9-1-89

If change of operator give name and address of previous operator _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease State, Federal or Fee	Lease No.
Pennzoil Federal Com.	1	La Rica Morrow, West (Gas)		NM-12277

Location
Unit Letter J : 1980 Feet From The South Line and 1780 Feet From The East Line
Section 29 Township 18-S Range 34-E , 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)
Enron Oil Trading & Transportation	Box 1188, Houston, Tx. 77251-1188
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒	**Address (Give address to which approved copy of this form is to be sent)**
Northern Natural Gas Co.	Box 2300, Midland, Tx 79702

If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When ?
	J	29	18	34	Yes	9-2-81

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.

Signature _____
Maria L. Perez — Accountant
Printed Name — Title
8-8-89 — 915-688-0375
Date — Telephone No.

OIL CONSERVATION DIVISION

Date Approved AUG 17 1989

By ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

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.

H

PN 652736

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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	GAS		
OPERATOR			
PRORATION OFFICE			

Form C-104
Revised 10-01-78
Format 06-01-83
Page 1

OIL CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.

Operator: SUN EXPLORATION & PRODUCTION CO.

Address: P.O. Box 1861, Midland, Texas 79702

Reason(s) for filing (Check proper box)
- [ ] New Well
- [ ] Recompletion
- [ ] Change in Ownership
- Change in Transporter of:
  - [X] Oil
  - [ ] Casinghead Gas
  - [ ] Dry Gas
  - [ ] Condensate

Other (Please explain): CHANGE TO BE EFFECTIVE JUNE 1, 1984

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

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease (State, Federal or Fee)	Lease No.
Pennzoil Fed. Comm	1	West La Rica Morrow	Fed	NM12277

Location
Unit Letter J : 1980 Feet From The South Line and 1780 Feet From The East

Line of Section 29 Township 18S Range 34E , NMPM, Lea County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil [ ] or Condensate [X]	Address (Give address to which approved copy of this form is to be sent)
Sun Refining & Marketing Co.	P.O. Box 3187 Longview, Texas 75606
Name of Authorized Transporter of Casinghead Gas [ ] or Dry Gas [XX]	Address (Give address to which approved copy of this form is to be sent)
Northern Natural Gas Co.	P.O. Box 2300 Midland, Texas 79702

If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	J	29	18	34	Yes	9-2-81

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.

Doris Williams
(Signature)

Accountant
(Title)

May 14, 1984
(Date)

OIL CONSERVATION DIVISION

APPROVED MAY 16 1984, 19 ____

BY ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

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.

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 *(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)*

OIL WELL

Date First New Oil Run To Tanks	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

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	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-11
Effective 1-1-65

I.

Operator: Sun Exploration & Production Co.

Address: P.O. Box 1861, Midland, Texas 79702

Reason(s) for filing *(Check proper box)*
- New Well ☐
- Recompletion ☐
- Change in Ownership ☐
- Change in Transporter of: Oil ☐ Dry Gas ☐ Casinghead Gas ☐ Condensate ☐

Other *(Please explain)*: Name Change Only from Sun Oil Company

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

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease (State, Federal or Fee)	Lease No.
Pennzoil Federal Com.	1	La Rica Morrow, West (Gas)	Fed	NM12277

Location: Unit Letter J ; 1980 Feet From The South Line and 1780 Feet From The East

Line of Section 29 Township 18-S Range 34-E , NMPM, Lea County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☒: The Permian Corporation
Address *(Give address to which approved copy of this form is to be sent)*: P.O. Box 1183, Houston, Texas 77001

Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒: Northern Natural Gas Company
Address *(Give address to which approved copy of this form is to be sent)*: P.O. Box 3316, Midland, Texas 79701

If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	J	29	18	34		

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

(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)

OIL WELL

Date First New Oil Run To Tanks	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 *(pitot, 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.

Dee Ann Kemp *(Signature)*

Accounting Asst. II *(Title)*

3-8-82 *(Date)*

OIL CONSERVATION COMMISSION

APPROVED MAR 9 1982, 19 _____

BY _____

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

ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-1-78

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator
Sun Oil Company (Delaware)

Address
P. O. Box 30, Room 3017, Dallas, Texas 75221

Reason(s) for filing (Check proper box)
New Well [XX] Change in Transporter of: Oil [ ] Dry Gas [ ]
Recompletion [ ] Casinghead Gas [ ] Condensate [ ]
Change in Ownership [ ]

Other (Please explain)
Request for allowable and to designate transporter of gas.

