

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

# NEW MEXICO OIL CONSERVATION COMMISSION

30-045-25621

Form C-101  
Revised 1-1-65

5A. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.
7. Unit Agreement Name Earl B. Sullivan
8. Farm or Lease Name
9. Well No. 2
10. Field and Pool, or Wildcat Harris, Gallup
12. County San Juan
19. Proposed Depth 5650'
19A. Formation Gallup
20. Rotary or C.T. Rotary
21. Elevations (Show whether DF, RT, etc.) 5505' GL
21A. Kind & Status Plug. Bond Statewide
21B. Drilling Contractor Unknown
22. Approx. Date Work will start As soon as permitted

## APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work b. Type of Well OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> 2. Name of Operator Amoco Production Company 3. Address of Operator 501 Airport Dr., Farmington, NM 87401 4. Location of Well UNIT LETTER H LOCATED 2130 FEET FROM THE North LINE AND 330 FEET FROM THE East LINE OF SEC. 26 TWP. 29N RGE. 11W LMPM	5. Type of Well DRILL <input checked="" type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input type="checkbox"/> OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> SINGLE ZONE <input checked="" type="checkbox"/> MULTIPLE ZONE <input type="checkbox"/>
---	--

23. PROPOSED CASING AND CEMENT PROGRAM					
SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
12-1/4"	11-3/4"	42#	300'	51 sx	Surface
9-7/8"	8-5/8"	28#	3200'	334 sx	Surface
6-3/4"	5-1/2"	15.5#	5650'	321 sx	2000'

Amoco proposes to drill the above well to further develop the Armenta Gallup reservoirs. The well will be drilled to the surface casing point using native mud. The well will then be drilled to TD with a low solids nondispersed mud system. Completion design will be based on open hole logs. Copies of all logs will be filed upon completion. Amoco's standard blowout prevention will be employed; see attached drawing for blowout preventer design.

The gas produced from this well has not been dedicated.

APPROVED  
BY  
SIGNED  
DATE

Sept. 16, 1983

RECEIVED  
MAR 1 1983  
OIL CON. DIV.  
DIST. 3

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. GIVE BLOWOUT PREVENTER PROGRAM, IF ANY.

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

Signed C. H. S. [Signature] Title District Engineer Date 3-15-83

(This space for State Use)

APPROVED BY [Signature] TITLE  DATE

CONDITIONS OF APPROVAL, IF ANY:

OIL CONSERVATION DIVISION

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

Form C-107  
Revised 10-1-78

All distances must be from the outer boundaries of the Section.

Operator <b>AMOCO PRODUCTION COMPANY</b>			Lease <b>EARL B. SULLIVAN</b>		Well No. <b>2</b>
Unit Letter <b>H</b>	Section <b>26</b>	Township <b>29N</b>	Range <b>11W</b>	County <b>San Juan</b>	
Actual Footage Location of Well: <b>2130</b> feet from the <b>North</b> line and <b>330</b> feet from the <b>East</b> line					
Ground Level Elev: <b>5505</b>	Producing Formation <b>Gallup</b>		Pool <b>ARMENTA GALLUP</b>		Dedicated Acreage: <b>40</b> Acres

1. Outline the acreage dedicated to the subject well by colored pencil or hatchure 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.

		2130'
		330'
Sec. 26		
<p>26</p> <p><b>RECEIVED</b></p> <p><b>OIL CONSERVATION DIVISION</b></p>		

Scale: 1"=1000'

CERTIFICATION	
I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.	
<i>Dale H. Shoemaker</i>	
Name	DALE H. SHOEMAKER
Position	DISTRICT ENGINEER
Company	AMOCO PRODUCTION COMPANY
Date	MARCH 15, 1983
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	February 24, 1983
Registered Professional Engineer and Land Surveyor	
<i>Fred B. Kerr Jr.</i>	
Certificate No.	3950

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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

OIL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-78

SUNDRY NOTICES AND REPORTS ON WELLS

DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO GELPER OR PLUG BACK TO A DIFFERENT RESERVOIR.  
USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- <input type="checkbox"/>		5. Indicate Type of Lease State <input type="checkbox"/> Fee <input checked="" type="checkbox"/>
2. Name of Operator Amoco Production Company		6. State Oil & Gas Lease No.
3. Address of Operator 501 Airport Drive, Farmington, NM 87401		7. Unit Agreement Name
4. Location of Well UNIT LETTER H 2130 FEET FROM THE north LINE AND 330 FEET FROM THE east LINE, SECTION 26 TOWNSHIP 29N RANGE 11W NMPM.		8. Farm or Lease Name Earl B. Sullivan
15. Elevation (Show whether DF, RT, GR, etc.) 5505' GL		9. Well No. 2
		10. Field and Pool, or Whdcat Armenta Gallup
		12. County San Juan

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  
NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>

SUBSEQUENT REPORT OF:

REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
CASING TEST AND CEMENT JOBS <input type="checkbox"/>	
OTHER Spud and set casing <input checked="" type="checkbox"/>	

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1703.

Spudded a 14-3/4" hole on 4-29-83 and drilled to 306'. Set 11-3/4", 42#, H-40 casing at 306' on 4-29-83 and cemented with 516 cu. ft. Class "B" cement containing 2% CaCl<sub>2</sub>. Circulated good cement to surface. Drilled a 7-7/8" hole to a TD of 5751'. Set 5-1/2", 15.5#, K-55 casing at 5751 on 5-5-83 and DV tool at 3016'. Cemented first stage with 770 cu. ft. Class "B", 50:50 POZ cement and tailed in with 177 cu. ft. Class "B" neat. Cemented second stage with 1822 cu. ft. Class "B" 65:35 POZ cement and tailed in with 118 cu. ft. Class "B" neat. Released the rig on 5-6-83.

