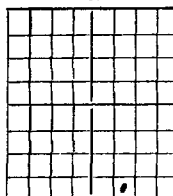
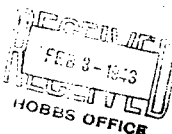


NEW MEXICO OIL CONSERVATION COMMISSION

Santa Fe, New Mexico

AREA 40 ACRES
LOCATE WELL CORRECTLY

WELL RECORD



Mail to Oil Conservation Commission, Santa Fe, New Mexico, or its proper agent not more than twenty days after completion of well. Follow instructions in the Rules and Regulations of the Commission. Indicate questionable data by following it with (P). SUBMIT IN TRIPlicate. FORM C-110 WILL NOT BE APPROVED UNTIL FORM C-105 IS PROPERLY FILLED OUT.

Artesia, New Mexico
Company or Operator
Russell
Well No. 7-A in SE 1/4 Sec. 35 of T. 17-S
N. M. P. M. Artesia Field, Artesia, Bddy County
Well is 4950 feet south of the North line and 1650 feet west of the East line of Sec. 35
If State land the oil and gas lease is No. Assignment No.
If patented land the owner is Address
If Government land the permittee is Russell Address
The Lessee is Eaton Bros. Address Artesia, New Mex.
Drilling commenced Dec. 14 1942 Drilling was completed Dec. 30th 1942
Name of drilling contractor Eaton Bros. Address Artesia, New Mex.
Elevation above sea level at top of casing feet.
The information given is to be kept confidential until 19

OIL SANDS OR ZONES

No. 1, from 480 to 455 No. 4, from to
No. 2, from 470 to 475 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 11000 to feet.
No. 2, from to feet.
No. 3, from to feet.
No. 4, from to feet.

CASING RECORD

SIZE	WEIGHT PER FOOT	THREADS PER INCH	MAKE	AMOUNT	KIND OF SHOE	CUT & FILLED FROM	PERFORATED FROM TO	PURPOSE
8 1/2"	28	8	Halliburton	432				

MUDGING AND CEMENTING RECORD

SIZE OF HOLE	SIZE OF CASING	WHERE SET	NO SACKS OF CEMENT	METHOD USED	MUD GRAVITY	AMOUNT OF MUD USED
10"	8 1/2"	432	25	Halliburton		50 sacks

PLUGS AND ADAPTERS

Heaving plug—Material Length Depth Set
Adapters—Material Size

RECORD OF SHOOTING OR CHEMICAL TREATMENT

SIZE	SHELL USED	EXPOSURE OR CHEMICAL USED	QUANTITY	DATE	DEPTH SHOT OR TREATED	DEPTH CLEANED OUT
		acidized with 1000 gallons, 15% acid from 450' to 475'				

Results of shooting or chemical treatment

RECORD OF DRILL-STEM AND SPECIAL TESTS

If drill-stem or other special tests or deviation surveys were made, submit report on separate sheet and attach hereto.

TOOLS USED

Rotary tools were used from feet to feet, and from feet to feet
Cable tools were used from 0 feet to 477 feet, and from feet to feet

PRODUCTION

Put to producing Dec. 30th, 1942
The production of the first 24 hours was 12 Bbls. per hour of fluid of which 100% was oil; % emulsion; % water, and % sediment. Gravity, Be. 36
If gas well, cu. ft. per 24 hours 1480 Gallons gasoline per 1,000 cu. ft. of gas
Rock pressure, lbs. per sq. in.

EMPLOYEES

H. E. Fleming, Driller
L. Davis, Driller
R. H. Wiley, Driller
Ralph Yoder, Driller

FORMATION RECORD ON OTHER SIDE

I hereby swear or affirm that the information given herewith is a complete and correct record of the well and all work done on it so far as can be determined from available records.

Artesia, New Mex.
Subscribed and sworn to before me this 29 day of Jan, 1943
Notary Public
My Commission expires Aug 19, 1944
Name Eaton Bros.
Position Secretary
Representing Eaton Bros.
Company or Operator
Address Artesia, New Mex.