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

DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
Pennzoil Federal Com.	1	West La Rica Morrow Gas Pool	State, Federal or Fee Federal	NM12277

Location
Unit Letter J : 1980 Feet From The East Line and 1780 Feet From The East

Line of Section 29 Township 18S Range 34E , NMPM, Lea County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil [ ] or Condensate [XX]	Address (Give address to which approved copy of this form is to be sent)
Permian Corp.	P. O. Box 1183, Houston, Texas 77001
Name of Authorized Transporter of Casinghead Gas [ ] or Dry Gas [XX]	Address (Give address to which approved copy of this form is to be sent)
Northern Natural Gas Company	Box 2300, Midland, Texas 79702

If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	J	29	18S	34E	Yes	9/2/81

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

COMPLETION DATA

Designate Type of Completion – (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
		X	X					

Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
8/27/80	1/05/81	13694	13644
Elevations (DF, RKB, RT, GR, etc.)	**Name of Producing Formation**	**Top Oil/Gas Pay**	**Tubing Depth**
3970 GR	Morrow	13388	13300
Perforations			**Depth Casing Shoe**
13388' - 13400'			13644

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17½	13-3/8	353	300
11	8-5/8	5198	1800
7 7/8	5-1/2	13644	925
	2-7/8	13300	

TEST DATA AND REQUEST FOR ALLOWABLE

(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)

OIL WELL

Date First New Oil Run To Tanks	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
840	24	50	47.9
Testing Method (pitot, back pr.)	**Tubing Pressure (Shut-in)**	**Casing Pressure (Shut-in)**	**Choke Size**
Back Pressure	4000	1100	16/64

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.

D. R. AUTRY (Signature)
STAFF PROFESSIONAL OPERATIONS ENGINEER (Title)
September 3, 1981 (Date)

OIL CONSERVATION DIVISION

APPROVED _____, 19 _____

BY Orig. Signed by Jerry Sexton

TITLE Dist. I, Supv

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.

OIL CONSERVATION DIVISION

BOX 1980

HOBBS, NEW MEXICO

NOTICE OF GAS CONNECTION

DATE September 24, 1981

This is to notify the Oil Conservation Division that connection for the purchase of gas from the ~~Sunmark Exploration~~ Sun Oil Co., Pennzoil Fed. Com. #1.
Operator Lease

J, 29 - 18 - 34, Morrow, Northern Natural Gas Company,
Well Unit S.T.R. Pool Name of Purchaser

was made on 9/16/81,
Date

Northern Natural Gas Company
Purchaser

Robert M. Walker
Representative

Gas Contract Specialist
Title

cc: To Operator
Oil Conservation Division-Santa Fe

Form 9-330
(Rev. 5-63)

COPY TO O. C. C.

SUBMIT IN DUPLICATE* (other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R355.5.

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

WELL COMPLETION OR RECOMPLETION REPORT AND LOG*

RECEIVED
FEB 6 1981
U.S. GEOLOGICAL SURVEY
HOBBS, NEW MEXICO

5. LEASE DESIGNATION AND SERIAL NO.: NM-12277

6. IF INDIAN, ALLOTTEE OR TRIBE NAME:

1a. TYPE OF WELL: OIL WELL ☐ GAS WELL ☒ DRY ☐

b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other

7. UNIT AGREEMENT NAME:

8. FARM OR LEASE NAME: PENNZOIL FEDERAL COM.

2. NAME OF OPERATOR: Sun Oil Company (Delaware)

9. WELL NO.: 1

3. ADDRESS OF OPERATOR: P. O. Box 30, Room 3017, Dallas, Texas 75221

10. FIELD AND POOL, OR WILDCAT: UNDESIG LA RICA MORROW GAS

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*
At surface: 1980' FSL & 1780' FEL of SEC 29
At top prod. interval reported below: Same
At total depth: Same

11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA: SEC 29,T18S,R34E; UNIT LTR: J

14. PERMIT NO.	DATE ISSUED	12. COUNTY OR PARISH	13. STATE
30-025-27012	8-20-80	LEA	NEW MEXICO

15. DATE SPUDDED	16. DATE T.D. REACHED	17. DATE COMPL. (Ready to prod.)	18. ELEVATIONS (DF, RKB, RT, GR, ETC.)*	19. ELEV. CASINGHEAD
8-27-80	10-30-80	1-05-81	3970 GR	3971

20. TOTAL DEPTH, MD & TVD	21. PLUG, BACK T.D., MD & TVD	22. IF MULTIPLE COMPL., HOW MANY*	23. INTERVALS DRILLED BY	ROTARY TOOLS	CABLE TOOLS
13694	13644	-	→	0-13694	-

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*
13388-13400 Undesig. La Rica Morrow

