

AMEND PL-

12/4/97



November 11, 1997

NOV 14 1997

State of New Mexico  
Energy & Minerals Department  
Oil Conservation Division  
P. O. Box 6429  
Santa Fe, New Mexico 87505

RE: Request for Amendment  
Commingle Order PLC-102

Attention: Engineering Department

The enclosed recompletion forms have been filed with the Oil Conservation Division Hobbs District Office and the Bureau of Land Management for the West Corbin "13" Federal Lease, Well #1.

Maralo, Inc. requests that the above order be amended to surface commingle the **West Corbin Delaware** and the **North Querecho Plains Delaware Pool** production. <sup>13195</sup> <sub>50500</sub>

All other stipulations as set forth in the original order dated July 22, 1993, and amended October 6, 1993 and December 2, 1993 are applicable.

Thank you for your assistance.

Sincerely,

A handwritten signature in cursive script that reads "Dorothea Logan".

Dorothea Logan  
Regulatory Analyst

encls. (4)

SOUTH CORBIN WORKAMP  
13320

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN DUPLICATE\*

(See other instructions on reverse side)

FOR APPROVED  
OMB NO. 1004-0137  
Expires: December 31, 1991

5. LEASE DESIGNATION AND SERIAL NO.

NM-53239

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME, WELL NO.

WEST CORBIN "13" FEDERAL #1

9. API WELL NO.

30-025-31635

10. FIELD AND POOL, OR WILDCAT

QUERRECHO PLAINS; DELAWARE, NORTH

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

SEC 13, T18S, R32E

12. COUNTY OR PARISH

13. STATE

WELL COMPLETION OR RECOMPLETION REPORT AND LOG \*

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

b. TYPE OF COMPLETION:

NEW WELL ☐ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☒ DIFF. RENVR. ☒ Other \_\_\_\_\_

2. NAME OF OPERATOR

MARALO, INC.

3. ADDRESS AND TELEPHONE NO.

P. O. BOX 832, MIDLAND, TX 79702

(915) 684-7441

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

At surface 660' FSL & 660' FEL,

At top prod. interval reported below

SAME

At total depth

SAME

14. PERMIT NO.

DATE ISSUED

12. COUNTY OR PARISH

13. STATE

15. DATE SPUDDED  
RECOMPLETION  
10/13/97

16. DATE T.D. REACHED

17. DATE COMPL. (Ready to prod.)

10/20/97

18. ELEVATIONS (DF, RKB, RT, GR, ETC.)\*

3833' GR

19. ELEV. CASINGHEAD

20. TOTAL DEPTH, MD & TVD

11,400'

21. PLUG, BACK T.D., MD & TVD

8665'

22. IF MULTIPLE COMPL., HOW MANY\*

23. INTERVALS DRILLED BY

ROTARY TOOLS

CABLE TOOLS

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)\*

5874' - 5931' DELAWARE

25. WAS DIRECTIONAL SURVEY MADE

26. TYPE ELECTRIC AND OTHER LOGS RUN

27. WAS WELL CORED

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

CASING SIZE/GRADE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	TOP OF CEMENT, CEMENTING RECORD	AMOUNT PULLED
13-3/8"	54.5#	460'	17-1/2"	500 SXS CL. C - CIRC TO SURF	
8-5/8"	32#	4500'	12-1/4"	2180 SXS CL. C - CIRC TO SURF	
5-1/2"	17#	11400'	7-7/8"	720 SXS + 980 SXS TOC @ 3320'	

29. LINER RECORD

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

30. TUBING RECORD

SIZE	DEPTH SET (MD)	PACKER SET (MD)
2-7/8"	5837'	

31. PERFORATION RECORD (Interval, size and number)

8790 - 8793' (24 HOLES)  
5874 - 5931' (23 HOLES)

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
10,750'	SET CIBP W/35' CEMENT
8,700'	SET CIBP W/35' CEMENT
5874 - 5931'	ACIDZ'D W/1200 GALS 7 1/2% MCA, FRAC'D 30,000 GALS SPEC.FRAC, W/65,000# 20/40