Cumulative
Production
as of 12-31-1993
1280 BO
42 BW

FORMATION RECORD

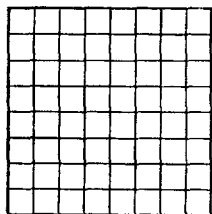
FROM	TO	THICKNESS IN FEET	FORMATION
0	70	70	Anhydrite Red Rock
70	123	53	Anhydrite
123	145	22	Anhydrite
145	210	65	Red Rock
210	250	40	Red Rock
250	285	35	Broken Anhydrite
285	295	10	Red Rock
295	310	15	Red Rock
310	345	35	Anhydrite
345	365	20	Red Rock
365	380	15	Anhydrite
380	385	5	Red Rock
385	427	42	Anhydrite
427	432	5	Anhydrite
432	437	5	Anhydrite
437	450	13	Anhydrite
450	455	5	Oil
455	470	15	Anhydrite
470	475	5	Oil
475	477	2	Anhydrite.

U. S. LAND OFFICE **Las Cruces**
SERIAL NUMBER **028755-A**
LEASE OR PERMIT TO **EXPLORE**

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

30-015-00641

LOG OF OIL OR GAS WELL



LOCATE WELL CORRECTLY

Company **Paton Bros.** Address **Artesia, New Mexico**
Lessor or Tract **Russell** Field **Empire** State **N. Mexico**
Well No. **2-A** Sec. **35** T. **17S** R. **27E** Meridian **NMPM** County **Eddy**
Location **330 ft. (N.)** of **E. Line** and **1650 ft. (W.)** of **E. Line** of **Sec. 35** Elevation _____

The information given herewith is a complete and correct record of the well and all work done thereon so far as can be determined from all available records.

Signed _____

Date _____ Title **Secretary**

The summary on this page is for the condition of the well at above date.
Commenced drilling **Dec. 14,** 19**42** Finished drilling **December 30th**, 19**42**

OIL OR GAS SANDS OR ZONES

(Denote gas by G)

No. 1, from **450** to **455** No. 4, from _____ to _____
No. 2, from **420** to **425** No. 5, from _____ to _____
No. 3, from _____ to _____ No. 6, from _____ to _____

IMPORTANT WATER SANDS

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

CASING RECORD

Size casing	Weight per foot	Threads per inch	Make	Amount	Kind of shoe	Cut and pulled from	Perforated		Purpose
							From—	To—	
8 1/2"	28	8	Lapweld	432					

MUDDING AND CEMENTING RECORD

Size casing	Where set	Number sacks of cement	Method used	Mud gravity	Amount of mud used
8 1/2"	432	25 sacks	Halliburton		50 sacks

PLUGS AND ADAPTERS

Heaving plug—Material _____ Length _____ Depth set _____
Adapters—Material _____ Size _____

SHOOTING RECORD

Size	Shell used	Explosive used	Quantity	Date	Depth shot	Depth cleaned out
			Acidized with 1000 gallons, 15% acid from 450' to 475'			

TOOLS USED

Rotary tools were used from _____ feet to _____ feet, and from _____ feet to _____ feet
Cable tools were used from _____ feet to _____ feet, and from _____ feet to _____ feet

DATES

Put to producing **Dec. 30th**, 19**42**
The production for the first 24 hours was **12 bbls per hour** barrels of fluid of which **100%** was oil; _____ %
emulsion; _____ % water; and _____ % sediment. Gravity, **°Bé. 36**

If gas well, cu. ft. per 24 hours _____ Gallons gasoline per 1,000 cu. ft. of gas _____
Rock pressure, lbs. per sq. in. _____

EMPLOYEES

M. E. Fleming, Driller **M. H. Willey**, Driller
L. P. Davis, Driller **Ralph Yadar**, Driller

FORMATION RECORD

FROM—	TO—	TOTAL FEET	FORMATION
0	70	70	Anhydrite & Red rock
70	125	55	Anhydrite
125	145	20	Anhydrite
145	210	65	Red rock
210	250	40	Red rock
250	265	15	Broken Anhydrite
265	295	30	Red rock
295	310	15	Red rock
310	345	35	Anhydrite
345	355	10	Red rock
355	380	25	Anhydrite
380	385	05	Red rock
385	427	42	Anhydrite
427	432	05	Anhydrite
432	437	05	Anhydrite
437	450	13	Anhydrite
450	455	05	Oil
455	470	15	Anhydrite
470	475	05	Oil
475	477	02	Anhydrite

NEW MEXICO OIL CONSERVATION COMMISSION
SANTA FE, NEW MEXICO

Form C-110
Revised 7/1/55

(File the original and 4 copies with the appropriate district office)

CERTIFICATE OF COMPLIANCE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Company or Operator Carper-Sivley Empire Joint Asst. Lease Russell

Well No. 7 Unit Letter O S 35 T 17S R 27E Pool Empire

County Eddy Kind of Lease (State, Fed. or Patented) Federal

If well produces oil or condensate, give location of tanks: Unit O S 35 T 17S R 27E

Authorized Transporter of Oil or Condensate Malco Refineries, Inc.