25. WAS DIRECTIONAL SURVEY MADE: No

26. TYPE ELECTRIC AND OTHER LOGS RUN
DLL/SFL, CNL/FD, CBL, RFT

27. WAS WELL CORED: No

28. CASING RECORD (Report all strings set in well)

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
13-3/8	48	353	17½	300	
8-5/8	32	5198	11	1800	
5½	17,20	13046	7-7/8	925	

ACCEPTED FOR RECORD
FEB 10 1981
U.S. GEOLOGICAL SURVEY

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)

30. TUBING RECORD

SIZE	DEPTH SET (MD)	PACKER SET (MD)
2-7/8	13300	13300

31. PERFORATION RECORD (Interval, size and number)
13388-13400 w/25-.50" shots

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
13388-13400	500 gal 15% HCL
13388-13400	3800 gal 7½% HCL

33.* PRODUCTION

DATE FIRST PRODUCTION	PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)	WELL STATUS (Producing or shut-in)
12-15-80	Flowing	shut-in

DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD →	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
12-17-80	24	16/64		42	840	0	20,000

FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE →	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)
1660	1100		42	840	0	47.9

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)
Vented

TEST WITNESSED BY: Consultant

35. LIST OF ATTACHMENTS
Logs, DST, BHP, 4-point test (See Packing List; data being sent under separate cover.)

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records

SIGNED: J. R. APPLEY TITLE: Staff Professional Operations Engineer DATE: January 16, 1981

*(See Instructions and Spaces for Additional Data on Reverse Side)

MM

ERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-1-78

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator
Sun Oil Company (Delaware)

Address
P. O. Box 30, Room 3017, Dallas, Texas 75221

Reason(s) for filing (Check proper box)
New Well [X]
Recompletion [ ]
Change in Ownership [ ]
Change in Transporter of: Oil [ ] Dry Gas [ ] Casinghead Gas [ ] Condensate [ ]

Other (Please explain)
Special - Approval to transport 100 barrels condensate produced during completion testing.

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

DESCRIPTION OF WELL AND LEASE

West La Rica Morrow Gas R-6657 5-1-81

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
Pennzoil Federal Com.	1	Undesignated La Rica Morrow Gas	State, Federal or Fee Federal	NM12277

Location
Unit Letter J : 1980 Feet From The East Line and 1780 Feet From The East

Line of Section 29 Township 18S Range 34E , NMPM, Lea County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil [ ] or Condensate [X]	Address (Give address to which approved copy of this form is to be sent)
Permian Corp.	P. O. Box 1183, Houston, Texas 77001
Name of Authorized Transporter of Casinghead Gas [ ] or Dry Gas [ ]	Address (Give address to which approved copy of this form is to be sent)
not known	

If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	J	29	18S	34E	No	±90 days

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

COMPLETION DATA

Designate Type of Completion – (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
		X	X					

Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
8/27/80	1/05/81	13694	13644
Elevations (DF, RKB, RT, GR, etc.)	**Name of Producing Formation**	**Top Oil/Gas Pay**	**Tubing Depth**
3970 GR	Morrow	13388	13300
Perforations			**Depth Casing Shoe**
13388'-13400'			13644

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17½	13-3/8	353	300
11	8-5/8	5193	1800
7-7/8	5½	13644	925
	2-7/8	13300	-

TEST DATA AND REQUEST FOR ALLOWABLE (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)

OIL WELL

Date First New Oil Run To Tanks	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
840	24	50	47.9
Testing Method (pitot, back pr.)	**Tubing Pressure (Shut-in)**	**Casing Pressure (Shut-in)**	**Choke Size**
Back pressure	4000	1100	16/64

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.

D. R. AUTRY (Signature)
Staff Professional Operations Engineer (Title)
January 16, 1981 (Date)

OIL CONSERVATION DIVISION

APPROVED _____, 19 _____

BY Orig. Signed By Jerry Sexton

TITLE Dist. Supv.

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.

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 issued by, or may 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 35.

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	TOP MEAS. DEPTH	TOP TRUE VERT. DEPTH
			See Hydrocarbon Analysis Log (See Packing List; data being sent under separate cover.)			

RECEIVED
FEB 17 1981
OIL CONSERVATION DIV.

U.S. GOVERNMENT PRINTING OFFICE: 1963—O-683636

FIELD _____ COUNTY Lea S TE N.M.

OPERATOR Sunmark Exploration Company ADDRESS P.O. Box 30, Dallas, Texas 75221

LEASE Pennzoil Federal Com WELL NO. 1

SURVEY 1980' FSL & 1780' FEL of Sec. 29-T18S-R34E

RECORD OF INCLINATION

DEPTH (FEET)	ANGLE OF INCLINATION (DEGREES)
150	3/4
350	3/4
850	3/4
1350	3/4
1840	1
2340	1
3150	1
3409	1-1/4
4285	3/4
4600	1
5101	1/2
5200	1/2
5800	3/4
6370	3/4
7750	1/2
8200	3/4
8700	3/4
9200	3/4
9830	3/4
11201	2
11718	1-3/4
11954	1-1/2
12208	1-3/4
13235	1/4
13680	1/4

Certification of personal knowledge inclination data:

I hereby certify that I have personally assembled the data and facts placed on this form, and such information given above is true and complete to the best of my knowledge.