Pressure tested surface casing to 500 psig.

\* Pressure tested 5-1/2" casing to 3800 psig.

RECEIVED

MAY 24 1983

OIL CON. DIV.  
DIST. 3

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

Original Signed By

D.D. Lawson

TITLE Dist. Admin. Supvr.

DATE 5/19/83

Original Signed by FRANK T. CHAVEZ

SUPERVISOR DISTRICT # 3

APPROVED BY  
CONDITIONS OF APPROVAL, IF ANY:

MAY 24 1983

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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

OIL CONSERVATION DIVISION

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

Form C-103  
Revised 10-1-78

5a. Indicate Type of Lease	
State <input type="checkbox"/>	Fee <input checked="" type="checkbox"/>

5. State Oil & Gas Lease No.

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 -" (FORM C-101) FOR SUCH PROPOSALS.)

1. <input checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER		7. Unit Agreement Name
2. Name of Operator Amoco Production Company		8. Farm or Lease Name Earl B. Sullivan
3. Address of Operator 501 Airport Drive, Farmington, NM 87401		9. Well No. 2
4. Location of Well UNIT LETTER <u>H</u> <u>2130</u> FEET FROM THE <u>north</u> LINE AND <u>330</u> FEET FROM THE <u>east</u> LINE, SECTION <u>26</u> TOWNSHIP <u>29N</u> RANGE <u>11W</u> NMPM.		10. Field and Pool, or Wildcat Armenta Gallup
15. Elevation (Show whether DF, RT, GR, etc.) 5505' GL		12. County San Juan

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  
NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐  
TEMPORARILY ABANDON ☐  
PULL OR ALTER CASING ☐  
OTHER ☐

PLUG AND ABANDON ☐  
CHANGE PLANS ☐  
OTHER ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐  
COMMENCE DRILLING OPER. ☐  
CASING TEST AND CEMENT JOBS ☐  
OTHER Completion ☒  
ALTERING CASING ☐  
PLUG AND ABANDONMENT ☐

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

Completion operations commenced on 5-7-83. Total depth of the well is 5751' and plugback depth is 5708'. Perforated interval 5264'-5622' with one jet shot per every two feet, for a total of 179 .38" holes. Fraced the entire Gallup interval with 156,000 gallons of 20 lb. gelled water containing 2% KCL, 1 gallon of surfactant per 1000 gallons of frac fluid, 2 millicuries of radioactive sand per 1000 gallons of 20 lb. gelled water, and 176,000 lbs. of 20-40 mesh sand. Flushed with 120 barrels of 20 lb. gelled water. Released rig on 5-13-83.

\* Pressure tested 5-1/2" casing to 3800 psig.

RECEIVED

MAY 24 1983

OIL CON. DIV.  
DIST. 3

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

SIGNED <u>Original Signed By</u> <u>D.D. Lawson</u>	TITLE <u>Dist. Admin. Supvr.</u>	DATE <u>5/19/83</u>
APPROVED BY <u>Original Signed by FRANK T. CHAVEZ</u>	TITLE <u>SUPERVISOR DISTRICT # 3</u>	DATE <u>MAY 24 1983</u>

<u>DEPTH</u>	<u>DEVIATION</u>
306'	1°
809'	1 1/2°
1304'	1°
1828'	3/4°
2383'	3/4°
2878'	1°
3279'	3/4°
3779'	1°
4273'	1°
4762'	1-1/4°
5226'	1-1/4°
5750'	1-3/4°

JUN 2 1963  
OIL CON. DIV.  
DIST. 3

THIS IS TO CERTIFY that to the best of my knowledge the above tabulation details the deviation tests taken on AMOCO PRODUCTION COMPANY'S Earl B. Sullivan No. 2, Armenta Gallup, 2130' FNL x 330' FEL, Section 26, T29N, R11W

THE STATE OF NEW MEXICO )  
 ) SS.  
COUNTY OF SAN JUAN )

SUBSCRIBED AND SWORN TO before me, a Notary Public in and for said  
County and State this 1 day of June, 19 83.

A. E. L. L. L. L.  
Notary Public

My Commission Expires: November-17, 1983

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

Form C-105  
Revised 11-1-83

# NEW MEXICO OIL CONSERVATION COMMISSION WELL COMPLETION OR RECOMPLETION REPORT AND LOG

5a. Indicate Type of Lease
State <input type="checkbox"/> Fee <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.