Address Box 660, Roswell, New Mexico

(Give address to which approved copy of this form is to be sent)

Authorized Transporter of Gas _____

Address _____

(Give address to which approved copy of this form is to be sent)

If Gas is not being sold, give reasons and also explain its present disposition:

Reasons for Filing: (Please check proper box) New Well _____ ()

Change in Transporter of (Check One): Oil () Dry Gas () C'head () Condensate ()

Change in Ownership _____ ☒ Other _____ ()

Remarks: _____ (Give explanation below)

Formerly reported in Paton Brothers

The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.

Executed this the 1st day of April 19 57

By Juanita Denton

Approved APR 2 1957 19

Title Juanita Denton, Agent

OIL CONSERVATION COMMISSION

Company Carper-Sivley Empire Joint Asst

By W. H. Thompson

Address Carper Bldg.,

Title _____

Artesia, New Mexico

NEW MEXICO OIL CONSERVATION COMMISSION
SANTA FE, NEW MEXICO

Form C-110
Revised 7/1/55

(File the original and 4 copies with the appropriate district office)

CERTIFICATE OF COMPLIANCE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Company or Operator Carper-Sivley
Empire Joint Account Lease Russell

Well No. 7 Unit Letter O S 35 T 17 R 27 Pool Empire

County Eddy Kind of Lease (State, Fed. or Patented) Federal

If well produces oil or condensate, give location of tanks: Unit O S 35 T 17 R 27

Authorized Transporter of Oil or Condensate Continental Pipeline Company

Address Artesia, New Mexico
(Give address to which approved copy of this form is to be sent)

Authorized Transporter of Gas _____

Address _____ Date Connected _____
(Give address to which approved copy of this form is to be sent)

If Gas is not being sold, give reasons and also explain its present disposition:

Reasons for Filing: (Please check proper box) New Well _____ ()

Change in Transporter of (Check One): Oil () Dry Gas () C'head () Condensate ()

Change in Ownership _____ () Other _____ ()

Remarks: _____ (Give explanation below)

Filed for changing name of transporter only.

The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.

Executed this the 22nd day of May 19 59

Approved MAY 28 1959 19

OIL CONSERVATION COMMISSION

By McLernstrang

Title MANAGEMENT REPORTER

By Juanita Denton
Title Agent

Company Carper-Sivley
Empire Joint Account

Address Carper Building
Artesia, New Mexico

NUMBER OF COPIES RECEIVED 6		NEW MEXICO OIL CONSERVATION COMMISSION SANTA FE, NEW MEXICO				FORM C-110 (Rev. 7-60) f	
DISTRIBUTION		CERTIFICATE OF COMPLIANCE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS					
SANTA FE		FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE					
FILE		Company or Operator CARPER DRILLING COMPANY, INC.				Lease Russell	
U.S.C.S.		Unit Letter 0				Well No. 7	
LAND OFFICE		Section 35				Township 17S	
TRANSPORTER		Range 27E				County Eddy	
OIL GAS		Pool Empire				Kind of Lease (State, Fed, Fee) Federal	
PRORATION OFFICE		If well produces oil or condensate give location of tanks				Unit Letter 0	
OPERATOR		Section 35				Township 17S	
Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/>				Address (give address to which approved copy of this form is to be sent)			
Continental Pipeline Company				Artesia, New Mexico			
Is Gas Actually Connected? Yes _____ No <input checked="" type="checkbox"/>							
Authorized transporter of casing head gas <input type="checkbox"/> or dry gas <input type="checkbox"/>				Date Connected		Address (give address to which approved copy of this form is to be sent)	
If gas is not being sold, give reasons and also explain its present disposition: Vented.							
REASON(S) FOR FILING (please check proper box)							
New Well <input type="checkbox"/> Change in Ownership <input type="checkbox"/>							
Change in Transporter (check one)							
Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>							
Casing head gas . <input type="checkbox"/> Condensate.. <input type="checkbox"/>							
Change in Operator from Carper-Sivley Empire Joint Account.							
Remarks <div style="text-align: right;">RECEIVED SEP 27 1963 O. O. S. ARTESIA, OFFICE</div>							
The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.							
Executed this the <u>20th</u> day of <u>September</u> , 19 <u>63</u> .							
OIL CONSERVATION COMMISSION				By Vincent Foster			
Approved by M. L. Armstrong				Title Petroleum Engineer			
Title OIL AND GAS INSPECTOR				Company CARPER DRILLING COMPANY, INC.			
Date SEP 27 1963				Address Artesia, New Mexico			