SUNMARK EXPLORATION COMPANY

BY: R L Harris

Ronald L. Harris
Sr. Drilling Engineer

Sworn and subscribed to before me the undersigned authority, on this the 13 day of January, 1981.

Toyah M. Ward Notary Public in and for Dallas County, Texas.

Toyah M. Ward
My commission expires 02/28/81.

9-331
1973

Form Approved.
Budget Bureau No. 42-R1424

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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 Form 9-331-C for such proposals.)

RECEIVED
FEB 6 1981
U.S. GEOLOGICAL SURVEY
HOBBS, NEW MEXICO

1. oil well ☐ gas well ☒ other

2. NAME OF OPERATOR
Sun Oil Company (Delaware)

3. ADDRESS OF OPERATOR
P. O. Box 30, Room 3017, Dallas, Texas 75221

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 1980' FSL & 1780' FEL of Sec. 29
AT TOP PROD. INTERVAL: Same
AT TOTAL DEPTH: Same

5. LEASE
NM-12277

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
PENNZOIL FEDERAL COM

9. WELL NO.
1

10. FIELD OR WILDCAT NAME
UNDESIG LA RICA MORROW GAS

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
SEC 29, T18S, R34E;UNIT LTR: J

12. COUNTY OR PARISH
LEA

13. STATE
NEW MEXICO

14. API NO.
30-025-27013

15. ELEVATIONS (SHOW DF, KDB, AND WD)
3970.0 GR

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:		SUBSEQUENT REPORT OF:
TEST WATER SHUT-OFF	☐	☐
FRACTURE TREAT	☐	☐
SHOOT OR ACIDIZE	☒	☐
REPAIR WELL	☐	☐
PULL OR ALTER CASING	☐	☐
MULTIPLE COMPLETE	☐	☐
CHANGE ZONES	☐	☐
ABANDON*	☐	☐
(other) Test Casing		☒

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

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.)

11/22/80

5½" 17 & 20# N-80 casing set to 13644', pressure tested casing with 3000# 30 minutes with no pressure loss.

Perforated casing 13388-400 w/25 shots
Acidized Morrow formation w/3800 gallons 7½% HCL w/250 SCFB Nitrogen in first stage.

Subsurface Safety Valve: Manu. and Type — Set @ — Ft.

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

SIGNED D. R. AUTRY TITLE Staff Professional Operations Engr. DATE January 16, 1981

(This space for Federal or State office use)

APPROVED BY — TITLE — DATE

CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD
FEB 10 1981
U.S. GEOLOGICAL SURVEY
ROSWELL, NEW MEXICO

*See Instructions on Reverse Side

Form 9-331
Dec. 1973

COPY TO O.C.C.

Form Approved.
Budget Bureau No. 42-R1424

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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 Form 9-331-C for such proposals.)

1. oil well ☐ gas well ☒ other

2. NAME OF OPERATOR
SUN OIL COMPANY (DELAWARE)

3. ADDRESS OF OPERATOR
P.O. BOX 30; DALLAS, TX 75221

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 1980' FSL & 1780' FEL OF SEC 29
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

5. LEASE
NM-12277

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
PENNZOIL FEDERAL COM

9. WELL NO.
1

10. FIELD OR WILDCAT NAME
UNDESIG LA RICA MORROW GAS

11. SEC., T., R., M. OR BLK. AND SURVEY OR AREA
SEC 29, T18S, R34E; UNIT LTR: J

12. COUNTY OR PARISH
LEA

13. STATE
NEW MEXICO

14. API NO.
30-025-27013

15. ELEVATIONS (SHOW DF, KDB, AND WD)
3970.0 GR

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF	☐		☐
FRACTURE TREAT	☐		☐
SHOOT OR ACIDIZE	☐		☐
REPAIR WELL	☐		☐
PULL OR ALTER CASING	☐		☐
MULTIPLE COMPLETE	☐		☐
CHANGE ZONES	☐		☐
ABANDON*	☐		☐
(other) SET PROD. CSG.			☒

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

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.)*

DRILLED 7-7/8" HOLE 5200' TO TD 13,694'. SET 5-1/2" O.D. NEW CASING AT 13,644' AS FOLLOWS:

TOP	2269'	5-1/2"	17# N-80 BTC
	8379'	5-1/2"	17# N-80 LTC
BOTTOM	3005'	5-1/2"	20# N-80 LTC FLOAT COLLAR AT 13,560'.