33.\* PRODUCTION

OTTAWA SD + 30,000# SUP TF 20/40 RSN SD

DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)				WELL STATUS (Producing or shut-in)	
10/20/97		2½" X 1½" X 24' PUMP				PRODUCING	
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
10/28/97	24 HRS.	-	→	77	27	119	351
FLOW, TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.		OIL GRAVITY-API (CORR.)
-	-	→					35.0

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

SOLD

TEST WITNESSED BY

BOYD CHESSE

35. LIST OF ATTACHMENTS

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

SIGNED

*Donna L. Logan*

TITLE

REGULATORY ANALYST

DATE

NOVEMBER 11, 1997

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

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

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):

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	TOP	
					MEAS. DEPTH	TRUE VERT. DEPTH
0	460'		Redbed & Anhydrite	Rustler	1300'	1300'
460	3537		Anhydrite & Salt	Yales	2382'	2382'
3537	3939		Anhy, dolo & shale	Seven Rivers	2893	2893
3939	4997'		Dolomite	Queen	3755	3755
4997	5812		Sand	Grayburg	4632	4632
5812	9382		Dolomite, Sand	Delaware	5838'	5838'
9382	9524		lime, shale & chert	Bone Spring	6887	6887'
9524	10115		Dolomite	1st Bone Spring	8390	8390'
10115	10365		Dolomite & shale	2nd Bone Spring	9040	9040'
10365	10394		Dolomite, lime	3rd Bone spring	9903'	9903'
10394	10666		Chert, Dolomite, Shale			
10666	11400		lime, Shale			

38.

GEOLOGIC MARKERS

**Santa Fe, New Mexico 87504-2088**

1000 Rio Brasos Rd., Artec, NM 87410

**All Distances must be from the outer boundaries of the section**

W.O. No. 92-11-0734

# TANK BATTERY

WELLHEAD

FLOWLINE FROM CORBIN 13A FED. #1 SE/4SE/4

NE/4SE/4 FLOWLINE FROM CORBIN 13A FED. #2

S/2SE/4 FLOWLINE FROM WEST CORBIN 13 FED. #1

SE/4NE/4 FLOWLINE FROM UNCLE SAM

SW/4SE/4 FLOWLINE FROM CORBIN 13A FED. #3

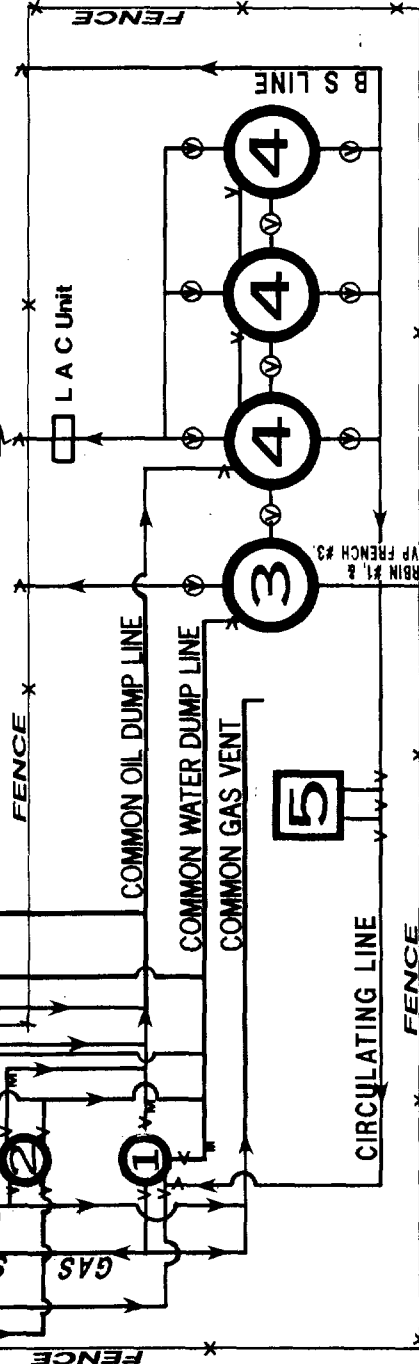
WEST CORBIN 13 FED. #1, CORBIN 13A FED. #1, #2, & #3,