NO. OF COPIES RECEIVED		5
DISTRIBUTION		
SANTA FE		1
FILE		1
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	1
	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-110
Effective 1-1-65

RECEIVED

JUL 14 1965

Operator Cities Service Oil Co.		O. C. C.
Address Box 69 - Hobbs, New Mexico		ARTESIA, OFFICE
Reason(s) for filing (Check proper box)		Other (Please explain)
New Well <input type="checkbox"/>	Change in Transporter of: <input type="checkbox"/>	Change well name from Russell Federal #7 to Russell C #7
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>	
Change in Ownership <input checked="" type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	

If change of ownership give name and address of previous owner

Carper Drilling Co., Inc., Artesia, New Mexico

II. DESCRIPTION OF WELL AND LEASE

Lessee Name Russell C	Well No. 7	Pool Name, including Formation Empire Yates Seven Rivers	Kind of Lease State, Federal or Free Federal
Location			
Unit Letter 0 , 4950 Feet From The north Line and 1650 Feet From The east			
Line of Section 35 , Township 17S , Range 27E , NMPM, Eddy 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"/>	Address (Give address to which approved copy of this form is to be sent)
Continental Pipeline Co.	Artesia, New Mexico
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
none	
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. is gas actually connected? When
0 35 17S 27E	

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 Restv.	Diff. Restv.
Date Spudded	Date Compl. Ready to Prod.	Total Depth			P.B.T.D.			
Pool	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 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	Casing Pressure	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.

CD Robertson
(Signature)

District Clerk
(Title)

July 1, 1965
(Date)

OIL CONSERVATION COMMISSION

APPROVED **JUL 14 1965**, 19

BY *William Strong*

TITLE **OIL AND GAS AUTHORITY**

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 Sections I, II, III, and VI only 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.

Form 9-331
(May 1963)UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE*
(Other instructions on reverse side)Form approved.
Budget Bureau No. 42-R1424.5. LEASE DESIGNATION AND SERIAL NO.
LC-028755 (a)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Russell "C"9. WELL NO.
710. FIELD AND POOL, OR WILDCAT
Empire Yates Seven Rivers11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA
Sec. 35-T17S-R27E12. COUNTY OR PARISH
Eddy Co. 13. STATE
New Mexico

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)1. OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR

Cities Service Oil Company

3. ADDRESS OF OPERATOR

P. O. Box 69 - Hobbs, New Mexico4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface**4950' FNL & 1650' FEL Sec. 35-T17S-R27E,
Eddy County, New Mexico**

14. PERMIT NO.

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

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐FRACTURE TREAT ☐SHOOT OR ACIDIZE ☐REPAIR WELL ☐(Other) ☐PULL OR ALTER CASING ☐MULTIPLE COMPLETE ☐ABANDON* ☐CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐FRACTURE TREATMENT ☐SHOOTING OR ACIDIZING ☐(Other) ☐REPAIRING WELL ☐ALTERING CASING ☐ABANDONMENT* ☐**Shut-in, cancel allowable** ☒(NOTE: Report results of multiple completion on Well
Completion or Recompletion Report and Log form.)17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any
proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)***The above well was shut-in on 6-13-68.****Please cancel allowable effective 8-1-68.****RECEIVED****JUL 29 1968****O. C. C.
ARTESIA, OFFICE**

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

SIGNED

ORIGINAL SIGNED
C. D. ROBERTSON

TITLE

District Clerk

DATE

7-22-68

(This space for Federal or State use only)