1a. TYPE OF WELL	OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> DRY <input type="checkbox"/>	7. Unit Agreement Name
b. TYPE OF COMPLETION	NEW WELL <input checked="" type="checkbox"/> WORK OVER <input type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input type="checkbox"/> DIFF. RESVR. <input type="checkbox"/> OTHER <input type="checkbox"/>	8. Farm or Lease Name
		Earl B. Sullivan

2. Name of Operator	Amoco Production Company	9. Well No.	2
3. Address of Operator		10. Field and Pool, or Wildcat	Armenta Gallup

4. Location of Well	UNIT LETTER <u>H</u> LOCATED <u>2130</u> FEET FROM THE <u>North</u> LINE AND <u>330</u> FEET FROM <u>East</u>	12. County	San Juan
	THE <u>East</u> LINE OF SEC. <u>26</u> TWP. <u>29N</u> RGE. <u>11E</u>		

15. Date Spudded	4-29-83	16. Date T.D. Reached	5-4-83	17. Date Compl. (Ready to Prod.)	5-13-83	18. Elevations (DF, RKB, RT, GR, etc.)	5518' KB	19. Elev. Casinghead	5505' GL
------------------	---------	-----------------------	--------	----------------------------------	---------	--	----------	----------------------	----------

20. Total Depth	5751'	21. Plug Back T.D.	5708'	22. If Multiple Compl., How Many		23. Intervals Drilled By	Rotary Tools <u>O-TD</u>	Cable Tools	
-----------------	-------	--------------------	-------	----------------------------------	--	--------------------------	--------------------------	-------------	--

24. Producing Interval(s), of this completion - Top, Bottom, Name	5264'-5622' Gallup	25. Was Directional Survey Made	Yes
---	--------------------	---------------------------------	-----

26. Type Electric and Other Logs Run	D/L-SP-GR FDC-CNL-Cal-GR	27. Was Well Cored	No
--------------------------------------	--------------------------	--------------------	----

28. CASING RECORD (Report all strings set in well)					
CASING SIZE	WEIGHT LB./FT.	DEPTH SET	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
11 3/4"	42# H-40	306'	14 3/4"	516 cw.ft. Class B W/2% Ca	C12Circ to surf
5 1/2"	15.5# K-55	5751'	7 7/8"	Stage 1) 770 cw. ft. Class B 50:50. Tailed	
				in W/177 cw ft. Class B neat 2) 1822 cw ft	
				Class B 65:35 POZ. Tailed in W/118 cw ft.	

29. LINER RECORD				TUBING RECORD			
SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN	SIZE	DEPTH SET	PACKER SET
					2 7/8"	5644'	

31. Perforation Record (Interval, size and number)	32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.
5264-5622' W/ 1 jsp 2f for a total of 179 holes .38" in diameter	DEPTH INTERVAL
	5264'-5622'
	AMOUNT AND KIND MATERIAL USED
	156,000 gals. 20# gelled water containing 2% KCL, 2 millicurie radioactive sand/1000 gals. water and 176,000# 20-40 mesh sand

33. PRODUCTION							
Date First Production	6-11-83	Production Method (Flowing, gas lift, pumping - Size and type pump)	Pumping	Well Status (Prod. or Shut-in)	SI		
Date of Test	6-12-83	Hours Tested	24	Choke Size	32/64	Prod'n. For Test Period	
Flow Tubing Press.	80 psi	Casing Pressure		Calculated 24-Hour Rate		Oil - Bbl.	9.9
						Gas - MCF	76
						Water - Bbl.	2.7
						Gas-Oil Ratio	7676
						Oil Gravity - API (Corr.)	41

34. Disposition of Gas (Sold, used for fuel, vented, etc.)	To be sold	Test Witnessed By	Ted's Field Service
--	------------	-------------------	---------------------

35. List of Attachments	
-------------------------	--

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

SIGNED	<u>Dist. Adm. Supvrs.</u>	DATE	7-1-83
--------	---------------------------	------	--------

# INSTRUCTIONS

This form is to be filed with the appropriate District Office of the Commission not later than 30 days after the completion of any newly-drilled or reworked well. It shall be accompanied by one copy of all electrical and radio-activity logs run on the well and a summary of all special tests conducted, including drill stem tests. All depths reported shall be measured depths. In the case of directionally drilled wells, true vertical depths shall also be reported. For multiple completions, Items 30 through 34 shall be reported for each zone. The form is to be filed in quintuplicate except on state land, where six copies are required. See Rule 1105.

## INDICATE FORMATION TOPS IN CONFORMANCE WITH GEOGRAPHICAL SECTION OF STATE

### Southeastern New Mexico

### Northwestern New Mexico

T. Any	T. Canyon	T. Ojo Alamo 480	T. Penn. "B"
T. Salt	T. Strawn	1230	T. Penn. "C"
T. Salt	T. Atoka	1710	T. Penn. "D"
T. Yates	T. Miss	3254	T. Leadville
T. 7 Rivers	T. Devonian	3388	T. Madison
T. Queen	T. Silurian	4024	T. Elbert
T. Grayburg	T. Montoya	4404	T. McCracken
T. San Andres	T. Simpson	5265	T. Ignacio Qtzite
T. Glorieta	T. McKee	Base Greenhorn	T. Granite
T. Paddock	T. Ellenburger	T. Dakota	T.
T. Minebry	T. Gr. Wash	T. Morrison	T.
T. Tubb	T. Granite	T. Todilto	T.
T. Drinkard	T. Delaware Sand	T. Entrada	T.
T. Abo	T. Bone Springs	T. Wingate	T.
T. Wolfcamp	T.	T. Chinle	T.
T. Penn.	T.	T. Permian	T.
T. Cisco (Bough C)	T.	T. Penn. "A"	T.

## OIL OR GAS SANDS OR ZONES

No. 1, from	to	No. 4, from	to
No. 2, from	to	No. 5, from	to
No. 3, from	to	No. 6, from	to

## IMPORTANT WATER SANDS

Include data on rate of water inflow and elevation to which water rose in hole.