CEMENTED WITH 20 BBLS. SAM-4 SPACER, 925 SX CLASS H + 0.6% HALAD 22A + 0.4% CFR-2 + 5#/SK KCL. BUMP PLUG WITH 3700 PSI AT 12:38 P.M. ON 11-05-80. SET SLIPS AND RELEASED ROTARY RIG ON 11-06-80.

Subsurface Safety Valve: Manu. and Type ... Set @ ... Ft.

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

SIGNED R. L. HARRIS TITLE SR. DRILLING ENGR. DATE NOVEMBER 13, 1980

(This space for Federal or State office use)

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

ACCEPTED FOR RECORD
PETER W. CHESTER
NOV 19 1980
U.S. GEOLOGICAL SURVEY
ROSWELL, NEW MEXICO

*See Instructions on Reverse Side

Form 9-321
Dec. 1973

Form Approved.
Budget Bureau No. 42-R1424

UNITED S...TES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

5. LEASE
NM-12277

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
PENNZOIL FEDERAL COM

9. WELL NO.
1

10. FIELD OR WILDCAT NAME
UNDESIG LA RICA MORROW GAS

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
SEC 29, T18S, R34E; UNIT LTR: J

12. COUNTY OR PARISH
LEA

13. STATE
NEW MEXICO

14. API NO.
30-025-27013

15. ELEVATIONS (SHOW DF, KDB, AND WD)
3970.0 GR

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 Form 9-331-C for such proposals.)

1. oil well ☐ gas well ☒ other

2. NAME OF OPERATOR
SUN OIL COMPANY (DELAWARE)

3. ADDRESS OF OPERATOR
P.O. BOX 30; DALLAS, TX 75221

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 1980' FSL & 1780' [redacted] OF SEC 29
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:		SUBSEQUENT REPORT OF:
TEST WATER SHUT-OFF	☐	☐
FRACTURE TREAT	☐	☐
SHOOT OR ACIDIZE	☐	☐
REPAIR WELL	☐	☐
PULL OR ALTER CASING	☐	☐
MULTIPLE COMPLETE	☐	☐
CHANGE ZONES	☐	☐
ABANDON*	☐	☐
(other) CHANGE PLAN	X	

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

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.)*

PROPOSE TO INCREASE PERMITTED TOTAL DEPTH FROM 13,400' TO 14,000'.

INCREASED DEPTH MAY BE NECESSARY TO DRILL COMPLETELY THROUGH ALL OF THE MORROW ZONE.

Subsurface Safety Valve: Manu. and Type ... Set @ ... Ft.

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

SIGNED R. L. HARRIS TITLE SR. DRLG. ENGINEER DATE OCTOBER 28, 1980

(This space for Federal or State office use)

APPROVED BY (Orig. Sgd.) PETER W. CHESTER TITLE ACTING DISTRICT ENGINEER DATE NOV 4 1980

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

COPY TO O. G.

Form 9-331
Dec. 1973

Form Approved.
Budget Bureau No. 42-R1424

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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 Form 9-331-C for such proposals.)

1. oil well ☐ gas well ☒ other

2. NAME OF OPERATOR
SUN OIL COMPANY (DELAWARE)

3. ADDRESS OF OPERATOR
P.O. BOX 30; DALLAS, TX 75221

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 1980' FSL & 1780' FEL OF SEC 29
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

5. LEASE
NM-12277

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
PENNZOIL FEDERAL COM

9. WELL NO.
1

10. FIELD OR WILDCAT NAME
UNDESIG LA RICA MORROW GAS

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
SEC 29, T18S, R34E; UNIT LTR: J

12. COUNTY OR PARISH
LEA

13. STATE
NEW MEXICO

14. API NO.
30-025-27013

15. ELEVATIONS (SHOW DF, KDB, AND WD)
3970.0 GR

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:	SUBSEQUENT REPORT OF:
TEST WATER SHUT-OFF	☐
FRACTURE TREAT	☐
SHOOT OR ACIDIZE	☐
REPAIR WELL	☐
PULL OR ALTER CASING	☐
MULTIPLE COMPLETE	☐
CHANGE ZONES	☐
ABANDON*	☐
(other) INTER. CASING SETTING	☒