AND

UNCLE SAM "13" FED. #1

SECTION 13, T 18 S - R 32 E, NMPM  
LEA COUNTY, NEW MEXICO

TEX. & N. MEX. PIPELINE



FROM CORBIN #122W CORBIN #1 & U. SAM #1 70 BIA 90044P FRENCH #3. SEC. 24, T 18 S - R 32 E

V VALVE  
⊙ LOCKED VALVE  
M METER

0 4' X 20' 50# HEATER TREATER FOR UNCLE SAM WITH OIL & WATER METERS

1 4' X 20' 50# HEATER TREATER FOR WEST CORBIN 13 FED. #1

2 4' X 20' 50# HEATER TREATER FOR CORBIN 13 A FED. #1 WITH OIL & WATER METERS

3 15'6" X 16' 500 BBLs FIBERGLASS WATER TANK

4 15'6" X 16' 500 BBLs STEEL STOCK TANK

5 CIRCULATING PUMP (GASOLINE POWERED)

6 GAS SALES METER RUN FOR WEST CORBIN 13 FED. #1

7 GAS SALES METER RUN FOR CORBIN 13 A FED. #1

8 GAS SALES METER RUN FOR UNCLE SAM

9 4' X 20' 50# HEATER TREATER FOR CORBIN 13A FED. #2 WITH OIL & WATER METERS

10 GAS SALES METER RUN FOR CORBIN 13A FED. #2

11 4' X 20' HEATER TREATER FOR CORBIN 13A FED. #3

12 GAS SALES METER FOR CORBIN 13A FED. #3

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

Operator name and Address MARALO, INC. P. O. BOX 832 MIDLAND, TX 79702		OGRID Number 014007
		Reason for Filing Code RC
API Number 30 - 025-31635	Pool Name QUERECHO PLAINS; DELAWARE, NORTH	Pool Code 50500
Property Code	Property Name WEST CORBIN "13" FEDERAL	Well Number 1

II. Surface Location

UL or lot no. P	Section 13	Township 18S	Range 32E	Lot Idn	Feet from the 660	North/South Line SOUTH	Feet from the 660	East/West line EAST	County LEA
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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
Lee Code F	Producing Method Code P	Gas Connection Date	C-129 Permit Number	C-129 Effective Date	C-129 Expiration Date				

III. Oil and Gas Transporters

Transporter OGRID	Transporter Name and Address	POD	O/G	POD ULSTR Location and Description
022628	TEXAS NEW MEXICO PIPELINE COMPANY P. O. BOX 60028 SAN ANGELO, TX 76906	1239810	0	P-13-18S-32E WEST CORBIN "13" FEDERAL
005097	CONOCO, INC. 10 DESTA DR., STE 550E MIDLAND, TX 79705	1239830	6	P-13-18S-32E WEST CORBIN "13" FEDERAL

IV. Produced Water

POD 1239850	P-13-18S-32E WEST CORBIN "13" FEDERAL	POD ULSTR Location and Description
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V. Well Completion Data

Spud Date REENTRY 10/13/97	Ready Date 10/20/97	TD 11,400'	PBTD 8665'	Perforations 5874 - 5931'
Hole Size	Casing & Tubing Size	Depth Set	Sacks Cement	
17-1/2"	13-3/8"	460'	500 SXS CL. C	
12-1/4"	8-5/8"	4499'	2180 SXS CL. C	
7-7/8"	5-1/2"	11400'	720 SXS 50/50 POZ + 980 SXS	2ND STAGE

VI. Well Test Data

Date New Oil 10/20/97	Gas Delivery Date 10/20/97	Test Date 10/28/97	Test Length 24 HRS.	Tbg. Pressure -	Csg. Pressure -
Choke Size -	Oil 77	Water 119	Gas 27	AOP -	Test Method P

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:

*Dorothea Logan*

Printed name:

DOROTHEA LOGAN

Title:

REGULATORY ANALYST

Date:

NOVEMBER 11, 1997

Phone:

(915) 684-7441

OIL CONSERVATION DIVISION

Approved by:

Title:

Approval Date:

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
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New Mexico Oil Conservation Division  
C-104 Instructions

IF THIS IS AN AMENDED REPORT, CHECK THE BOX LABELED "AMENDED REPORT" AT THE TOP OF THIS DOCUMENT

Report all gas volumes at 15,025 PSIA at 60°.  
Report all oil volumes to the nearest whole barrel.

A request for allowable for a newly drilled or deepened well must be accompanied by a tabulation of the deviation tests conducted in accordance with Rule 111.

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

Fill out only sections I, II, III, IV, and the operator certifications for changes of operator, property name, well number, transporter, or other such changes.

A separate C-104 must be filed for each pool in a multiple completion.

Improperly filled out or incomplete forms may be returned to operators unapproved.

1. Operator's name and address
2. Operator's OGRID number. If you do not have one it will be assigned and filled in by the District office.
3. Reason for filling code from the following table:  

NW	New Well
RC	Recompletion
CH	Change of Operator
AO	Add oil/condensate transporter
CO	Change oil/condensate transporter
AG	Add gas transporter
CG	Change gas transporter
RT	Request for test allowable (include volume requested)

If for any other reason write that reason in this box.
4. The API number of this well
5. The name of the pool for this completion
6. The pool code for this pool
7. The property code for this completion
8. The property name (well name) for this completion
9. The well number for this completion
10. The surface location of this completion NOTE: If the United States government survey designates a Lot Number for this location use that number in the 'UL or lot no.' box. Otherwise use the OCD unit letter.
11. The bottom hole location of this completion
12. Lease code from the following table:  

F	Federal
S	State
P	Fee
J	Jicarilla
N	Navejo
U	Ute Mountain Ute
I	Other Indian Tribe
13. The producing method code from the following table:  

F	Flowing
P	Pumping or other artificial lift
14. MO/DA/YR that this completion was first connected to a gas transporter
15. The permit number from the District approved C-129 for this completion
16. MO/DA/YR of the C-129 approval for this completion
17. MO/DA/YR of the expiration of C-129 approval for this completion
18. The gas or oil transporter's OGRID number
19. Name and address of the transporter of the product
20. The number assigned to the POD from which this product will be transported by this transporter. If this is a new well or recompletion and this POD has no number the district office will assign a number and write it here.
21. Product code from the following table:  

O	Oil
G	Gas

22. The ULSTR location of this POD if it is different from the well completion location and a short description of the POD (Example: "Battery A", "Jones CPD", etc.)
23. The POD number of the storage from which water is moved from this property. If this is a new well or recompletion and this POD has no number the district office will assign a number and write it here.
24. The ULSTR location of this POD if it is different from the well completion location and a short description of the POD (Example: "Battery A Water Tank", "Jones CPD Water Tank", etc.)
25. MO/DA/YR drilling commenced
26. MO/DA/YR this completion was ready to produce
27. Total vertical depth of the well
28. Plugback vertical depth
29. Top and bottom perforation in this completion or casing shoe and TD if openhole
30. Inside diameter of the well bore
31. Outside diameter of the casing and tubing
32. Depth of casing and tubing. If a casing liner show top and bottom.
33. Number of sacks of cement used per casing string

The following test data is for an oil well it must be from a test conducted only after the total volume of load oil is recovered.

34. MO/DA/YR that new oil was first produced
35. MO/DA/YR that gas was first produced into a pipeline
36. MO/DA/YR that the following test was completed
37. Length in hours of the test
38. Flowing tubing pressure - oil wells  
Shut-in tubing pressure - gas wells
39. Flowing casing pressure - oil wells  
Shut-in casing pressure - gas wells
40. Diameter of the choke used in the test
41. Barrels of oil produced during the test
42. Barrels of water produced during the test
43. MCF of gas produced during the test
44. Gas well calculated absolute open flow in MCF/D
45. The method used to test the well:  

F	Flowing
P	Pumping
S	Swabbing

If other method please write it in.
46. The signature, printed name, and title of the person authorized to make this report, the date this report was signed, and the telephone number to call for questions about this report.
47. The previous operator's name, the signature, printed name, and title of the previous operator's representative authorized to verify that the previous operator no longer operates this completion, and the date this report was signed by that person