No. 1, from	to	feet.
No. 2, from	to	feet.
No. 3, from	to	feet.
No. 4, from	to	feet.

## FORMATION RECORD (Attach additional sheets if necessary)

From	To	Thickness in Feet	Formation	From	To	Thickness in Feet	Formation
480	650	170	Ojo Alamo				
1230	1710	480	Fruitland				
1710	1830	120	Pictured Cliffs				
2338	3130	792	Chacra				
3254	3388	134	Cliffhouse				
3388	4024	636	Menefee				
4024	4404	380	Point Lookout				
5265	—	—	Gallup				

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	
PROMOTION OFFICE	

OIL CONSERVATION DIVISION

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

Form C-104  
Revised 10-01-78  
Format (5-01-83)  
Page 1

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

RECEIVED  
JAN 06 1984  
OIL DIV.

I. Operator  
Amoco Production Company  
Address  
501 Airport Drive, Farmington, New Mexico 87401  
Reason(s) for filing (Check proper box)  
☒ New Well  
☐ Re-completion  
☐ Change in Ownership  
Change in Transporter of:  
☐ Oil  
☐ Gas  
☐ Dry Gas  
☐ Condensate  
Other (Please explain)

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Earl B. Sullivan	Well No. 2	Pool Name, Including Formation Armenta Gallup	Kind of Lease State, Federal or Fee Fee	Lease
Location Unit Letter H : 2130 Feet From The North Line and 330 Feet From The East Line of Section 26 Township 29N Range 11W NMPM, San Juan Co.				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Plateau, Inc.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 489, Bloomfield, New Mexico 87413
Name of Authorized Transporter of Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Northwest Pipeline	Address (Give address to which approved copy of this form is to be sent) P.O. Box 90, Farmington, New Mexico 87499
If well produces oil or liquids, give location of tanks. Unit H Sec. 26 Twp. 29N Rge. 11W	Is gas actually connected? When No

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.

Original Signed By  
D.D. Lawson

District Administrative Supervisor

January 4, 1984

OIL CONSERVATION DIVISION

APPROVED JAN 06 1984

BY Original Signed by FRANK T. CHAVEZ

TITLE SUPERVISOR DISTRICT # 3

This form is to be filed in compliance with RULE 110.  
If this is a request for allowable for a newly drilled or old well, this form must be accompanied by a tabulation of the tests taken on the well in accordance with RULE 111.  
All sections of this form must be filled out completely for all new and recompleted wells.  
Fill out only Sections I, II, III, and VI for changes of well name or number, or transporter, or other such change of oil.  
Separate Forms C-104 must be filed for each pool in recompleted wells.



#### IV. COMPLETION DATA

Designate Type of Completion - (X)		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Area
		X		X				
Date Spudded	Date Compl. Ready to Prod.			Total Depth			P.B.T.D.	
4-29-83	5-13-83			5751'			5708'	
Elevations (DF, RKB, RT, CR, etc.)	Name of Producing Formation			Top Oil/Gas Pay			Tubing Depth	
5518KB	Armenta Gallup			5264'			5644'	
Perforations							Depth Casing Shoe	
5264'-5622', 1 jsp2f, .38" in diameter, 179 total holes							5751'	

#### TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CE.
14-3/4"	11-3/4" 42#, H-40	306'	430
7-7/8"	5-1/2" 15.5#, K-55	5751'	1675
	2-7/8"	5644'	

#### V. TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or able for this depth or be for full 24 hours)

Date First New Oil Run To Tanks 6-11-83	Date of Test 6-12-83	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24 hrs.	Tubing Pressure 80 psi	Casing Pressure	Choke Size 32/64
Actual Prod. During Test	Oil - Bbls. 9.9	Water - Bbls. 2.7	Gas - MCF 76

#### GAS WELL

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

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

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

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

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator: Amoco Production Company

Address: 501 Airport Drive, Farmington, NM 87401

Reason(s) for filing (Check proper box):

<input type="checkbox"/> New Well	Change in Transporter of:	<input type="checkbox"/> Oil	<input type="checkbox"/> Dry Gas
<input type="checkbox"/> Recompletion	<input checked="" type="checkbox"/> Casinghead Gas	<input type="checkbox"/> Condensate	
<input type="checkbox"/> Change in Ownership			

Other (Please explain):

RECEIVED  
AUG 23 1984  
OIL CON. DIV. I  
DIST. 3

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

II. DESCRIPTION OF WELL AND LEASE

Lease Name Earl B. Sullivan	Well No. 2	Pool Name, including Formation Armenta Gallup	Kind of Lease State, Federal or Fee	Lease No. Fee
Location				
Unit Letter <u>H</u> : <u>2130</u> Feet From The <u>North</u> Line and <u>330</u> Feet From The <u>East</u>				
Line of Section <u>26</u> Township <u>29N</u> Range <u>11W</u> , NMPM, San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Plateau, Inc.	Address (Give address to which approved copy of this form is to be sent) P. O. Box 489, Bloomfield, NM 87413
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> El Paso Natural Gas	Address (Give address to which approved copy of this form is to be sent) P. O. Box 990, Farmington, NM 87499
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When
	H 26 29N 11W No

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.

Original Signed By  
D.D. Lawson

(Signature)

District Administrative Supervisor

(Title)

8-20-84

(Date)

OIL CONSERVATION DIVISION

APPROVED AUG 23 1984 19  
BY Frank J. Quigley  
TITLE SUPERVISOR DISTRICT # 3

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.