RECEIVED
SEP 25 1980
U. S. GEOLOGICAL SURVEY
HOBBS, NEW MEXICO

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

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.)*

DRILLED 11" HOLE TO 5200'. SET 5190' 8-5/8" O.D., 32#, K55, LTC NEW CONDITION CASING @ 5200'. FLOAT SHOE @ 5198' AND FLOAT COLLAR @ 5157'. CEMENTED TO SURFACE WITH 1500 SX. HALLIBURTON LITE + 15#/GAL. SALT + 15#/SK. GILSONITE + 1/4#/SK. FLOCELE (13.2 PPG & 1.92 CU. FT./SK. YIELD). TAILED IN WITH 300 SX. CLASS "C" + 2% CaCl. BUMPED PLUG WITH 2100 PSI 9/10/80. WOC 22 HRS. TESTED CASING TO 800 PSI 30 MINS. - OK. TESTED BLIND RAMS, PIPE RAMS, MANIFOLD, ALL LINES AND CONNECTIONS TO 5000 PSI FOR 30 MINS - NO BLEED OFF. TESTED HYDRIL PREVENTER TO 3000 PSI FOR 30 MINS. - NO BLEED OFF. USED YELLOW JACKET SERVICES FOR TESTING.

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED R. L. HARRIS TITLE SR. DRLG. ENGINEER DATE SEPTEMBER 23, 1980

(This space for Federal or State office use)

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

ACCEPTED FOR RECORD
SEP 29 1980
U.S. GEOLOGICAL SURVEY
ROSWELL, NEW MEXICO

*See Instructions on Reverse Side

9-331
1973

COPY TO O. G. C

Form Approved.
Budget Bureau No. 42-R1424

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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 Form 9-331-C for such proposals.)

1. oil well [ ] gas well [X] other
2. NAME OF OPERATOR
   SUN OIL COMPANY (DELAWARE)
3. ADDRESS OF OPERATOR
   P. O. BOX 30; DALLAS, TX 75221
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
   AT SURFACE: 1980' FSL & 1780' FEL OF SEC 29
   AT TOP PROD. INTERVAL:
   AT TOTAL DEPTH:
5. LEASE
   NM-12277
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME
   PENNZOIL FEDERAL COM
9. WELL NO.
   1
10. FIELD OR WILDCAT NAME
    UNDESIG LA RICA MORROW GAS
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
    SEC 29, 118S, R34E; UNIT LTR: J
12. COUNTY OR PARISH 13. STATE
    LEA NEW MEXICO
14. API NO.
    30-025-27013
15. ELEVATIONS (SHOW DF, KDB, AND WD)
    3970.0 GR
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF	[ ]		[ ]
FRACTURE TREAT	[ ]		[ ]
SHOOT OR ACIDIZE	[ ]		[ ]
REPAIR WELL	[ ]		[ ]
PULL OR ALTER CASING	[ ]		[ ]
MULTIPLE COMPLETE	[ ]		[ ]
CHANGE ZONES	[ ]		[ ]
ABANDON*	[ ]		[ ]
(other) SURFACE CASING SETTING			[X]

RECEIVED
SEP 8 1980
U. S. GEOLOGICAL SURVEY
HOBBS, NEW MEXICO

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

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.)*

SET 13-3/8" 48# H-40 STC SURFACE CASING AT 353' IN 17-1/2" HOLE ON 08-28-80. CEMENTED CASING WITH 300 SX CLASS C + 2% CA CL. CEMENT DID NOT CIRCULATE. RAN 1" PIPE DOWN ANNULUS AND FOUND TOP OF CEMENT AT 60' FROM SURFACE. CEMENTED TO SURFACE THROUGH 1" WITH 100 SX CLASS C + 2% CA CL. ANNULUS STOOD FULL OF CEMENT. WOC 20 HRS. TESTED CASING TO 600 PSI FOR 30 MINS. WITH RIG PUMP BY CLOSING PIPE RAMS ON DRILL PIPE. NO BLEED-OFF.

WELL SPUDDED ON 08-27-80.

Subsurface Safety Valve: Manu. and Type ____ Set @ ____ Ft.

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

SIGNED R. L. HARRIS TITLE SR. DRILLING ENGR. DATE SEPTEMBER 3, 1980

(This space for Federal or State office use)

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

ACCEPTED FOR RECORD
R. Chester
SEP 15 1980
U.S. GEOLOGICAL SURVEY
ROSWELL, NEW MEXICO

*See Instructions on Reverse Side

COPY TO O.C.C

Form 9-331
Dec. 1973

Form Approved.
Budget Bureau No. 42-R1424

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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 Form 9-331-C for such proposals.)

1. oil well ☐ gas well ☒ other

2. NAME OF OPERATOR
Sun Oil Company (Delaware)

3. ADDRESS OF OPERATOR
P.O. Box 30, Dallas, TX 75221

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 1980' FSL and 1780' FEL
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

5. LEASE
NM 12277

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Pennzoil Federal Com

9. WELL NO.
1

10. FIELD OR WILDCAT NAME
Undesig. LA Rica Morrow Gas

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
29-T18S-R34E

12. COUNTY OR PARISH
Lea

13. STATE
New Mexico

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
3970' GR

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:	SUBSEQUENT REPORT OF:
TEST WATER SHUT-OFF ☐	☐
FRACTURE TREAT ☐	☐
SHOOT OR ACIDIZE ☐	☐
REPAIR WELL ☐	☐
PULL OR ALTER CASING ☐	☐
MULTIPLE COMPLETE ☐	☐
CHANGE ZONES ☐	☐
ABANDON* ☐	☐
(other) Change Plan ☒	

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

RECEIVED
AUG 29 1980
U. S. GEOLOGICAL SURVEY
HOBBS, NEW MEXICO

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.)

Request approval to change intermediate hole size and casing design as follows:

Size of Hole	Size of Csg.	Wt./Ft.	Setting Depth	Quantity of Cmt.
11"	8-5/8"	32# K-55	5200'	Sufficient to circ.

Subsurface Safety Valve: Manu. and Type ... Set @ ... Ft.

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

SIGNED ... TITLE Senior Drlg. Engr DATE August 27, 1980

(This space for Federal or State office use)

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

APPROVED
SEP 5 1980
DISTRICT SUPERVISOR

*See Instructions on Reverse Side

Form 9-331 C
(May 1963)

COPY TO O. C. C.

SUBMIT IN TRIPLICATE*
(Other instructions reverse side)

Form approved.
Budget Bureau No. 42-R1425.

30-025-27013

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. TYPE OF WORK
DRILL [XX] DEEPEN [ ] PLUG BACK [ ]

b. TYPE OF WELL
OIL WELL [ ] GAS WELL [XX] OTHER SINGLE ZONE [XX] MULTIPLE ZONE [ ]

2. NAME OF OPERATOR
SUN OIL COMPANY (DELAWARE)

3. ADDRESS OF OPERATOR
P.O. BOX 30, DALLAS, TEXAS 75221

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*)
At surface
1980' FSL AND 1780' FEL OF SECTION 29
At proposed prod. zone

5. LEASE DESIGNATION AND SERIAL NO.
NM 12277

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
PENNZOIL FEDERAL COM

9. WELL NO.
1

10. FIELD AND POOL, OR WILDCAT
UNDESIG. LA RICA MORROW GAS

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
SEC.29, T.18 S., R.34 E.

14. DISTANCE IN MILES AND DIRECTION FROM NEAREST TOWN OR POST OFFICE*
26 MILES WEST OF HOBBS, NEW MEXICO

12. COUNTY OR PARISH: LEA
13. STATE: NEW MEXICO

15. DISTANCE FROM PROPOSED* LOCATION TO NEAREST PROPERTY OR LEASE LINE, FT. (Also to nearest drlg. unit line, if any)	16. NO. OF ACRES IN LEASE	17. NO. OF ACRES ASSIGNED TO THIS WELL
660'	120	320
18. DISTANCE FROM PROPOSED LOCATION* TO NEAREST WELL, DRILLING, COMPLETED, OR APPLIED FOR, ON THIS LEASE, FT.	**19. PROPOSED DEPTH**	**20. ROTARY OR CABLE TOOLS**
--	13,500	ROTARY

21. ELEVATIONS (Show whether DF, RT, GR, etc.)
3970.0 GR

22. APPROX. DATE WORK WILL START*
AUGUST 11, 1980

23. PROPOSED CASING AND CEMENTING PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	QUANTITY OF CEMENT
17-1/2"	13-3/8"	48# H-40	300	SUFFICIENT TO CIRCULATE
12-1/4"	8-5/8"	24,32,36# J-55	5200	SUFFICIENT TO CIRCULATE
7-7/8"	5-1/2"	17&20# N-80	13,500	500 SACKS

RECEIVED
AUG 11 1980
U. S. GEOLOGICAL SURVEY
HOBBS, NEW MEXICO

SEE ATTACHED FOR: SUPPLEMENTAL DRILLING DATA
BOP SKETCH
SURFACE USE AND OPERATIONS PLAN

GAS IS NOT DEDICATED.