TITLE

DATE

APPROVED
JUL 25 1968**R. L. BLOOMMAN
ACTING DISTRICT ENGINEER**

*See Instructions on Reverse Side

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

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

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

(51) RECEIVED

AUG 10 1969

I. Operator **Cities Service Oil Company**

Address **Box 69 Hobbs, New Mexico 88240**

Reason(s) for filing (Check proper box)

New Well <input type="checkbox"/>	Change in Transporter of:	Other (Please explain)
Recompletion <input type="checkbox"/>	Oil <input checked="" type="checkbox"/>	from Continental
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/>	
	Dry Gas <input type="checkbox"/>	
	Condensate <input type="checkbox"/>	

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

II. DESCRIPTION OF WELL AND LEASE

Lease Name Russell C	Well No. 7	Pool Name, including Formation Empire (Yates - 7 Rivers)	Kind of Lease State, Federal or Fee Fed.	Lease No. LC028/55a
Location				
Unit Letter 0	4950	Feet From The North Line and 1650	Feet From The East	
Line of Section 35	Township 17S	Range 27E	NMPM, Eddy	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"/> Navajo Refining Company - Pipeline Division	Address (Give address to which approved copy of this form is to be sent) No. Freeman Ave - Artesia, New Mexico
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> None	Address (Give address to which approved copy of this form is to be sent)
If well produces oil or liquids, give location of tanks.	Unit 0 Sec. 35 Twp. 17S Rge. 27E Is gas actually connected? No 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 Resv.	Diff. Resv.
Date Spudded	Date Compl. Ready to Prod.		Total Depth			P.B.T.D.		
Elevations (DF, RKB, RT, CR, 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 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/MCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

VI. CERTIFICATE OF COMPLIANCE

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

ORIGINAL SIGNED
P. E. HARRISON

District Administrative Supervisor

August 15, 1969

(Title)

(Date)

OIL CONSERVATION COMMISSION

AUG 10 1969

APPROVED _____, 19

BY **W. A. Grossett**

OIL AND GAS INSPECTOR

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.

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

IV. M. O. G. C. COPY

SUBMIT IN TRIPI
(Other instructions
verse side)

FB-
76

Form approved.
Budget Bureau No. 42-R1424.

6. LEASE DESIGNATION AND SERIAL NO.

LC 029755 (a)

8. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Russell C

9. WELL NO.

7

10. FIELD AND POOL, OR WILDCAT

Empire Yates Seven Rivers

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

12. COUNTY OR PARISH 13. STATE

Eddy County New Mexico

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT" for such proposals.)

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR

Cities Service Oil Company

3. ADDRESS OF OPERATOR

P. O. Box 1919 - Midland, Texas 79701

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

Unit Letter O, 4950' FNL, 1650' FEL, Sec 35, Tp 17S, Rng 27E.

14. PERMIT NO.

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

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETION

ABANDON*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

Well Status

X

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

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Shut-In 6-13-68 - Future waterflood possibilities or Plug & Abandon.

RECEIVED

NOV 20 1974

U. S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO

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

SIGNED

George E. Dain

TITLE

Region Petroleum Engineer

DATE

11-5-74

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

UNLESS FURTHER APPROVED, WELL MUST
BE PUT TO BENEFICIAL USE OR PLUGGED BY
APRIL OCTOBER 1975

DATE

*See Instructions on Reverse Side

NOV 25 1974
Bureau of Land Management
Acting District Engineer

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copy to SF

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

NEW MEXICO CONSERVATION COMMISSION

O. C. C.
ARTESIA, OFFICE

COPIES RECEIVED		
TRIBUTION		
FILE		
U.S.G.S.		
LAND OFFICE		
OPERATOR		

5a. Indicate Type of Lease	
State <input checked="" type="checkbox"/>	Fee
5b. Gas Lease No.	
LC 020755 (a)	

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 Cities Service Oil Company	8. Firm or Lease Name Russell C
3. Address of Operator P. O. Box 1919, Midland, Texas 79701	9. Well No. 7
4. Location of Well UNIT LETTER <u>0</u> <u>4950'</u> FEET FROM THE <u>North</u> LINE AND <u>1650</u> FEET FROM THE <u>East</u> LINE, SECTION <u>35</u> TOWNSHIP <u>17S</u> RANGE <u>27E</u> NMPM.	10. Field and Pool, or Wildcat Empire Yates 7 River
15. Elevation (Show whether DF, RT, GR, etc.)	12. County Eddy

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

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLAYS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	Well Status <input 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 1103.

Shut in 6-13-68. Will plug and abandon.

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SEP 23 1976

U. S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO

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

SIGNED Edmund Start TITLE Region Petroleum Engineer DATE September 20, 1976

APPROVED BY FOR RECORD PURPOSES ONLY TITLE MANAGER DATE 9-22-76

CONDITIONS OF APPROVAL, IF ANY

UNITED STATES DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIP
(Other instructions on reverse side)

Copy to SF
Form approved
Budget Bureau No. 43-R1494
B. LEASE REGISTRATION AND SERIAL 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" for such proposals.)

LC 028755 (A)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT ABBREVIATION NAME

8. NAME OR LEASE NAME

Russell C

9. WELL NO.

7

10. FIELD AND POOL, OR WILDCAT

Empire Yates - 7 Rivers

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

Sec. 35-T17S-R27E

12. COUNTY OR PARISH 13. STATE

Eddy

New Mexico

1. NAME OF OPERATOR
Cities Service Oil Company

2. ADDRESS OF OPERATOR

Box 1919, Midland, Texas 79701

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

330' FSL & 1650' FEL

Section 35-T17S-R27E

Eddy County, New Mexico

14. PERMIT NO.

15. ELEVATIONS (Show whether M., ARTESIA, OFFICE

D. C. C.

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTES OF INTENTION TO:

TEST WATER SHUT-OFF

FRACURE TEST

SHOOT OR ACIDIZE

SEAL WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

WATER SHUT-OFF

FRACURE TEST

SHOOTING OR ACIDIZING

(Other)

SUBSEQUENT REPORT OF:

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

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

17. DESCRIBE CHANGES OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting and proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and names pertinent to this work.)

TD 475' Lima, 8" casing @ 432'. We propose to plug and abandon this well in the following manner:

1. MHRU pulling unit. Pull rods and tubing.
2. RIM with open ended tubing.
3. Circulate hole with 130 sacks cement 475-0'. (Estimated top of cement behind 8" casing is 275').
4. POOH with tubing and install 4" dry hole marker.

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NOV 19 1976

U.S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO

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

SIGNED *Edman Estay*

TITLE Region Petroleum Engineer

DATE November 18, 1976

(This space for Federal or State office use)

APPROVED BY *Joe J. Lora*
CONDITIONS OF APPROVAL, IF ANY:

TITLE ACTING DISTRICT ENGINEER

DATE FEB 8 1977

*See Instructions on Reverse Side

DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

(Other Instructions
verse slide)

copy to ST
Budget Bureau No. 42-R1424.
5. LEASE DESIGNATION AND SERIAL NO.

LC 028755 (A)
6. IF INDIAN, ALLOTTEE OR TRIBE NAME

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT..." for such proposals.)

RECEIVED

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR

APR 12 1977

Cities Service Oil Company

3. ADDRESS OF OPERATOR

D. C. C.

P. O. Box 1919, Midland, Texas 79702 ARTESIA, 07701

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

At surface

330' FSL & 1650' FEL of Section 35, T-17-S, R-27-E,
Eddy County, New Mexico

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Russell "C"

9. WELL NO.

7

10. FIELD AND POOL, OR WILDCAT

Empire Yates - 7 Rivers

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

Section 35, T-17-S, R-27-E

14. PERMIT NO.

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

12. COUNTY OR PARISH

13. STATE

Eddy

New Mexico

16.

Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

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

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

T.D. 475', Lime. This well was plugged and abandoned in the following manner:

1. MIRU casing puller. Pulled rods, pump and tubing.
2. RIH with 2-3/8" EUE tubing.
3. Spotted 10 bbls. water w/50# hulls and 50 sx Floseal.
4. Pumped 150 sx Class C cement in hole. Circulated 10 sacks to pit.
5. Installed 4" dry hole marker.

Albert Means with U.S.G.S. witnessed job.

RECEIVED

FEB 18 1977

U.S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO

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

SIGNED

Scudder

TITLE Region Oper. Manager

DATE 2/17/77

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

*See Instructions on Reverse Side