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

NO. OF COPIES RECEIVED	
DATE	
FILE	
U.S.A.	
LAND OFFICE	
TRANSPORTER	OIL
OPERATION	GAS
PRODUCTION OFFICE	

OIL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-104  
Revised 10-01-78  
Format 06-01-83  
**RECEIVED**  
AUG 29 1986  
**OIL CON. DIV.**  
**DIST. 3**

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator <b>Amoco Production Company</b>	
Address <b>2325 East 30th Street Farmington, NM 87401</b>	
Reason(s) for filing (Check proper box)	Other (Please explain)
<input type="checkbox"/> New Well <input type="checkbox"/> Recompletion <input type="checkbox"/> Change in Ownership	Change in Transporter of: <input checked="" type="checkbox"/> Oil <input type="checkbox"/> casinghead Gas <input type="checkbox"/> Dry Gas <input type="checkbox"/> Condensate

If change of ownership give name  
and address of previous owner \_\_\_\_\_

II. DESCRIPTION OF WELL AND LEASE

Lease Name <b>Earl B. Sullivan</b>	Well No. <b>2</b>	Pool Name, including Formation <b>Armenta Gallup</b>	Kind of Lease State, Federal or Fee <b>Fee</b>	Lease No.
Location Unit Letter <b>H</b> : <b>2130</b> Feet From The <b>North</b> Line and <b>330</b> Feet From The <b>East</b> Line of Section <b>26</b> Township <b>29N</b> Range <b>11W</b> , N.M.P.M. <b>San Juan</b> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> <b>Permian Corporation Permian (Eff. 9 / 1 / 87)</b>	Address (Give address to which approved copy of this form is to be sent) <b>P.O. Box 1702 Farmington, NM 87499</b>	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> <b>El Paso Natural Gas Company</b>	Address (Give address to which approved copy of this form is to be sent) <b>Callar Service 4490 Farmington, NM 87499</b>	
If well produces oil or liquids, give location of tanks.	Unit <b>H</b>	Sec. <b>26</b>
	Twp. <b>29N</b>	Res. <b>11W</b>
	Is gas actually connected? <b>Yes</b>	
	When <b>08-29-84</b>	

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.

**BS Shaw**  
(Signature)  
**Administrative Supervisor**  
(Title)  
**08-27-86**  
(Date)

OIL CONSERVATION DIVISION  
AUG 30 1986

APPROVED \_\_\_\_\_  
BY **Frank J. Shaw**  
TITLE \_\_\_\_\_ SUPERVISOR DISTRICT **3**

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.

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

Operator <b>AMOCO PRODUCTION COMPANY</b>		Well API No. <b>300452562100</b>
Address <b>P.O. BOX 800, DENVER, COLORADO 80201</b>		
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)		
New Well <input type="checkbox"/>	Change in Transporter of:	
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/>	Dry Gas <input type="checkbox"/>
Change in Operator <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/>	Condensate <input checked="" type="checkbox"/>
If change of operator give name and address of previous operator		

II. DESCRIPTION OF WELL AND LEASE

Lease Name <b>EARL B. SULLIVAN</b>	Well No. <b>2</b>	Pool Name, including Formation <b>ARMENTA GALLUP</b>	Kind of Lease State, Federal or Fee	Lease No.
Location Unit Letter <b>H</b> : <b>2130</b> Feet From The <b>FNL</b> Line and <b>330</b> Feet From The <b>FEL</b> Line Section <b>26</b> Township <b>29N</b> Range <b>11W</b> , <b>NMPM</b> , <b>SAN JUAN</b> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) <b>3535 EAST 30TH STREET, FARMINGTON, CO 87401</b>
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) <b>P.O. BOX 1492, EL PASO, TX 79978</b>
Name of Authorized Transporter of Natural Gas <input type="checkbox"/>	
If well produces oil or liquids, give location of tanks.	Is gas actually connected? When?

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 DI/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 that 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	
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	
GAS WELL			
Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Bbls. Gas/MMCF
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 *D. W. Whaley*  
Doug W. Whaley, Staff Admin. Supervisor  
Printed Name \_\_\_\_\_ Title \_\_\_\_\_  
Date June 25, 1990 \_\_\_\_\_ 303-830-4280 \_\_\_\_\_  
Date \_\_\_\_\_ Telephone No. \_\_\_\_\_

OIL CONSERVATION DIVISION

Date Approved JUL 5 1990  
By *[Signature]*  
Title SUPERVISOR DISTRICT #3

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.

District I  
PO Box 1980, Hobbs, NM 88241-1980

District II  
811 South First, Artesia, NM 88210

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

District IV  
2040 South Pacheco, Santa Fe, NM 87505

State of New Mexico  
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION  
2040 South Pacheco  
Santa Fe, NM 87505

Form C-104

Revised October 18, 1994

Instructions on back

Submit to Appropriate District Office

5 Copies

☐ AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

<sup>1</sup> Operator name and Address <b>CROSS TIMBERS OPERATING COMPANY</b> 6001 Highway 64 Farmington, NM 87401		<sup>2</sup> OGRID Number 167067
		<sup>3</sup> Reason for Filing Code <i>11/198</i> Change of Operator <del>12/4/87</del>
<sup>4</sup> API Number 30-045-25621	<sup>5</sup> Pool Name ARMENTA GALLUP	<sup>6</sup> Pool Code 02290
<sup>7</sup> Property Code	<sup>8</sup> Property Name EARL B SULLIVAN	<sup>9</sup> Well Number 2