DRILLING OPERATIONS AUTHORIZED ARE SUBJECT TO COMPLIANCE WITH ATTACHED "GENERAL REQUIREMENTS"

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 Arthur R. Brown TITLE Agent for SUN OIL COMPANY (DELAWARE) DATE August 7, 1980
Arthur R. Brown

(This space for Federal or State office use)

PERMIT NO. _____ APPROVAL DATE _____

APPROVED
AUG 20 1980
DISTRICT SUPERVISOR

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions On Reverse Side

MEXICO OIL CONSERVATION COMMIS N

WELL LOCATION AND ACREAGE DEDICATION PLAT

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

All distances must be from the outer boundaries of the Section

Operator	Lease	Well No.
SUN OIL COMPANY (DELAWARE)	PENNZOIL FEDERAL COM	1

Unit Letter	Section	Township	Range	County
J	29	18 SOUTH	34 EAST	LEA

Actual Footage Location of Well:
1980 feet from the SOUTH line and 1780 feet from the EAST line

Ground Level Elev.	Producing Formation	Pool	Dedicated Acreage:
3970.0	MORROW	UNDESIGNATED LA RICA MORROW GAS	320 Acres

1. Outline the acreage dedicated to the subject well by colored pencil or hachure marks on the plat below.

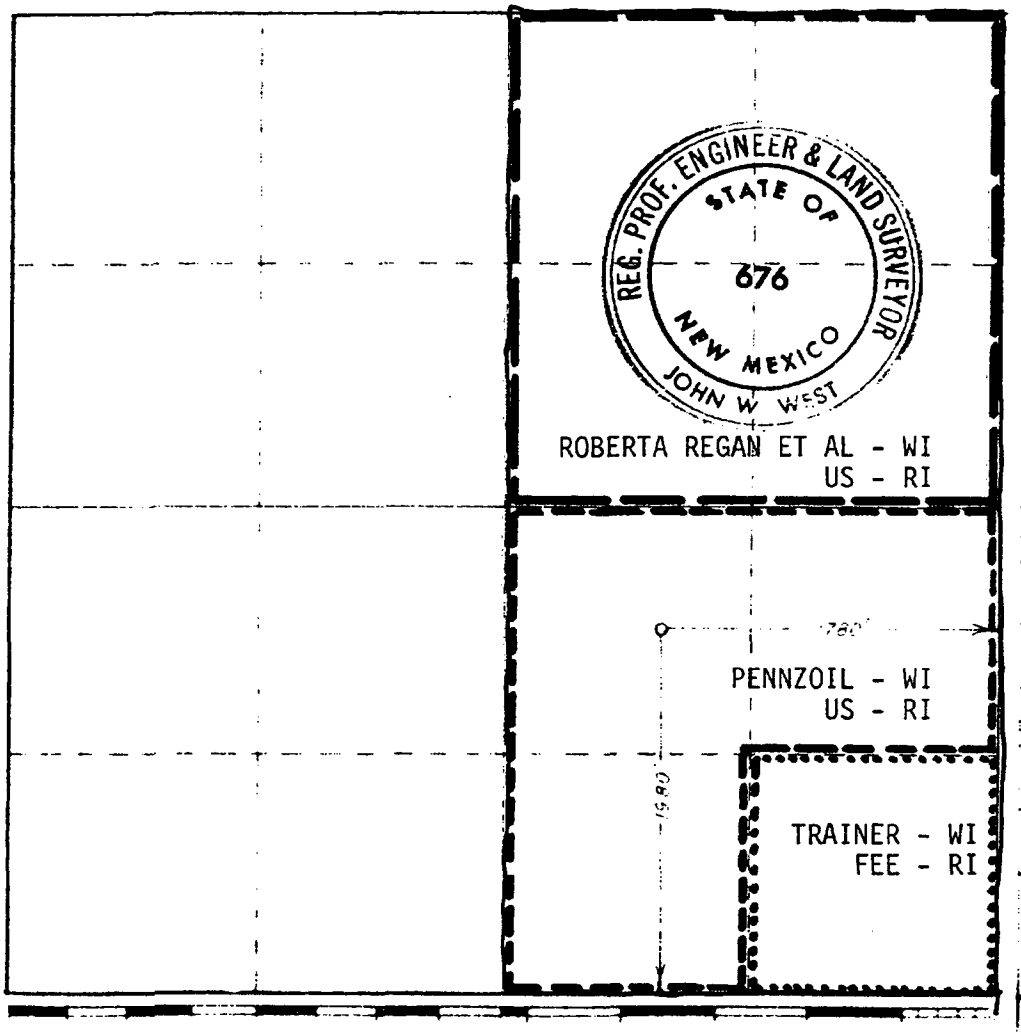
2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).

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 [XX] No If answer is "yes," type of consolidation TO BE COMMUNITIZED

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.

Name: Arthur R. Brown

Position: AGENT FOR

Company: SUN OIL COMPANY (DELAWARE)

Date: AUGUST 4, 1980

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: AUGUST 1, 1980

Registered Professional Engineer and/or Land Surveyor

Certificate No. JOHN W. WEST 676
PATRICK A. ROMERO 4662