II. <sup>10</sup> Surface Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South Line	Feet from the	East/West line	County
H	26	29N	11W		2130	N	330	E	SJ

<sup>11</sup> 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
<sup>12</sup> Loc Code P	<sup>13</sup> Producing Method Code	<sup>14</sup> Gas Connection Date	<sup>15</sup> C-129 Permit Number	<sup>16</sup> C-129 Effective Date	<sup>17</sup> C-129 Expiration Date				

III. Oil and Gas Transporters

<sup>18</sup> Transporter OGRID	<sup>19</sup> Transporter Name and Address	<sup>20</sup> POD	<sup>21</sup> O/G	<sup>22</sup> POD ULSTR Location and Description

RECEIVED  
DEC 1 9 1997

IV. Produced Water

<sup>23</sup> POD	<sup>24</sup> POD ULSTR Location and Description

OIL CON. DIV.  
DIST. 3

V. Well Completion Data

<sup>25</sup> Spud Date	<sup>26</sup> Ready Date	<sup>27</sup> TD	<sup>28</sup> PSTD	<sup>29</sup> Perforation	<sup>30</sup> DHC,DC,MC
<sup>31</sup> Hole Size	<sup>32</sup> Casing and Tubing Size	<sup>33</sup> Depth Set	<sup>34</sup> Sacks Cement		

VI. Well Test Data

<sup>35</sup> Date New Oil	<sup>36</sup> Gas Delivery Date	<sup>37</sup> Test Date	<sup>38</sup> Test Length	<sup>39</sup> Tbg. Pressure	<sup>40</sup> Csg. Pressure
<sup>41</sup> Choke Size	<sup>42</sup> Oil	<sup>43</sup> Water	<sup>44</sup> Gas	<sup>45</sup> AOF	<sup>46</sup> Test Method

<sup>47</sup> 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: *Vaughn O. Vannerberg, II*

Printed Name: Vaughn O. Vannerberg, II

Title: Sr. Vice President-Land

Date: December 1, 1997 Phone: (505) 632-5200

OIL CONSERVATION DIVISION

Approved by: Frank T. Chavez

Title: Supervisor District #3

Approval Date:

<sup>48</sup> If this is a change of operator fill in the OGRID number and name of the previous operator

Previous Operator's Signature

Gail Jefferson

Printed Name

Amoco Production Company

Senior Administrative Staff Assistant

Title

OGRID# 000778

12/01/97

Date

District I  
1625 N. French Dr., Hobbs, NM 88240  
District II  
811 South First, Artesia, NM 88210  
District III  
1000 Rio Brazos Road, Aztec, NM 87410  
District IV  
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
Energy Minerals and Natural Resources

Oil Conservation Division  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

Form C-104B  
March 19, 2001

Submit 1 copy of the final affected wells  
list along with 1 copy of this form per  
number of wells on that list to  
appropriate District Office

### Change of Operator Name

OGRID: 167067  
Effective Date: 6/1/2001


#### Previous Operator Name and Information:

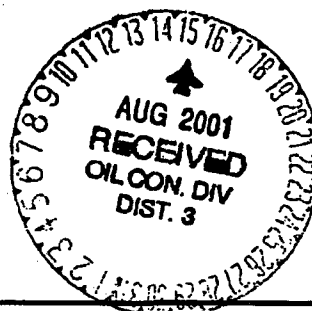
Name: Cross Timbers Operating Company  
Address: 2700 Farmington Ave  
Address: Building K, Suite 1  
City, State, Zip: Farmington, NM 87401

#### New Operator Name and Information:

New Name: XTO Energy Inc.  
Address: 2700 Farmington Ave  
Address: Building K, Suite 1  
City, State, Zip: Farmington, NM 87401

I hereby certify that the rules of the Oil Conservation Division have been complied with and that the information given on this form and the attached list of wells is true and complete to the best of my knowledge and belief.

Signature:   
Printed name: GARY L. MARKESTAD  
Title: VICE-PRESIDENT, SAN JUAN REGION  
Date: 5/23/01 Phone: 505-324-1090 x-4001



#### NMOCD Approval

Signature: \_\_\_\_\_  
Printed Name: \_\_\_\_\_  
District: \_\_\_\_\_  
Date: \_\_\_\_\_

Submit 3 Copies To Appropriate District  
Office  
District I  
1625 N. French Dr., Hobbs, NM 88240  
District II  
1301 W. Grand Ave., Artesia, NM 88210  
District III  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV  
1220 S. St. Francis Dr., Santa Fe, NM  
87505

State of New Mexico  
Energy, Minerals and Natural Resources

Form C-103  
Revised May 08, 2003

OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

WELL API NO. 30-045-25621
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name EARL B. SULLIVAN
8. Well Number
9. OGRID Number 167067
10. Pool name or Wildcat ARMENTA GALLUP

SUNDRY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-104) FOR SUCH PROPOSALS.)

1. Type of Well:

Oil Well ☐ Gas Well ☒ Other

2. Name of Operator

XTO ENERGY INC

3. Address of Operator

2700 FARMINGTON AVE, SUITE K-1, FARMINGTON, NM 87401

4. Well Location

Unit Letter H 2130 feet from the NORTH line and 330 feet from the EAST line

Section 26

Township 29N

Range 11W

NMPM SAN JUAN

County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)

5505' GR

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐

TEMPORARILY ABANDON ☒ CHANGE PLANS ☐

PULL OR ALTER CASING ☐ MULTIPLE COMPLETION ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

OTHER: ☐

13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

XTO Energy Inc plans to temporarily abandon this well per the attached procedure.

NOTIFY AZTEC OGD  
IN TIME TO WITNESS

submit chart

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

SIGNATURE Darrin Steed

Type or print name Darrin Steed

TITLE Regulatory Supervisor

DATE 9/15/03

Telephone No. 505-324-1090

(This space for State use)

APPROVED BY Chad H.

DEPUTY OIL & GAS INSPECTOR, DIST. JB

DATE SEP 17 2003

Conditions of approval, if any:

## **PLUGBACK PROCEDURE**

September 2, 2003

### **Earl B. Sullivan #2**

Armenta Gallup

2130' FNL and 330' FEL, Section 26, T29N, R11W  
San Juan County, New Mexico, API # 30-045-25621

**Note:** All cement volumes use 100% excess outside pipe and 50' excess inside. The stabilizing wellbore fluid will be 8.3 ppg, sufficient to balance all exposed formation pressures. All cement will be ASTM Type II, mixed at 15.6 ppg with a 1.18 cf/sx yield.

1. Install and/or test rig anchors. Prepare blow pit. Comply with all NMOCD, BLM and XTO safety rules and regulations. Conduct safety meeting for all personnel on location. MOL and RU daylight pulling unit. NU relief line and blow well down; kill with water as necessary.
2. Unseat pump and hot oil rods if necessary. Reseat pump and pressure test tubing to 1000#. POH and LD rods and pump. ND wellhead and NU BOP and stripping head; test BOP.
3. Release tubing anchor and TOH tallying and visually inspecting 2-7/8" tubing (5644'). If necessary LD tubing and use a workstring.
4. **Plug #1 (Gallup perforations, 5214' – 5114'):** TIH and set a 4-1/2" CIBP or CR at 5214'. Load casing with water and circulate well clean. Pressure test casing to 500#. If casing does not test, then spot or tag subsequent plugs as appropriate. Mix 17 sxs cement and spot a balanced plug above CIBP or CR to isolate the Gallup perforations and cover the Gallup top. PUH to 3330'.
5. **Plug #2 (Mesaverde top, 3330' – 3230'):** Mix 17 sxs cement and spot a balanced plug inside the casing to cover the Mesaverde top. PUH to 2388'.
6. **Plug #3 (Chacra top, 2388' – 2288'):** Mix 17 sxs cement and spot a balanced plug inside the casing to cover the Chacra top. TOH with tubing.
7. Set a 5-1/2" CIBP at 1950'.
8. Pressure test casing to 500 psig for 30 minutes.
9. ND BOP and NU wellhead. RD and MOL.



## Earl B. Sullivan #2

**Current**  
Armenta Gallup

2130' FNL & 330' FEL, Section 26, T-29-N, R-11-W  
San Juan County, NM / API #30-045-25621

Today's Date: 9/2/03  
Spud: 4/29/83  
Completed: 5/13/83  
Elevation: 5518' KB

14-3/4" hole

Circulated 10 bbls cement to surface

11-3/4" 42#, H-40 Casing set @ 306'  
Cement with 430 sxs, circulated to surface

Ojo Alamo @ 480'

Kirtland @ 650'

Fruitland @ 1220'

Pictured Cliffs @ 1710'

Chacra @ 2338'

2-7/8" Tubing set at @ 5644'  
(167 joints above TAC then 12 more to SN)

Mesaverde @ 3280'

DV Tool @ 3016'  
Cement with 1940 cf  
Circulated to surface  
TOC @ DV Tool (Calc., 75%)

Gallup @ 5265'

Gallup Perforations:  
5264' - 5622'

7-7/8" hole

5-1/2" 15.5#, K-55 Casing set @ 5751'  
1<sup>st</sup> Stage: Cement with 947 cf

PBTD 5708'  
TD 5751'

**Earl B. Sullivan #2**  
**Proposed Gallup P&A**  
Armenta Gallup

2130' FNL & 330' FEL, Section 26, T-29-N, R-11-W  
San Juan County, NM / API #30-045-25621

Today's Date: 9/2/03  
Spud: 4/29/83  
Completed: 5/13/83  
Elevation: 5518' KB

14-3/4" hole

Ojo Alamo @ 480'

Kirtland @ 650'

Fruitland @ 1220'

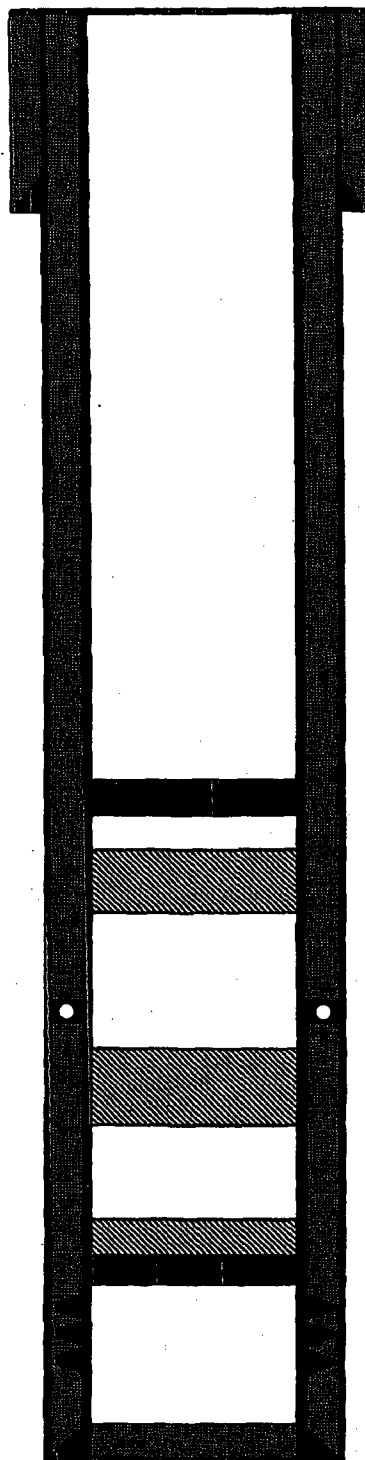
Pictured Cliffs @ 1710'

Chacra @ 2338'

Mesaverde @ 3280'

Gallup @ 5265'

7-7/8" hole



Circulated 10 bbls cement to surface

11-3/4" 42#, H-40 Casing set @ 306'  
Cement with 430 sxs, circulated to surface

Set CIBP @ 1950'

Plug #3: 2388' - 2288'  
Cement with 17 sxs

DV Tool @ 3018'  
Cement with 1940 cf  
Circulated to surface  
TOC @ DV Tool (Calc., 75%)

Plug #2: 3330' - 3230'  
Cement with 17 sxs

Plug #1: 5214' - 5114'  
Cement with 17 sxs

Set CIBP or Cmt Ret @ 5214'

Gallup Perforations:  
5264' - 5622'

5-1/2" 15.5#, K-55 Casing set @ 5751'  
1st Stage: Cement with 947 cf

PBDT 5708'  
TD 5751'

Submit 3 Copies To Appropriate District  
Office  
District I  
1625 N. French Dr., Hobbs, NM 88240  
District II  
1301 W. Grand Ave., Artesia, NM 88210  
District III  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV  
1220 S. St. Francis Dr., Santa Fe, NM  
87505

State of New Mexico  
Energy, Minerals and Natural Resources

OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

Form C-103  
Revised May 08, 2003

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) 1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other		WELL API NO. 30-045-25621
2. Name of Operator XTO Energy Inc.		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
3. Address of Operator 2700 Farmington Ave., Bldg K, Ste. 1, Farmington, NM 87401		6. State Oil & Gas Lease No.
4. Well Location Unit Letter <u>H</u> : <u>2130</u> Feet from the <u>NORTH</u> line and <u>330</u> Feet from the <u>EAST</u> line Section <u>26</u> Township <u>29N</u> Range <u>11W</u> NMPM <u>SAN JUAN</u> County		7. Lease Name or Unit Agreement Name EARL B SULLIVAN
		8. Well Number 2
		9. OGRID Number 167067
		10. Pool name or Wildcat ARMENTA GALLUP

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data	
<b>NOTICE OF INTENTION TO:</b> PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPLETION <input type="checkbox"/> OTHER: <input type="checkbox"/>	<b>SUBSEQUENT REPORT OF:</b> REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> PLUG AND ABANDONMENT <input type="checkbox"/> CASING TEST AND CEMENT JOB <input type="checkbox"/> OTHER: TEMPORARILY ABANDON <input checked="" type="checkbox"/>

13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

XTO Energy Inc. TA'd this well in the following manner:

- 1) Notified Charlie Perrin w/NMOCD @ 2:00 p.m., 10/17/03 regarding start of TA work.
- 2) Charlie Perrin w/NMOCD approved cutting tbg off above TAC & abandoning TAC, 12 jts 2-7/8" tbg, SN & 1 jt 2-7/8" tbg & NC in hole.
- 3) Found TAC @ 5241'. Cut tbg @ 5233'. NU & tstd BOP. POH w/tbg, RIH w/4-1/2" gauge ring to 4150'. POH.
- 4) TIH w/DHS CIRC & set @ 5190'. PT tbg to 1000 psig; held OK. Stung out CIRC.
- 5) Att PT csg to 500 psig; bled off. Mixed & ppd 25 sx Type II cmt w/2% CaCl2 @ 15.6 ppg fr/5190' - 4969'. WOC. Tgd TOC @ 5048'.
- 6) Att PT csg to 500 psig; bled off. Mixed & ppd 25 sx Type II cmt w/2% CaCl2 @ 15.6 ppg fr/3347' - 3126'. WOC. Tgd TOC @ 3136'.
- 7) Att PT csg to 500 psig; held OK. Mixed & ppd 19 sx Type II cmt @ 15.6 ppg fr/2406' - 2238'.
- 8) Set CIBP @ 1955'. PT csg to 700 psig for 30 min on chart; held OK. PT witnessed by Henry Villaneuva w/NMOCD.
- 9) RDMO rig & cmt equip.

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

SIGNATURE Darrin Steed TITLE REGULATORY SUPERVISOR DATE 10/31/03

Type or print name DARRIN STEED

Telephone No. (505) 324-1090

(This space for State use)

APPROVED BY Charlie Perrin TITLE DEPUTY OIL & GAS INSPECTOR, DIST. 10

NOV - 7 2003  
DATE

Conditions of approval, if any: