

## DISTRICT I

P.O. Box 1980, Hobbs, NM 88241-1980

## DISTRICT II

P.O. Box Drawer DD, Artesia, NM 88211-0719

## DISTRICT III

1000 Rio Brazos Rd., Aztec, NM 87410

## DISTRICT IV

P.O. Box 2088, Santa Fe, NM 87504-2088

## State of New Mexico

Energy, Minerals and Natural Resources Department

Form C-101

Revised February 10, 1994

Instructions on back

Submit to Appropriate District Office

State Lease - 6 Copies

Fee Lease - 5 Copies

☐ AMENDED REPORT

## APPLICATION FOR PERMIT TO DRILL, RE-ENTER, DEEPEN, PLUGBACK, OR ADD A ZONE

<sup>1</sup> Operator Name and Address TEXACO EXPLORATION & PRODUCTION INC. 205 E. Bender, HOBBS, NM 88240		<sup>2</sup> OGRID Number 022351
		<sup>3</sup> API Number 30 025 06062
<sup>4</sup> Property Code 011132	<sup>5</sup> Property Name WEIR, C. H. -B-	<sup>6</sup> Well No. 5

<sup>7</sup> Surface Location

UI or lot no.	Section	Township	Range	Lot.Idn	Feet From The	North/South Line	Feet From The	East/West Line	County
G	11	20S	37E		1980'	NORTH	1650'	EAST	LEA

<sup>8</sup> Proposed Bottom Hole Location If Different From Surface

UI or lot no.	Section	Township	Range	Lot.Idn	Feet From The	North/South Line	Feet From The	East/West Line	County
<sup>9</sup> Proposed Pool 1 EUMONT; YATES-7 RVRS-QUEEN (PRO GAS)					<sup>10</sup> Proposed Pool 2				

<sup>11</sup> Work Type Code P	<sup>12</sup> Well Type Code G	<sup>13</sup> Rotary or C.T. R	<sup>14</sup> Lease Type Code S	<sup>15</sup> Ground Level Elevation
<sup>16</sup> Multiple No	<sup>17</sup> Proposed Depth 5196'	<sup>18</sup> Formation QUEEN/PENROSE	<sup>19</sup> Contractor PRIDE	<sup>20</sup> Spud Date 8/23/96

<sup>21</sup> Proposed Casing and Cement Program

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
11"	8.625"	22.7#	1429'	600	SURFACE
6.250"	5.5"	14,15.5,17	6937'	1050	2525'

22 Describe the proposed program. If this application is to DEEPEN or PLUG BACK give the data on the present productive zone and proposed new productive zone.

Describe the blowout prevention program, if any. Use additional sheets if necessary.

1. MIRU pulling unit. NU BOP. TOH w/ 2-3/8" tubing.
2. TIH w/ 5-1/2" CIBP on tubing @ ±5230'. Test CIBP. After test OK, TOH w/ tubing.
3. MIRU wireline. TIH w/ dump bailer and place 35' cement on top of CIBP for new PBTD @ ±5195'.
4. MIRU Halliburton Wireline. Run GR-CNL-CCL from 3000'-4000'.
5. TIH w/ 4" casing gun w/ 2 JSPFAND perforate the Eumont Pool (Queen/Penrose) 3511'-3744'. Total 264 holes. RD wireline.
6. TIH w/ 5 1/2" 6k treating packer and SN on 2 3/8" 4.7# J-55 tubing. Hydrotest tubing into hole to 5000#. Set packer @ ±3460'.
7. Clean out tubing and reverse out. Acidize Eumont perms (3511'-3744') w/ 5000 gallons 15% NEFE HCl RD DS. Rel packer. TOH w/ tbn and packer.
8. TIH w/ 10k treating packer and test tubing. Set packer above Eumont perms @ ±3400' and test. NU frac tree.
9. RU DS. Frac Eumont perms. RD DS. ND frac tree. Release packer. TOH w/ 3 1/2" tubing and packer, lay down tubing.
10. TIH w/ 4 3/4" bit on 2 3/8" tubing. RU foam/air unit. Clean out. RD foam/air unit. TOH w/ tubing.
11. TIH. Set SN below perms @ ±3770'. Swab well in. Place on production.

Permit Expires 1 Year From Approval

Date Unless Drilling Underway

Plug back

<sup>23</sup> 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

Paula S. Ives

Printed Name

Paula S. Ives

Title Engineering Assistant

Date 8/15/96

Telephone 397-0432

## OIL CONSERVATION DIVISION

Approved By:

[Signature]

Title:

DISTRICT I SUPERVISOR

Approval Date:

Expiration Date:

Conditions of Approval:

Attached ☐

## State of New Mexico

Energy, Minerals and Natural Resources Department

Form C-102

Revised February 10, 1994

Instructions on back

Submit to Appropriate District Office

State Lease - 4 Copies

Fee Lease - 3 Copies

☐ AMENDED REPORT

## OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT II  
P.O. Box 1980, Hobbs, NM 88241-1980DISTRICT III  
P.O. Box Drawer DD, Artesia, NM 88211-0719DISTRICT IV  
1000 Rio Brazos Rd., Aztec, NM 87410

P.O. Box 2088, Santa Fe, NM 87504-2088

## WELL LOCATION AND ACREAGE DEDICATION PLAT

<sup>1</sup> API Number 30 025 06062	<sup>2</sup> Pool Code 76480	<sup>3</sup> Pool Name EUMONT; YATES-7 RVRS-QUEEN (PRO GAS)
<sup>4</sup> Property Code 011132	<sup>5</sup> Property Name WEIR, C. H. -B-	<sup>6</sup> Well No. 5
<sup>7</sup> OGRID Number 022351	<sup>8</sup> Operator Name TEXACO EXPLORATION & PRODUCTION INC.	<sup>9</sup> Elevation

<sup>10</sup> Surface Location

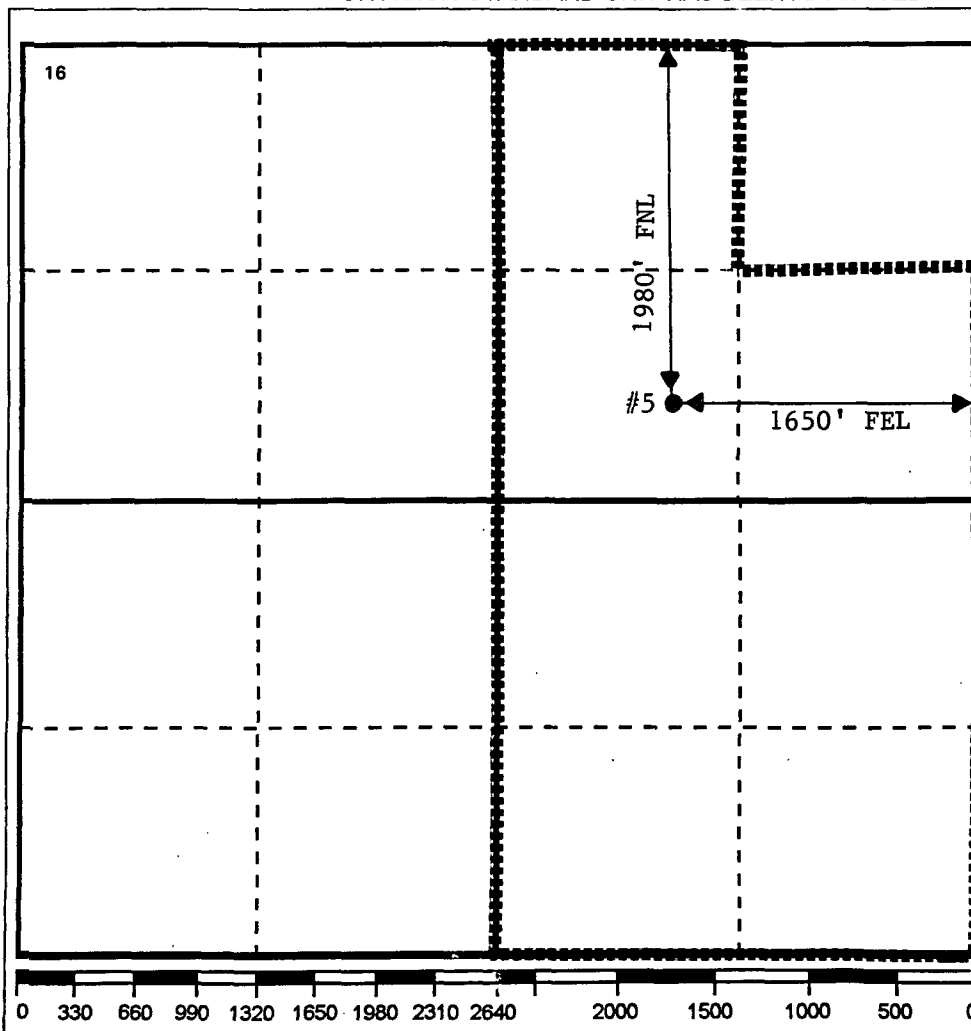
UI or lot no.	Section	Township	Range	Lot.Idn	Feet From The	North/South Line	Feet From The	East/West Line	County
G	11	20S	37E		1980'	NORTH	1650'	EAST	LEA

<sup>11</sup> Bottom Hole Location If Different From Surface

UI or lot no.	Section	Township	Range	Lot.Idn	Feet From The	North/South Line	Feet From The	East/West Line	County

<sup>12</sup> Dedicated Acres 280	<sup>13</sup> Joint or Infill No	<sup>14</sup> Consolidation Code	<sup>15</sup> Order No.
--------------------------------------	-------------------------------------	----------------------------------	-------------------------

NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED  
OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION



## 17 OPERATOR CERTIFICATION

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

Signature

Printed Name

Paula S. Ives

Position

Engineering Assistant

Date

8/15/96

## 18 SURVEYOR CERTIFICATION

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

Signature & Seal of  
Professional Surveyor

Certificate No.

Submit 5 Copies  
Appropriate District Office  
DISTRICT I  
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II  
P.O. Drawer DD, Aztec, NM 88210

DISTRICT III  
1000 Rio Brazos RA, 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

OIL CONSERVATION DIVISION  
RECEIVED

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

**REQUEST FOR ALLOWABLE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS**

JUN 03 AM 10 08

Operator Texaco Exploration and Production Inc.		Well APN No. 30 025 08082
Address P. O. Box 730 Hobbs, New Mexico 88240-2528		
Reason(s) for Filing (Check proper box) <input checked="" type="checkbox"/> Other (Please explain) EFFECTIVE 8-1-91		
New Well <input type="checkbox"/>	Change in Transporter of: Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>	
Recompletion <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	
Change in Operator <input checked="" type="checkbox"/>		

If change of operator give name and address of previous operator  
Texaco Producing Inc. P. O. Box 730 Hobbs, New Mexico 88240-2528

**II. DESCRIPTION OF WELL AND LEASE**

Lease Name C H WER B	Well No. 5	Pool Name, including Formation SKAGGS GLORIETA	Kind of Lease State, Federal or Fee FEE	Lease No. 880140
Location Unit Letter <u>G</u> : 1980 Feet From The <u>NORTH</u> Line and 1650 Feet From The <u>EAST</u> Line Section <u>11</u> Township <u>20S</u> Range <u>37E</u> , NMPM LEA County				

**III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS**

Name of Authorized Transporter of Oil SHUT-IN <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
Name of Authorized Transporter of Casinghead Gas SHUT-IN <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	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	Sec. Twp. Rge.
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 Oil/Gas Pay		Tubing Depth			
Perforations					Depth Casing Shoe			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			

**V. TEST DATA AND REQUEST FOR ALLOWABLE**

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

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

**GAS WELL**

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
Testing Method (prior, 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 K.M. Miller  
Printed Name K. M. Miller Title Div. Opers. Engr.  
Date May 7, 1991 Telephone No. 915-888-4834

**OIL CONSERVATION DIVISION**

Date Approved JUN 03 1991  
By [Signature]  
Title DISTRICT I SUPERVISOR

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

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

State of New Mexico  
Energy, 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

RECEIVED

91 JUL 3 AM 10 08

**REQUEST FOR ALLOWABLE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS**

Requester Texaco Exploration and Production Inc.		Well APN No. 30 025 06062
Address P. O. Box 730 Hobbs, New Mexico 88240-2528		
Reason(s) for Filing (Check proper box)		<input checked="" type="checkbox"/> Other (Please explain) EFFECTIVE 6-1-91
New Well <input type="checkbox"/>	Change in Transporter of: Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>	
Recompletion <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	
Change in Operator <input checked="" type="checkbox"/>		
If change of operator give name and address of previous operator Texaco Producing Inc. P. O. Box 730 Hobbs, New Mexico 88240-2528		

**II. DESCRIPTION OF WELL AND LEASE**

Lease Name C H WER B	Well No. 5	Pool Name, Including Formation WER BLINBRY, EAST	Kind of Lease State, Federal or Fee FEE	Lease No. 880140
Location Unit Letter G Range 1980 Feet From The NORTH Line and 1850 Feet From The EAST Line Section 11 Township 20S Range 37E NMPM LEA County				

**III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS**

Name of Authorized Transporter of Oil SHUT-IN	or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Name of Authorized Transporter of Casinghead Gas SHUT-IN	or Dry Gas <input type="checkbox"/>	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 Sec. Twp. Rge.	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	Drill Res'v
Date Spudded	Date Compl. Ready to Prod.	Total Depth		F.B.T.D.					
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay		Tubing Depth					
Perforations		Depth Casing Shoes							
TUBING, CASING AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET		SACKS CEMENT					

**V. TEST DATA AND REQUEST FOR ALLOWABLE**

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

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

**GAS WELL**

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (plus, 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 K. M. Miller  
Printed Name K. M. Miller Div. Ops. Engr.  
Date May 7, 1991 Title 915-688-4834  
Telephone No.

**OIL CONSERVATION DIVISION**

Date Approved JUN 8 3 1991  
By [Signature]  
Title DISTRICT 1 SUPERVISOR

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

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

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

JUL 3 AM 10 08

Texaco Exploration and Production Inc.		Well APN No. 30 025 06062
Address P. O. Box 730 Hobbs, New Mexico 88240-2528		
Reason(s) for Filing (Check proper box)		
New Well <input type="checkbox"/>	Change in Transporter of: Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	<input checked="" type="checkbox"/> Other (Please explain) EFFECTIVE 6-1-81
Recompletion <input type="checkbox"/>		
Change in Operator <input checked="" type="checkbox"/>		
If change of operator give name and address of previous operator Texaco Producing Inc. P. O. Box 730 Hobbs, New Mexico 88240-2528		

II. DESCRIPTION OF WELL AND LEASE

Lease Name C H WEIR B	Well No. 5	Pool Name, Including Formation SKAGGS DRINKARD	Kind of Lease State, Federal or Fee FEE	Lease No. 880140
Location				
Unit Letter G	1980	Foot From The NORTH	Line and 1650	Foot From The EAST
Section 11	Township 20S	Range 37E	NMPM	LEA County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil SHUT-IN	or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Name of Authorized Transporter of Casinghead Gas SHUT-IN	or Dry Gas <input type="checkbox"/>	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	Sec. Twp. Rgn.
		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 Rat'v	Diff Rat'v
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
Perforations			Depth Casing Shoe					
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					

V. TEST DATA AND REQUEST FOR ALLOWABLE

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

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

GAS WELL

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

VI. OPERATOR CERTIFICATE OF COMPLIANCE

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

Signature K. M. Miller  
K. M. Miller Div. Oper. Engr.  
Printed Name  
Date May 7, 1991  
Telephone No. 915-688-4834

OIL CONSERVATION DIVISION

Date Approved JUN 05 1991  
By [Signature]  
Title: DISTRICT 1 SUPERVISOR

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.

CO. OF SPECIAL AGENTS	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.L.	
LAND OFFICE	
OPERATOR	

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

JAN - 4 1987

3A. Indicate Type of Lease
STATE <input type="checkbox"/> PER <input checked="" type="checkbox"/>
3. State Oil & Gas Lease No.

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

Type of Work	7. Unit Agreement Name
Type of Well DRILL <input type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input checked="" type="checkbox"/>	8. Farm or Lease Name
Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> OTHER <input type="checkbox"/>	C. H. Weir "B"
Name of Operator	9. Well No.
Texaco Producing Inc.	5
Address of Operator	10. Field and Pool, or Wildcat
P. O. Box 728, Hobbs, New Mexico 88240	Wildcat San Andres
Location of Well	Skages Grayburg
UNIT LETTER <u>G</u> LOCATED <u>1930</u> FEET FROM THE <u>North</u> LINE	12. County
<u>1650</u> FEET FROM THE <u>East</u> LINE OF SEC. <u>11</u> TWP. <u>20-S</u> REC. <u>37-E</u> NMPM	Lea
19. Proposed Depth	19A. Formation
5165' PBTD	Grayburg, San Andres
20. Rotary or C.T.	Pulling Un:
Elevations (show whether DF, KT, etc.)	21A. Kind & Status Plug. Bond
3609 DF	Blanket
21B. Drilling Contractor	22. Approx. Date Work will start
	January 4, 1988

## PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
11"	8-5/8"	22.7#	1429'	600	Circulated
6-1/4"	5-1/2"	14, 15.5 & 17#	6937'	1050	1980 by T.S.*

\*In December, 1986, perfed @ 1440', squeezed w/400 sacks cement, circulated.

1. MIRU. Pull rods & pump. Install BOP. TOH w/tubing.
2. Set 5-1/2" CIBP @ 5200'. Cap w/35' cement. (New PBTD 5165').
3. Perf San Andres w/2 SPF 4807', 41', 44', 48', 56', 75', 82', 87', 90', 4903', 06', 53', & 5'
4. TIH w/packer and set @ 4700'. Acidize w/4000 gallons 15% NEFE.
5. Swab & test for oil production. If oil rate is commercial, TOH w/packer, run production equipment. RDPU. If not commercial, continue w/#6.
6. TOH w/packer. Set CIBP @ 4700'. Cap w/35' cement. (New PBTD 4665').
7. Perf Grayburg w/2 SPF @ 3803', 07', 14', 19', 22', 25', 28', 32', 35', 44', 47', 50', 53', 62', 67', 71', 75', 85', 90', 93', 97', 3900', 09', 15', 19', and 3922'.
8. TIH w/packer and set @ 3700'. Stimulate w/7000 gallons 15% NEFE acid.
9. Swab & test well. If gas is in excess of 160 MCFPD, go to 12, otherwise continue w/#10.
10. Frac Grayburg w/5000 gallons 2% KCL water, 32,000 gallons 30# crosslinked gel and 60,000# 20-40 mesh sand. Pump @ 26 BPM, 3000#.
11. Lower packer to bottom perf, then TOH. Clean out sand if necessary.
12. TIH w/pumping equipment. Place on production.

ABOVE SPACE DESCRIBE PROPOSED PROGRAM: IF PROPOSAL IS TO DEEPEN OR PLUG BACK, GIVE DATA ON PRESENT PRODUCTIVE ZONE AND PROPOSED NEW PR ZONE. GIVE SLOWOUT PREVENTER PROGRAM, IF ANY.

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

J. A. Schaffer  
Title District Operations Manager Date 12/11/87

(This space for State Use)

APPROVED BY Gerry Schaffer TITLE DISTRICT 1 SUPERVISOR DATE DEC 28 1987

CONDITIONS OF APPROVAL, IF ANY

Permit Expires 6 Months From Approval  
Date Unless Being Underway.  
Workover

## OIL CONSERVATION DIVISION

NEW MEXICO  
MINERALS DEPARTMENTP. O. BOX 2088  
SANTA FE, NEW MEXICO 87501Form C-102  
Revised 10-1-78

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

Texaco Producing Inc.		Lease C. H. Weir "B"		Well No. 5
Letter G	Section 11	Township 20-S	Range 37-E	County Lea

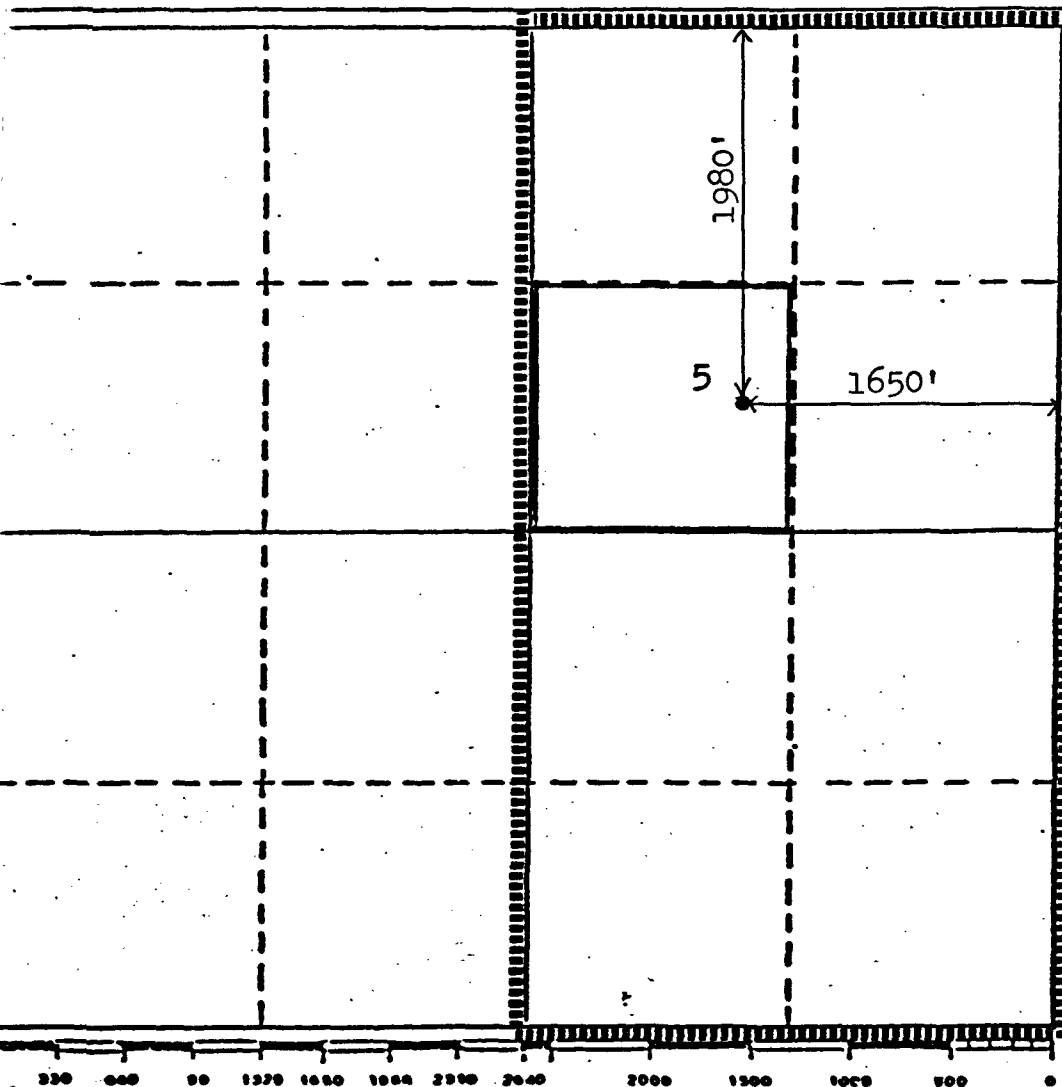
Well Postage Location of Well:				
1980	feet from the North line and	1650	feet from the East line	
and Level Elev. 3609 DF	Producing Formation San Andres, Grayburg	Pool Wildcat San Andres Skaggs Grayburg	Dedicated Acreage: 40	Acres

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 Division.

	<b>CERTIFICATION</b>
	I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.
	Name <u>J. A. Schaffer</u>
	Position <u>Dist. Oper. Mgr.</u>
	Company <u>Texaco Prod. Inc.</u>
Date <u>December 11, 1987</u>	
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 _____	
Registered Professional Engineer and/or Land Surveyor _____	
Certificate No. _____	

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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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-

5a. Indicate Type of Lease  
State ☐ Fee ☐  
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 - 1" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name
2. Name of Operator Texaco Producing Inc.	8. Farm or Lease Name C. H. Weir "B"
3. Address of Operator PO Box 728, Hobbs, New Mexico 88240	9. Well No. 5
4. Location of Well UNIT LETTER <u>G</u> 1980 FEET FROM THE <u>North</u> LINE AND <u>1650</u> FEET FROM THE <u>East</u> LINE, SECTION <u>11</u> TOWNSHIP <u>20S</u> RANGE <u>37E</u> NMPM.	10. Field and Pool, or Wildcat Weir Blinberry East Skaggs Drinkard
15. Elevation (Show whether DF, RT, GR, etc.) 3609' DF	12. County Lea

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

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐  
TEMPORARILY ABANDON ☐  
PULL OR ALTER CASING ☐ CHANGE PLANS ☐  
OTHER ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐  
CASING TEST AND CEMENT JOB ☐  
OTHER Abandon Zones

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.

- MIRU. POH with pump and 2 3/8" tubing. NU BOP.
- Ran packer on 2 3/8" tubing. Set at 5320'. Could not pressure up, communicated. Release packer and POH.
- Ran in hole with 5 1/2" packer on 2 3/8" tubing. Set at 5321'. Junk at 5323'. Pressure up on tubing. Still communicated. POH with packer.
- Ran in hole with 4 1/2" shoe. Tag junk at 5318'. Cut a fish to 5319'. Mill from 19' to 5333'. POH with tools. Pick up and ran tension packer on 2 7/8" tubing. Set at 5327' and attempted to pressure up. (comm). POH.
- Pick up and ran 4 1/2" shoe on 2 7/8" tubing. Fish at 5333'. Wash down to 5345'. Stopped making hole. Circulated clean. POH with shoe. Recovered tubing. Pieces of rod. Start back in hole with tools. Tagged at 5345' and drilled to 5346'. POH. Shoe wore out. RIH with Arrow packer to 5344'.
- Establish rate of 1.5 BPM at 550#. Pumped 500 gallons 15% acid. Communicated. Completed job.
- POH with packer. RIH with packer to 5189', pumped in back side at 750# and .50 BPM. Pull up to 1463', same as above. Pulled up to 1401' and pressure back side to 1000#, held. POH with packer. RIH with retainer.

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

397-3571

SIGNED Joe Head TITLE Hobbs Area Superint. DATE 9/30/87

APPROVED BY Eddie W. [Signature] TITLE OIL & GAS INSPECTOR DATE OCT 7 1987

CONDITIONS OF APPROVAL, IF ANY:



- 8) Set retainer at 5189'. Pumped 50 BFW thru retainer (Glorieta perfs 5250'-5318'). Top junk 5345'. Cement with 250 sxs Class "H" with .6% Halad 9 and 2% CaCl. Pulled out of retainer. Reversed out 1/4 bbls. cement. POH. WOC.
- 9) TIH with 4 3/4" bit. Tagged top of cement at 5140'. Drill to 5320'. Spot 1000 gallons 15% acid at 5320' up to 5100'. Attempt to put into old perfs 5318' up to 5250'. Could not break down. POH. RBIH with packer. Set at 4000'. Break down perfs at 2000#. Put acid away at 2 BPM. Release packer. POH. SI well 4/30/87.
- 10) MIRU. With 4" casing gun perf Glorieta zone 2 SPF 5281', 83, 92, 94, 5301', 03, 10, 12, 14, 16, 18, 11 int. 22 holes. TIH with 5 1/2" packer to 5204'. Acidize 5 1/2" casing perfs 5281'-5318' with 2000 gallons 15% NEFE. Slight ball action.
- 11) Release packer. TOH. Ran production equipment. POB 8/14/87. On test, pumped 85 BWPD. SI well and evaluate for recompletion.

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**OCT 6 1987**

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**HOBBS OFFICE**

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Form C-103  
Revised 10-

SEP 24 1987

5a. Indicate Type of Lease  
State ☐ Fee ☐

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. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name
2. Name of Operator Texaco Producing Inc.	8. Farm or Lease Name C. H. Weir "B"
3. Address of Operator P. O. Box 728, Hobbs, New Mexico 88240	9. Well No. 5
4. Location of Well UNIT LETTER <u>G</u> <u>1980</u> FEET FROM THE <u>North</u> LINE AND <u>1650</u> FEET FROM THE <u>East</u> LINE, SECTION <u>11</u> TOWNSHIP <u>20S</u> RANGE <u>37E</u> NMPM.	10. Field and Pool, or Wildcat Skaggs Glorieta
15. Elevation (Show whether DF, RT, GR, etc.) 3609' DF	12. County Lea

16. 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 ☐

PLUG AND ABANDON ☐  
CHANGE PLANS ☐

OTHER ☐

SUBSEQUENT REPORT OF:  
REMEDIAL WORK ☒  
COMMENCE DRILLING OPNS. ☐  
CASING TEST AND CEMENT JOB ☐  
ALTERING CASING ☐  
PLUG AND ABANDONMENT ☐  
OTHER ☐

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.

- 1) MIRU. TOH with rods and pump. NU BOP. TOH with production tubing.
- 2) With 4" casing gun perf Glorieta Zone 2 SPF 5281', 83, 92, 94, 5301', 03, 10, 12, 14, 16, 18, 11 intervals, 22 holes. TIH with 5 1/2" packer on 2 7/8" workstring to 5204'. Acidize 5 1/2" casing perfs. 5281'-5318' with 2000 gallons 15% NEFE 40 BS, MAX. Press. 2800#, AVG Press 2650#, AIR 4.5 BPM, ISIP 1650, slight ball action. Release packer. TOH. Ran production equipment.
- 3) Pump 72 hours, 0 BO, 290 BW. On test, pumping. 0 BO, 95 BW.

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

397-3571

SIGNED Ja Heas

TITLE Hobbs Area Superintendent DATE Sept. 8, 1987

APPROVED BY Eddie W. [Signature]

TITLE OIL & GAS INSPECTOR

SEP 14 1987

CONDITIONS OF APPROVAL, IF ANY:

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ENERGY AND MINERALS DEPARTMENT

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APR 27 1987  
OIL CONSERVATION DIVISION  
P.O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-104  
Revised 10-01-78  
Format 08-01-83  
Page 1

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator  
Texaco Producing Inc.

Address  
P.O. Box 728, Hobbs, New Mexico 88240

Reason(s) for filing (Check proper box)

- ☐ New Well  
☐ Recompletion  
☐ Change in Ownership

Change in Transporter of:

- ☐ Oil  
☒ Casinghead Gas  
☐ Dry Gas  
☐ Condensate

Other (Please explain)

Change of Operator from Texaco Inc. to  
Texaco Producing Inc. Effective 01/01,

If change of ownership give name  
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name C. H. Weir "B"	Well No. 5	Pool Name, including Formation Skaggs Glorieta	Kind of Lease State, Federal or Fee	Lease No.
Location Unit Letter <u>G</u> : <u>1650</u> Feet From The <u>East</u> Line and <u>1980</u> Feet From The <u>North</u> Line of Section <u>11</u> Township <u>20S</u> Range <u>37E</u> , NMPM, Lea Coun				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Shell Pipeline Corp.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1910, Midland, TX 79702
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> Warren Petroleum Corp.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1589, Tulsa, OK 74102
If well produces oil or liquids, give location of tanks. Unit <u>H</u> Sec. <u>11</u> Twp. <u>20S</u> Rge. <u>37E</u>	Is gas actually connected? <u>Yes</u> When <u>Not available</u>

If this production is commingled with that from any other lease or pool, give commingling order number: PC-70

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.

Bill Beving  
(Signature)  
District Administrative Supervisor

(Title)  
February 09, 1987

(Date)

OIL CONSERVATION DIVISION

APPROVED APR 21 1987 19

BY Paul J. Roney

TITLE Geologist

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

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

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

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

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

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ENERGY AND MINERALS DEPARTMENT

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APR 27 1987

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

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator  
Texaco Producing Inc.

Address  
P.O. Box 728, Hobbs, New Mexico 88240

Reason(s) for filing (Check proper box)

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

Other (Please explain)  
Change of Operator from Texaco Inc. to Texaco Producing Inc. Effective 01/01/

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name C. H. Weir "B"	Well No. 5	Pool Name, including Formation Weir Blinebry East	Kind of Lease State, Federal or Fee	Lease No. Fee
Location Unit Letter <u>G</u> : <u>1650</u> Feet From The <u>East</u> Line and <u>1980</u> Feet From The <u>North</u> Line of Section <u>11</u> Township <u>20S</u> Range <u>37E</u> , NMPM, Lea Count				

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)
Shell Pipeline Corp.	P.O. Box 1910, Midland, TX 79702
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Warren Petroleum Corp.	P.O. Box 1589, Tulsa, OK 74102
If well produces oil or liquids, give location of tanks.	Is gas actually connected? When
Unit <u>H</u> Sec. <u>11</u> Twp. <u>20S</u> Rge. <u>37E</u>	Yes <u>02/20/62</u>

If this production is commingled with that from any other lease or pool, give commingling order number: PC-70

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.

*W. Browning*  
(Signature)

District Administrative Supervisor

(Title)

February 09, 1987

(Date)

OIL CONSERVATION DIVISION

APPROVED

APR 21 1987

19

BY

TITLE Geologist

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

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

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

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

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

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ENERGY AND MINERALS DEPARTMENT

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	GAS
OPERATOR	
PRODUCTION OFFICE	

APR 27 1987  
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

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator  
Texaco Producing Inc.

Address  
P.O. Box 728, Hobbs, New Mexico 88240

Reason(s) for filing (Check proper box)

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

Other (Please explain)  
Change of Operator from Texaco Inc. to Texaco Producing Inc. Effective 01/01/87

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name C. H. Weir "B"	Well No. 5	Pool Name, including Formation Skaggs Drinkard	Kind of Lease State, Federal or Fee	Lease No. Fee
Location Unit Letter <u>G</u> : <u>1650</u> Feet From The <u>East</u> Line and <u>1980</u> Feet From The <u>North</u> Line of Section <u>11</u> Township <u>20S</u> Range <u>37E</u> , NMPM, Lea 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"/> Shell Pipeline Corp.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1910, Midland, TX 79702
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Warren Petroleum Corp.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1589, Tulsa, OK 74102
If well produces oil or liquids, give location of tanks. Unit <u>H</u> Sec. <u>11</u> Twp. <u>20S</u> Rge. <u>37E</u>	Is gas actually connected? <u>Yes</u> When <u>03/15/62</u>

If this production is commingled with that from any other lease or pool, give commingling order number: PC-70

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.

W. Branning  
(Signature)

District Administrative Supervisor

(Title)

February 09, 1987

(Date)

OIL CONSERVATION DIVISION

APR 21 1987

APPROVED

BY

TITLE Geologist

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

If this is a request for allowable for a newly drilled or deeper well, this form must be accompanied by a tabulation of the deviat. 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 own well name or number, or transporter, or other such change of condition.

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

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OIL CONSERVATION DIVISION

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SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-

5a. Indicate Type of Lease  
State ☐ Fee ☒  
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. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name
2. Name of Operator Texaco Inc.	8. Farm or Lease Name C.H. Weir "B"
3. Address of Operator P.O. Box 728, Hobbs, New Mexico 88240	9. Well No. 5
4. Location of Well UNIT LETTER <u>G</u> <u>1980</u> FEET FROM THE <u>North</u> LINE AND <u>1650</u> FEET FROM THE <u>East</u> LINE, SECTION <u>11</u> TOWNSHIP <u>20S</u> RANGE <u>37E</u> NMPM.	10. Field and Pool, or Wildcat Weir Blinebry East Skaggs Drinkard
15. Elevation (Show whether DF, RT, GR, etc.) 3609 DF	12. County Lea

16.

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 ☐  
OTHER Abandon the Blinebry and Drinkard ☒

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐  
CASING TEST AND CEMENT JOBS ☐  
OTHER ☐

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.

1. MIRUPU. TOH w/pump and rods. Install BOP. TOH w/tbg.
2. TIH w/5½" cmt. retainer and set @ 5323', above junk @ 5326'.
3. Pump into retainer and establish an injection rate. Monitor backside of tubing. If no injection can be made below retainer, spot 5' of cmt. on retainer, otherwise continue to next step.
4. Below retainer, pump 350 sxs. class "H" cmt. w/2% CaCl<sub>2</sub>. Squeeze Blinebry perfs @ 5814-96' (32 holes) and Drinkard perfs @ 6870-90' (30 holes). Sting out of retainer, circulate hole clean. TOH.
5. TIH w/production tbg. ND BOP. TIH w/pump and rods. POB.
6. Pump and test Skaggs Glorieta perfs @ 5250-5318'.
7. Note that this well had been downhole commingled in the Skaggs Glorieta, the Weir Blinebry, East, and the Skaggs Drinkard pools as per Order No. R-4366, dated 9-6-72. Please cancel this order since this well will only produce from the Skaggs Glorieta as a single completion.

THIS DOCUMENT IS NOT TO BE REPRODUCED OR TRANSMITTED IN ANY FORM OR BY ANY MEANS, ELECTRONIC OR MECHANICAL, INCLUDING PHOTOCOPYING, RECORDING, OR BY ANY INFORMATION STORAGE AND RETRIEVAL SYSTEM, WITHOUT PERMISSION IN WRITING FROM THE OIL CONSERVATION DIVISION, NEW MEXICO DEPARTMENT OF ENERGY AND MINERALS.

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

SIGNED W. Browning TITLE District Admn. Supervisor DATE 4-3-87  
APPROVED BY [Signature] TITLE DISTRICT 1 SUPERVISOR DATE APR 6 1987  
CONDITIONS OF APPROVAL, IF ANY:

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-78

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5a. Indicate Type of Lease  
State ☐ Fee ☒

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. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name
2. Name of Operator TEXACO Inc.	8. Farm or Lease Name C. H. Weir "B"
3. Address of Operator P. O. Box 728, Hobbs, New Mexico 88240	9. Well No. 5
4. Location of Well UNIT LETTER <u>G</u> , 1980 FEET FROM THE <u>North</u> LINE AND <u>1650</u> FEET FROM THE <u>East</u> LINE, SECTION <u>11</u> TOWNSHIP <u>20-S</u> RANGE <u>37-E</u> NMPM.	10. Field and Pool, or Wildcat Skaggs Glorieta
15. Elevation (Show whether DF, RT, GR, etc.) 3609' DF	12. County Lea

16. 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 PLANS <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 checked="" type="checkbox"/>	OTHER <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.

- 1). MIRU Pulling unit. TOH w/rods and pump. Installed BOP. TOH W/tbg.
- 2). By wireline, set CIBP @ 2000'. Perfed 2 squeeze holes @ 1440'.
- 3). TIH W/pkr and set @ 1200'. Pumped 20 bbl. brine and broke circulation out 5 1/2" x 8 5/8" bradenhead. TOH w/pkr.
- 4). Via csg., cement squeezed perfs @ 1440' w/400 sxs class "H" cmt. w/2% CaCl2. Displaced w/29 BW. Circulated 1 bbl. cmt out bradenhead. WOC.
- 5). N&U csg head and tested to 500#. TIH w/bit and tagged TOC @ 1093'. Drilled cmt to 1460'. Pressure tested csg. to surface to 500# for 30 minutes and held. Drilled CIBP and TOH W/bit.
- 6). TIH W/production equipment. POB 12-18-86. RD PU.

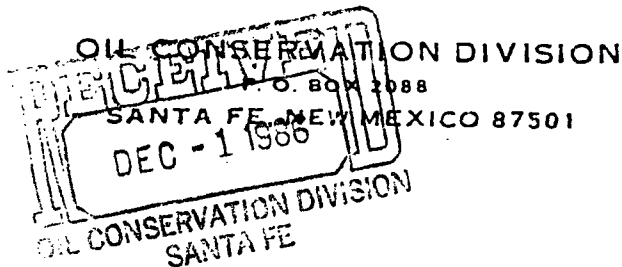
18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED [Signature] TITLE Dist. Admin. Superv. DATE 12-30-86

APPROVED BY [Signature] TITLE DISTRICT 1 SUPERVISOR DATE JAN 9 1987

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OPERATOR	



5a. Indicate Type of Lease  
State ☐ Fee ☒  
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 Texaco Inc.	8. Farm or Lease Name C.H. Weir "B"
3. Address of Operator P. O. Box 728, Hobbs, NM 88240	9. Well No. 5
4. Location of Well UNIT LETTER <u>G</u> <u>1650</u> FEET FROM THE <u>East</u> LINE AND <u>1980</u> FEET FROM THE <u>North</u> LINE, SECTION <u>11</u> TOWNSHIP <u>20-S</u> RANGE <u>37-E</u> N.M.P.M.	10. Field and Prod. or Wildcat Skaggs Glorieta, Skaggs Dr and Weir Blinberry East
15. Elevation (Show whether DF, RT, GR, etc.) 3609' DF	12. County LEA

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

PERFORM REMEDIAL WORK <input checked="" type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <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 JOBS <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 1109.

1. MIRUPU, Kill well TOH w/ rods and pump. Install BOP, TOH w/ 2 3/8" tbgs @ 5316'.
2. Load hole w/ water. Repair 5 1/2" flange and install 2" bradenhead, riser and valve.
3. By wireline, set CIBP @ ± 1500'. TIH w/ csg. gun and shoot 2 squeeze perfs @ 1440'.
4. TIH w/ cmt. retainer and set @ ± 1350' (csg. was tested to 1000# for 30 mins. in April, 1986 and held). Load backside. Establish rate into perfs and attempt to circulate to surface. Pump 400 sxs. class "H" cmt. (50% excess) w/ 2% CaCl2 into perfs. Pull out of retainer and circulate tbgs. clean. Squeeze bradenhead w/ 25 sxs. TOH. WOC.
5. TIH w/ bit and drill out retainer and cmt. to CIBP. Close BOP and pressure test squeezed perfs to 1000#. If necessary, resqueeze w/ 100 sxs. Drill CIBP and TOH.
6. TIH w/ 2 3/8" production tbgs. Remove BOP. TIH w/ pump and rods. POB.
7. RDPFU.

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

SIGNED JW Browning TITLE Dist. Admin. Supervisor DATE 11-17-86  
APPROVED BY [Signature] TITLE DISTRICT 1 SUPERVISOR DATE NOV 26 1986  
CONDITIONS OF APPROVAL, IF ANY:



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

Form C-103  
Revised 10-1-78

NO. OFFER RECEIVED	
CITY SECTION	
SANTA FE	
FILE	
U.S.G.B.	
LAND OFFICE	
OPERATOR	

5a. Indicate Type of Lease  
State ☐ Fee ☒

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. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name
2. Name of Operator Texaco Inc.	8. Farm or Lease Name C. H. Weir "B"
3. Address of Operator P. O. Box 728, Hobbs, NM 88240	9. Well No. 5
4. Location of well UNIT LETTER <u>G</u> <u>1650</u> FEET FROM THE <u>East</u> LINE AND <u>1980</u> FEET FROM THE <u>North</u> LINE, SECTION <u>11</u> TOWNSHIP <u>20S</u> RANGE <u>37E</u> NMPM.	10. Field and Pool, or Wildcat Skaggs Glorieta
15. Elevation (Show whether DF, RT, GR, etc.) 3609' DF	12. County Lea

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 checked="" type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <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"/>	OTHER <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.

- 1) MIRUPU. TOH w/pump, rods, and tbg. Installed BOP.
- 2) TIH w/4 3/4" bit, csg. scraper, and 2 7/8" workstring.  
Tag fill @ 5316'. TOH.
- 3) TIH w/pkr and RBP. Set RBP @ 5293', raised pkr. and tested csg. @ 0-5293' to 1000# for 30 min., held ok. TOH w/RBP and pkr.
- 4) With 4" csg. gun, perfed Glorieta w/2 SPF @ 5250, 54, 81, 83, 85, 92, 94, 96, 5301, 03, and 5305' (11 intervals, 22 holes).
- 5) TIH w/pkr on workstring and set @ 5185'. Acidized all perfs @ 5250-5316' w/3600 gal. 15% NEFE acid and 51 ball sealers. AIR 6 BPM. Some ball action. toh w/ pkr.
- 6) TIH w/2 3/8" tbg., pump, and rods. Set MA @ 5316', SN @ 5300'. POB.
- 7) On 48 hr. test, ending 04/13/86, made 39 BO, 72 BW, and 96 MCFG. Prior to workover, 24 hr., made 5 BO, 3 BW, 0 MCFG from Glorieta.
- 8) On 24 hr. potential on 05/01/86, pumped 16 BOPD, 30 BWP, Skaggs Glorieta, Weir Blinbry East, and Skaggs Drinkard Pools.

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

SIGNED AW Browning TITLE District Admin. Supervisor DATE 05/13/86  
APPROVED BY Henry Lipton TITLE DISTRICT 1 SUPERVISOR DATE MAY 20 1986  
CONDITIONS OF APPROVAL, IF ANY:

NO. OF COPIES RECEIVED	
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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 Texaco, Inc.	8. Farm or Lease Name C. H. Weir B
3. Address of Operator P.O. Box 728, Hobbs, NM 88240	9. Well No. 5
4. Location of Well UNIT LETTER <u>G</u> <u>1650</u> FEET FROM THE <u>East</u> LINE AND <u>1980</u> FEET FROM THE <u>North</u> LINE, SECTION <u>11</u> TOWNSHIP <u>20S</u> RANGE <u>37E</u> NMPM.	10. Field and Pool, or Wildcat Skaggs Glorieta
15. Elevation (Show whether DF, RT, GR, etc.) 3609' DF	12. County Lea

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

PERFORM REMEDIAL WORK <input checked="" type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <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"/>	

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.

- 1) MIRUPPU. Pull rods and pump. Install BOP. TOH w/180 jts 2 3/8" tbg. Monitor for H<sub>2</sub>S gas level.
- 2) TIH w/4 3/4" bit and csg scraper, Clean 5 1/2" csg to PBTD 5326'. Circulate clean. TOH. TIH w/RBP set above perfs and pressure test casing to 750#. Squeeze any leaks.
- 3) GIH w/4# csg gun and perforate the Glorieta s/2SPF @ 5250, 54, 5281, 83, 85, 92, 94, 96, 5301, 03, 05, 38, 44, and 5351' (14 interfals, 28 holes).
- 4) TIH w/treating pkr. and workstring. Set pkr @ 5200'+. Load backside.
- 5) Treat all Glorieta perfs @ 5250'-5351' (34 holes) w/3,600 gal 15% NEFE Acid, clay stabilizer, 1 drum mutual-solvent (checker-sol), and 51 ball sealers (150% of hole#). Pump @ 6 BPM, 2800# dropping ball sealers throughout job. Flush to top perf. SI 1 hr.
- 6) Lower to RBP @ 5324', Circulate ball sealers to surface. Release RBP and TOH.
- 7) TIH W/ 2 3/8" productin tbg., pump, and rods.
- 8) RDP. Place well on pump, then test production rate w/portable tester.

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

SIGNED W. B. Under TITLE Dist. Oper. Mgr. DATE 02/03/86

APPROVED BY [Signature] TITLE DISTRICT 1 SUPERVISOR DATE FEB 7 - 1986

CONDITIONS OF APPROVAL, IF ANY:

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LAND OFFICE		
OPERATOR		

# NEW MEXICO OIL CONSERVATION COMMISSION

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

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5a. Indicate Type of Lease State <input type="checkbox"/> Fee <input checked="" type="checkbox"/>
2. Name of Operator <b>TEXACO Inc.</b>		5. State Oil & Gas Lease No.
3. Address of Operator <b>P. O. Box 728, Hobbs, New Mexico 88240</b>		7. Unit Agreement Name
4. Location of Well UNIT LETTER <b>G</b> , <b>1650</b> FEET FROM THE <b>East</b> LINE AND <b>1980</b> FEET FROM THE <b>North</b> LINE, SECTION <b>11</b> TOWNSHIP <b>20-S</b> RANGE <b>37-E</b> NMPM.		8. Farm or Lease Name <b>C. H. Weir 'B'</b>
15. Elevation (Show whether DF, RT, GR, etc.) <b>3610' DF</b>		9. Well No. <b>5</b>
12. County <b>Lea</b>		10. Field and Pool, or Wildcat <b>*</b>

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 PLANS <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 JOBS <input type="checkbox"/>	
OTHER _____		OTHER <b>Downhole Commingle</b> <input checked="" type="checkbox"/>	
		<b>*Skaggs Glorieta, Skaggs Drinkard, &amp; East Weir-Blinbry</b>	

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.

1. Pulled pumping equipment.
2. Pulled Skaggs Glorieta, Skaggs Drinkard, & East Weir-Blinbry Tubing.
3. Unable to fish junk in hole @ 5326'.
4. Ran 5300' 2 1/16" tubing & pumping equipment.
5. Downhole Commingled 4-12-73.
6. On 24 hr. test 6-13-73. Pumped 4 barrels, oil 64 barrels water, GOR 10,000, Gravity 35.8.

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

SIGNED *John W. Runyan* TITLE Asst. Dist Supt. DATE 6-18-73

APPROVED BY *John W. Runyan* TITLE Geologist DATE JUN 21 1973

CONDITIONS OF APPROVAL, IF ANY:

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LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	

**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

**I. PRORATION OFFICE**

Operator  
**TEXACO Inc.**

Address  
**P. O. Box 728, 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 type="checkbox"/> Dry Gas <input type="checkbox"/>	
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input checked="" 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 <b>C. H. Weir "B"</b>	Well No. <b>5</b>	Pool Name, including Formation <b>Skaggs Glorieta</b>	Kind of Lease State, Federal or Fee <b>Fee</b>	Lease No. <b>--</b>
Location Unit Letter <b>G</b> ; <b>1650</b> Feet From The <b>East</b> Line and <b>1980</b> Feet From The <b>North</b>				
Line of Section <b>11</b> Township <b>20-S</b> Range <b>37-E</b> , NMPM, <b>Lea</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"/>	Address (Give address to which approved copy of this form is to be sent)
<b>Shell Pipe Line Company</b>	<b>P. O. Box 1910, Midland, Texas 79701</b>
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
<b>Warren Petroleum Company</b>	<b>P. O. Box 1589, Tulsa, Oklahoma 74102</b>
If well produces oil or liquids, give location of tanks.	Is gas actually connected? When
Unit <b>K</b> Sec. <b>12</b> Twp. <b>20-S</b> Rge. <b>37-E</b>	<b>Yes</b> <b>Not available</b>

If this production is commingled with that from any other lease or pool, give commingling order number: **PC-70**

**IV. COMPLETION DATA**

Designate Type of Completion - (X)	Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> New Well <input type="checkbox"/> Workover <input type="checkbox"/> Deepen <input type="checkbox"/> Plug Back <input type="checkbox"/> Same Resrv. <input type="checkbox"/> Diff. Resrv. <input type="checkbox"/>
Date Spudded	Date Compl. Ready to Prod.
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation
Perforations	Top Oil/Gas Pay
Tubing Depth	
Depth Casing Shoe	
<b>TUBING, CASING, AND CEMENTING RECORD</b>	
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**

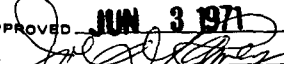
Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shot-In)	Casing Pressure (Shot-In)	Choke Size

**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.

  
**Assistant District Superintendent**  
(Title)  
**June 2, 1971**  
(Date)

**OIL CONSERVATION COMMISSION**

APPROVED **JUN 3 1971**, 19\_\_\_\_  
BY   
TITLE **SUPERVISOR DISTRICT**

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.

NUMBER OF COPIES RECEIVED	
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LAND OFFICE	
TRANSPORTER	OIL
	GAS
PRODUCTION OFFICE	
OPERATOR	

**NEW MEXICO OIL CONSERVATION COMMISSION**  
**SANTA FE, NEW MEXICO**  
**CERTIFICATE OF COMPLIANCE AND AUTHORIZATION**  
**TO TRANSPORT OIL AND NATURAL GAS**

**FORM C-110**  
 (Rev. 7-60)

FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE

Company or Operator <b>TEXACO Inc.</b>				Lease <b>C. H. Weir "B"</b>		Well No. <b>5</b>	
Unit Letter <b>G</b>	Section <b>11</b>	Township <b>20-S</b>	Range <b>37-E</b>	County <b>Lea</b>			
Pool				Kind of Lease (State, Fed, Fee) <b>Patented</b>			
If well produces oil or condensate give location of tanks			Unit Letter <b>K</b>	Section <b>12</b>	Township <b>20-S</b>	Range <b>37-E</b>	
Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/>  <b>Shell Pipe Line Company</b>				Address (give address to which approved copy of this form is to be sent)  <b>P. O. Box 1910 Midland, Texas</b>			
Is Gas Actually Connected? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>							
Authorized transporter of casing head gas <input type="checkbox"/> or dry gas <input type="checkbox"/>  <b>*None</b>			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:

**\*TSTM**

**REASON(S) FOR FILING (please check proper box)**

New Well ... **NEW WELL** ..... ☒  
 Change in Transporter (check one)  
 Oil ..... ☐ Dry Gas ..... ☐  
 Casing head gas . ☐ Condensate . ☐

Change in Ownership ..... ☐  
 Other (explain below)

MAIN OFFICE OCC  
 1962 MAR 23 10:38

Remarks

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

Executed this the 13th day of March, 19 62.

OIL CONSERVATION COMMISSION		By
Approved by		<i>[Signature]</i>
Title		<b>Assistant District Superintendent</b>
Date		Company <b>TEXACO Inc.</b>
		Address <b>P. O. Box 728 Hobbs, New Mexico</b>

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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
PRODUCTION OFFICE	
OPERATOR	

# NEW MEXICO OIL CONSERVATION COMMISSION

SANTA FE, NEW MEXICO

FORM C-110

(Rev. 7-60)

## CERTIFICATE OF COMPLIANCE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE

Company or Operator <b>TEXACO Inc.</b>				Lease <b>C. H. Weir "B"</b>		Well No. <b>5</b>	
Unit Letter <b>G</b>	Section <b>11</b>	Township <b>20-S</b>	Range <b>37-E</b>		County <b>Lea</b>		
Pool <b>Skaggs Drinkard</b>				Kind of Lease (State, Fed, Fee) <b>Patented</b>			
If well produces oil or condensate give location of tanks			Unit Letter <b>K</b>	Section <b>12</b>	Township <b>20-S</b>	Range <b>37-E</b>	
Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/> <b>Shell Pipe Line Company</b>				Address (give address to which approved copy of this form is to be sent) <b>P.O. Box 1910 - Midland, Texas</b>			
Is Gas Actually Connected? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>							
Authorized transporter of casing head gas <input checked="" type="checkbox"/> or dry gas <input type="checkbox"/> <b>Warren Petroleum Corp.</b>			Date Con- nected <b>3-15-62</b>	Address (give address to which approved copy of this form is to be sent) <b>Lovington, New Mexico</b>			

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

### REASON(S) FOR FILING (please check proper box)

New Well ..... ☒

Change in Ownership ..... ☐

Change in Transporter (check one)

Other (explain below)

Oil ..... ☐ Dry Gas ..... ☐

Casing head gas . ☐ Condensate . ☐

1962 MAR 23 AM 8:38

MAIN OFFICE OCC

Remarks

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

Executed this the 16th day of March, 1962.

OIL CONSERVATION COMMISSION

Approved by

By

H.N. Wade

Title

Assistant District Superintendent

Company

TEXACO Inc.

Address

P.O. Box 728 - Hobbs, New Mexico

Date

1962

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	GAS
PRODUCTION OFFICE	
OPERATOR	

# NEW MEXICO OIL CONSERVATION COMMISSION

Santa Fe, New Mexico

(Form C-101)  
Revised 7/1/57

## REQUEST FOR (OIL) - (GAS) ALLOWABLE

New Well  
Recompletion

This form shall be submitted by the operator before an initial allowable will be assigned to any completed Oil or Gas well. Form C-104 is to be submitted in QUADRUPPLICATE to the same District Office to which Form C-101 was sent. The allowable will be assigned effective 7:00 A.M. on date of completion or recompletion, provided this form is filed during calendar month of completion or recompletion. The completion date shall be that date in the case of an oil well when new oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit. TEXACO Inc. P. O. Box 728

Hobbs, New Mexico March 16, 1962  
(Place) (Date)

WE ARE HEREBY REQUESTING AN ALLOWABLE FOR A WELL KNOWN AS:

TEXACO Inc. C. H. Weir "B", Well No. 5, in SW 1/4 NE 1/4,  
(Company or Operator) (Lease)

G, Sec. 11, T. 20-S, R. 37-E, NMPM, Skaggs Drinkard Pool  
Unit Letter

Lea County Date Spudded Nov. 30, 1961 Date Drilling Completed Jan. 7, 1962

Please indicate location:

D	C	B	A
E	F	G	H
		X	
L	K	J	I
M	N	O	P

Elevation 3610' (D.F.) Total Depth 6393' PBD 6935'

Top Oil/Gas Pay 6870' Name of Prod. Form Drinkard

### PRODUCING INTERVAL -

Perforations 6870' to 6880', and 6885' to 6890'

Open Hole None Depth Casing Shoe 6937' Depth Tubing 6807'

### OIL WELL TEST -

Natural Prod. Test: bbls. oil, bbls water in hrs, Choke min. Size

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): 14 bbls. oil, 60 bbls water in 24 hrs, 0 min. Size Pump

### GAS WELL TEST -

Natural Prod. Test: MCF/Day; Hours flowed Choke-Size

Method of Testing (pitot, back pressure, etc.):

Test After Acid or Fracture Treatment: MCF/Day; Hours flowed

Choke Size Method of Testing:

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): See Remarks

Casing Tubing Date first new March 10, 1962  
Press. -- Press. Pump oil run to tanks

Oil Transporter Shell Pipe Line Company

Gas Transporter Warren Petroleum Company

Remarks: Perforate 5 1/2" O. D. Casing with 2 jet shots per ft. 6870' to 6880', and 6885' to 6890'. Acidize with 500 Gals LST NEA.

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

Approved MAR 19 1962, 19 TEXACO Inc.

(Company or Operator)

OIL CONSERVATION COMMISSION

By: [Signature] (Signature)

Title Assistant District Superintendent  
Send Communications regarding well to:

Name H. N. Wade

Address P.O. Box 728 - Hobbs, New Mexico

**NEW MEXICO OIL CONSERVATION COMMISSION**  
Santa Fe, New Mexico

(Form C-104)  
Revised 7/15/57

## REQUEST FOR (OIL) - (GAS) ALLOWABLE

New Well  
Recompletion

This form shall be submitted by the operator before an initial allowable will be assigned to any completed Oil or Gas well. Form C-104 is to be submitted in QUADRUPPLICATE to the same District Office to which Form C-101 was sent. The allowable will be assigned effective 7:00 A.M. on date of completion or recompletion, provided this form is filed during calendar month of completion or recompletion. The completion date shall be that date in the case of an oil well when new oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

TEXACO Inc. Box 728  
Hobbs, New Mexico March 13, 1962

(Place) (Date)

**WE ARE HEREBY REQUESTING AN ALLOWABLE FOR A WELL KNOWN AS:**

TEXACO Inc. C. H. Weir "B", Well No. 5, in SW 1/4 NE 1/4,  
(Company or Operator) (Lease)

G, Sec. 11, T. 20-S, R. 37-E, NMPM, Skaggs (Glorieta) Pool  
Unit Letter

Lea County. Date Spudded Nov. 30, 1961 Date Drilling Completed Jan. 7, 1962

Please indicate location:

D	C	B	A
E	F	G	H
L	K	J	I
M	N	O	P

Elevation 3610' (D.F.) Total Depth 6937' PBTD 6935'

Top Oil/Gas Pay 5310' Name of Prod. Form. Glorieta

PRODUCING INTERVAL -

Perforations 5310' to 5318'

Open Hole None Depth Casing Shoe 6937' Depth Topping 5288'

OIL WELL TEST -

Natural Prod. Test: bbls. oil, bbls water in hrs, min. Choke Size

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): 33 bbls. oil, 27 bbls water in 24 hrs, 0 min. Choke Size Pump

GAS WELL TEST -

Natural Prod. Test: MCF/Day; Hours flowed Choke Size

Method of Testing (pitot, back pressure, etc.):

Test After Acid or Fracture Treatment: MCF/Day; Hours flowed

Choke Size Method of Testing:

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): Shell Pipe Line Company

Casing Tubing Date first new Press. -- Press. Pump oil run to tanks March 5, 1962

Oil Transporter Shell Pipe Line

Gas Transporter (None) TSTM

Remarks: Perforate 5-1/2" casing with 2 jet shots per ft 5310' to 5318'. Acidize with 500 gals LST NEA. Re-acidize with 2000 gals LST NEA, re-acidize with 3000 gals LST NEA, re-acidize with 5000 gals LST NEA.

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

Approved: 12-19-62, 19

TEXACO Inc.

(Company or Operator)

By: *H. N. Wade*

(Signature)

Title Asst. District Superintendent

Send Communications regarding well to:

Name H. N. Wade

Address Box 728 - Hobbs, New Mexico

**OIL CONSERVATION COMMISSION**

By: *[Signature]*

Title



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TRANSPORTER	OIL
	GAS
PRODUCTION OFFICE	
OPERATOR	

**NEW MEXICO OIL CONSERVATION COMMISSION**  
**SANTA FE, NEW MEXICO**  
**CERTIFICATE OF COMPLIANCE AND AUTHORIZATION**  
**TO TRANSPORT OIL AND NATURAL GAS**

**FORM C-110**  
 (Rev. 7-60)

FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE

Company or Operator <b>TEXACO Inc.</b>	1962 NOV 29 AM 9 29 C. H. Weir "B"	Well No. <b>5</b>
---	---------------------------------------	----------------------

Unit Letter <b>G</b>	Section <b>11</b>	Township <b>20-S</b>	Range <b>37-E</b>	County <b>Lea</b>
-------------------------	----------------------	-------------------------	----------------------	----------------------

Pool <b>East Weir Blinebry</b>	Kind of Lease (State, Fed, Fee) <b>Patented</b>
-----------------------------------	--

If well produces oil or condensate give location of tanks	Unit Letter <b>G</b>	Section <b>11</b>	Township <b>20-S</b>	Range <b>37-E</b>
--	-------------------------	----------------------	-------------------------	----------------------

Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/> <b>*Shell Pipe Line Company</b>	Address (give address to which approved copy of this form is to be sent) <b>P. O. Box 1910 Midland, Texas</b>
---	--

Is Gas Actually Connected? Yes ☒ No ☐

Authorized transporter of casing head gas <input checked="" type="checkbox"/> or dry gas <input type="checkbox"/> <b>Warren Petroleum Company</b>	Date Connected <b>2-20-62</b>	Address (give address to which approved copy of this form is to be sent) <b>Lovington, New Mexico</b>
--	----------------------------------	--

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

**REASON(S) FOR FILING (please check proper box)**

New Well ..... <input type="checkbox"/>	Change in Ownership ..... <input type="checkbox"/>
Change in Transporter (check one)	Other (explain below)
Oil ..... <input checked="" type="checkbox"/> Dry Gas ..... <input type="checkbox"/>	
Casing head gas . <input type="checkbox"/> Condensate.. <input type="checkbox"/>	

Remarks  
 \*This C-110 filed to show change in transporter from Texas-New Mexico Pipe Line to Shell Pipe Line Company.

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

Executed this the 29th day of November, 19 62.

<b>OIL CONSERVATION COMMISSION</b>	By 
Approved by 	Title <b>District Accountant</b>
Title	Company <b>TEXACO Inc.</b>
Date	Address <b>P.O. Box 728 - Hobbs, New Mexico</b>

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PRODUCTION OFFICE	
OPERATOR	

**NEW MEXICO OIL CONSERVATION COMMISSION**  
**SANTA FE, NEW MEXICO**  
**CERTIFICATE OF COMPLIANCE AND AUTHORIZATION**  
**TO TRANSPORT OIL AND NATURAL GAS**

**FORM C-110**  
 (Rev. 7-60)

FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE

Company or Operator <b>TEXACO Inc.</b>				Lease <b>C. H. Weir "B"</b>		Well No. <b>5</b>	
Unit Letter <b>G</b>	Section <b>11</b>	Township <b>20-S</b>	Range <b>37-E</b>	County <b>Lea</b>			
Pool <b>East Weir Blinebry</b>				Kind of Lease (State, Fed, Fee) <b>Patented</b>			
If well produces oil or condensate give location of tanks		Unit Letter <b>G</b>	Section <b>11</b>	Township <b>20-S</b>	Range <b>37-E</b>		
Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/>  <b>*Texas New Mexico Pipe Line Company</b>				Address (give address to which approved copy of this form is to be sent) <b>P. O. Box 1510 Midland, Texas</b>			
Is Gas Actually Connected? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>							
Authorized transporter of casing head gas <input checked="" type="checkbox"/> or dry gas <input type="checkbox"/>  <b>Warren Petroleum Company</b>		Date Connected <b>2-20-62</b>	Address (give address to which approved copy of this form is to be sent) <b>Lovington, New Mexico</b>				

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

**REASON(S) FOR FILING (please check proper box)**

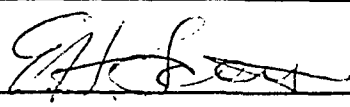
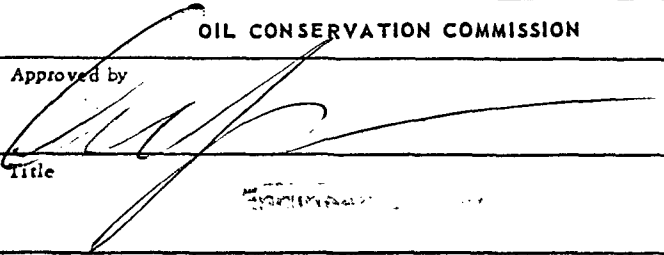
New Well ..... ☐ Change in Ownership ..... ☐  
 Change in Transporter (check one)  
   Oil ..... ☒ Dry Gas ..... ☐  
   Casing head gas ..... ☐ Condensate ..... ☐  
 Other (explain below)

Remarks

\*This C-110 filed to show change in transporter from The Permain Corporation to Texas New Mexico Pipe Line Company.

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

Executed this the 1st day of November, 19 62.

OIL CONSERVATION COMMISSION		By	
Approved by		Title	<b>District Accountant</b>
Title		Company	<b>TEXACO Inc.</b>
Date		Address	<b>P. O. Box 728 - Hobbs, New Mexico</b>


NEW MEXICO OIL CONSERVATION COMMISSION  
Santa Fe, New Mexico

WELL RECORD

Mail to District Office, Oil Conservation Commission, to which Form C-101 was sent not later than twenty days after completion of well. Follow instructions in Rules and Regulations of the Commission. Submit in QUINTUPLICATE. If State Land submit 6 Copies

AREA 640 ACRES  
LOCATE WELL CORRECTLY

TEXACO Inc. C. H. Weir "B"  
(Company or Operator) (Lessee)  
Well No. 5, in SW 1/4 of NE 1/4, of Sec. 11, T. 20-S, R. 37-E, NMPM.  
Skaggs (Glorieta) Skaggs (Drinkard) Pool, Lea County.  
Well is 1650 Blinbry (Gas) East line and 1980 feet from North line  
of Section 11. If State Land the Oil and Gas Lease No. is No  
Drilling Commenced November 30, 1961. Drilling was Completed January 7, 1962  
Name of Drilling Contractor Rowan Drilling Company, Inc.  
Address P. O. Box 1873 - Midland, Texas  
Elevation above sea level at Top of Tubing Head 3610' (D.F.) The information given is to be kept confidential until  
June, 1962

OIL SANDS OR ZONES

See Attached Sheet  
No. 1, from to No. 4, from to  
No. 2, from to No. 5, from to  
No. 3, from to No. 6, from to  
Drilled with rotary tools and no water sands tested.

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

CASING RECORD

SIZE	WEIGHT PER FOOT	NEW OR USED	AMOUNT	KIND OF LUGS	CUT AND PULLED FROM	PERFORATIONS	PURPOSE
8-5/8"	24.00	New	1419'	Howco	None	None	Surface
5-1/2"	14.00	New	6924'	Howco	None	See attached	Production

MUDDING AND CEMENTING RECORD

SIZE OF HOLE	SIZE OF CASING	WHERE SET	NO. BAGS OF CEMENT	METHOD USED	MUD GRAVITY	AMOUNT OF MUD USED
11"	8-5/8"	1429'	600	Howco		
6-1/4"	5-1/2"	6937'	1050	Howco		

RECORD OF PRODUCTION AND STIMULATION

(Record the Process used, No. of Qts. or Gals. used, interval treated or shot.)

See Attached Sheet  
Result of Production Stimulation See attached sheet

Depth Cased Out 6937'  
FBTD 6935'

# 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 0 feet to 6937 feet, and from feet to feet.  
Cable tools were used from feet to feet, and from feet to feet.

## PRODUCTION

Put to Producing February 18, 19 62

OIL WELL: The production during the first 24 hours was 30 barrels of liquid of which 100 % was oil; % was emulsion; % water; and % was sediment. A.P.I. Gravity 42.9

GAS WELL: The production during the first 24 hours was M.C.F. plus barrels of Liquid Hydrocarbon. Shut in Pressure lbs.

Length of Time Shut in

## PLEASE INDICATE BELOW FORMATION TOPS (IN CONFORMANCE WITH GEOGRAPHICAL SECTION OF STATE):

### Southeastern New Mexico

### Northwestern New Mexico

T. Anhy. 1400'	T. Devonian	T. Ojo Alamo
T. Salt 1495'	T. Silurian	T. Kirtland-Fruitland
B. Salt 2538'	T. Montoya	T. Farmington
T. Yates 2603'	T. Simpson	T. Pictured Cliffs
T. 7 Rivers	T. McKee	T. Menefee
T. Queen	T. Ellenburger	T. Point Lookout
T. Grayburg	T. Gr. Wash	T. Mancos
T. San Andres	T. Granite	T. Dakota
T. Glorietta 5247'	T.	T. Morrison
T. Blinberry 5812'	T.	T. Penn
T. Drinkard 6805'	T.	
T. Tubbs 6405'	T.	
T. Abo	T.	
T. Penn	T.	
T. Miss	T.	

## FORMATION RECORD

From	To	Thickness in Feet	Formation	From	To	Thickness in Feet	Formation
0	473	473	Caliche	DEVIATION RECORD			
473	1250	777	Redbed	DEPTH DEGREES OFF			
1250	1852	602	Anhy	305			3/4
1852	2546	694	Anhy & Salt	1295			1/4
2546	3085	539	Anhy	1785			3/4
3085	3216	131	Anhy & Gyp	2023			1/2
3216	3332	116	Lime	2930			3/4
3332	3465	133	Anhy	3176		1	
3465	3554	89	Lime & Anhy	3760		3/4	
3554	3811	257	Lime & Gyp	4140		3/4	
3811	4389	578	Lime	4827		3	
4389	4509	120	Lime & Sand	5140		3	
4509	4898	389	Lime	5868		2-1/4	
4898	4991	93	Sand & Lime	6025		2	
4991	5711	720	Lime	6840		1	
5711	5753	42	Dolomite	6937		1	
5753	5997	244	Lime	ESTIMATE No. 5740			
5997	6059	62	Lime & Shale	5 - NMOCC			
6059	6652	593	Lime	1 - Division			
6652	6842	190	Lime & Sand	1 - Field			
6842	6937	95	Lime	1 - File			
Total Depth	6937'						
PBTD	6935'						
All measurements from rotary table or 10' above ground level.							

ATTACH SEPARATE SHEET IF ADDITIONAL SPACE IS NEEDED

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.

Company or Operator TEXACO Inc.

Address Box 728 - Hobbs, New Mexico

Name H. N. Wade

Position or Title Asst. Dist. Superintendent

March 16, 1962

(Date)

C. H. WEIR WELL NO. 5

Skaggs (Drinkard) Zone

Perforate 5 1/2" O.D. casing with 2 jet shots per ft. 6870' to 6880', and 6885' to 6890'. Acidize with 500 gals LST NEA. Kill well.

Blinebry (Oil) Zone

Perforate 5 1/2" O.D. casing with 2 jet shots per ft. 5944' to 5956', and 5972' to 5984'. Acidize with 1000 gals LST NEA. Swab dry. Re-acidize with 3000 gals LST NEA. Frac with 20,000 gals refined oil and 30,000 lbs. sand. Squeeze perforations 5944' to 5956', and 5972' to 5984' with 350 sx. cement. Perforate 5 1/2" casing with 2 jet shots per ft. 5814' to 5817', 5826' to 5829', 5845' to 5847', 5854' to 5858', 5870' to 5872', and 5894' to 5896'. Acidize with 2000 gals LST NEA and 250 lbs. crushed naphthalene. Swab dry. Frac with 15,000 gals refined oil and 22,500 lbs. sand. Kill well.

Skaggs (Glorieta) Zone

Perforate 5 1/2" casing with 2 jet shots per ft. 5310' to 5318'. Acidize with 500 gals LST NEA. Swab well. Re-acidize with 2000 gals LST NEA. Swab well. Re-acidize with 3000 gals LST NEA. Swab well. Re-acidize with 5000 gals LST NEA.

Blinebry (Oil) Zone Test

On 24 hour potential test well flowed thru 28/64" choke 30 BO and no water ending 2:00 p.m. February 18, 1962.

GOR - 22000

Gravity - 42.9

Top of Pay - 5814'

Btm of Pay - 5896'

NMOCC Date - January 7, 1962

TEXACO Inc. Date - February 18, 1962

Skaggs Glorieta Zone Test

On 24 hour potential test well pumped 33 BO and 27 BW ending 10:00 a.m. March 9, 1962.

GOR - TSTM

Gravity - 39

Top of Pay - 5310'

Btm of Pay - 5318'

NMOCC Date - January 7, 1962

TEXACO Inc. Date - March 9, 1962

Skaggs Drinkard Zone Test

On 24 hour potential test well pumped 14 BO and 60 BW ending 7:30 a.m. March 16, 1962.

GOR - TSTM

Gravity - 34.6

Top of pay - 6870'

Btm of Pay - 6890'

NMOCC Date - January 7, 1962

TEXACO Inc. Date - March 16, 1962

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# NEW MEXICO OIL CONSERVATION COMMISSION

SANTA FE, NEW MEXICO

FORM C-110

(Rev. 7-60)

## CERTIFICATE OF COMPLIANCE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

MAIN OFFICE OCC

HOBBS OFFICE OCC

FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE

Company or Operator **TEXACO Inc.** **1962 MAY 14 AM 8:43** Lease **1962 MAY 9 PM 2:48** Well No. **5**

Unit Letter **G** Section **11** Township **20-S** Range **37-E** County **Lea**

Pool **East Weir - Blinebry** Kind of Lease (State, Fed, Fee) **Patented**

If well produces oil or condensate give location of tanks Unit Letter **G** Section **11** Township **20-S** Range **37-E**

Authorized transporter of oil ☒ or condensate ☐  
**\*The Permian Corporation** Address (give address to which approved copy of this form is to be sent)  
**1509 West Wall Ave., Midland, Texas**

Is Gas Actually Connected? Yes ☒ No ☐

Authorized transporter of casing head gas ☐ or dry gas ☒ Date Connected **2-20-62** Address (give address to which approved copy of this form is to be sent)  
**Warren Petroleum Company** **Lovington, New Mexico**

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

### REASON(S) FOR FILING (please check proper box)

New Well ☐ Change in Ownership ☐  
Change in Transporter (check one) Other (explain below)  
Oil ☒ Dry Gas ☐  
Casing head gas ☐ Condensate ☐

### Remarks

**\*To change oil transporter from Shell Pipe Line Company to The Permian Corporation.**

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

Executed this the **9th** day of **May**, 19**62**.

OIL CONSERVATION COMMISSION

Approved by

By

Title

**District Accountant**

Company

**TEXACO Inc.**

Date

Address

**P. O. Box 728 - Hobbs, New Mexico**

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PRODUCTION OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION.  
SANTA FE, NEW MEXICO

FORM C-110  
(Rev. 7-60)

CERTIFICATE OF COMPLIANCE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS

OCC

FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE

Company or Operator **TEXACO Inc.** Lease **1962 APR 27 PM 1** No. **23**  
C. H. Weir "B" 5

Unit Letter **G** Section **11** Township **20-S** Range **37-E** County **Lea**

Pool **\* East Weir - Blinebry** Kind of Lease (State, Fed, Fee) **Patented**

If well produces oil or condensate give location of tanks Unit Letter **G** Section **11** Township **20-S** Range **37-E**

Authorized transporter of oil ☒ or condensate ☐ Address (give address to which approved copy of this form is to be sent)  
**Shell Pipe Line Company** **P. O. Box 1910 - Midland, Texas**

Is Gas Actually Connected? Yes ☒ No ☐

Authorized transporter of casing head gas ☐ or dry gas ☒ Date Connected **2-20-62** Address (give address to which approved copy of this form is to be sent)  
**Warren Petroleum Company** **Lovington, New Mexico**

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

REASON(S) FOR FILING (please check proper box)

New Well ☐  
Change in Transporter (check one)  
Oil ☐ Dry Gas ☐  
Casing head gas ☐ Condensate ☐

Change in Ownership ☐  
Other (explain below)

Remarks

\*To show change in pool designation.

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

Executed this the **26th** day of **April**, 19 **62**.

OIL CONSERVATION COMMISSION

Approved by

Title

Date

By

Title

Company

Address

**TEXACO Inc.**

**P. O. Box 728 - Hobbs, New Mexico**

**DIST. ACCOUNTANT**

**Assistant District Superintendent**

MAIN OFFICE OCC  
1962 MAY 4 AM 8:29

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	GAS
PRODUCTION OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION  
SANTA FE, NEW MEXICO.

FORM C-110  
(Rev. 7-60)

CERTIFICATE OF COMPLIANCE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS

HOBBS OFFICE OCC

FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE

Company or Operator

TEXACO Inc.

1962 APR 11 PM 2:59  
C. H. Weir "B"

Well No.  
5

Unit Letter

G

Section

11

Township

20-S

Range

37-E

County

Lea

Pool

Skaggs, Glorieta

Kind of Lease (State, Fed, Fee)

Patented

If well produces oil or condensate  
give location of tanks

Unit Letter

K

Section

12

Township

20-S

Range

37-E

Authorized transporter of oil ☒ or condensate ☐

Shell Pipe Line Company

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

P. O. Box 1910  
Midland, Texas

Is Gas Actually Connected? Yes ☒ No ☐

Authorized transporter of casing head gas ☒ or dry gas ☐

Date Con-  
nected

3-16-62

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

P. O. Box 38  
Hobbs, New Mexico

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

REASON(S) FOR FILING (please check proper box)

New Well ☐

Change in Ownership ☐

Change in Transporter (check one)

Other (explain below)

Oil ☐ Dry Gas ☐

Casing head gas ☒ Condensate ☐

Remarks

\*This C-110 filed to show Skelly Oil Company as Gas Transporter.

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

Executed this the 11th day of April, 1962.

OIL CONSERVATION COMMISSION

Approved by

By

Title

Assistant District Superintendent

Company

TEXACO Inc.

Date

Address

P. O. Box 728  
Hobbs, New Mexico



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	GAS
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OPERATOR	

# NEW MEXICO OIL CONSERVATION COMMISSION

SANTA FE, NEW MEXICO

FORM C-110

(Rev. 7-60)

## CERTIFICATE OF COMPLIANCE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE

Company or Operator <b>TEXACO Inc.</b>				Lease <b>C. H. Weir "B"</b>		Well No. <b>5</b>	
Unit Letter <b>G</b>	Section <b>11</b>	Township <b>20-S</b>	Range <b>37-E</b>		County <b>Lea</b>		
Pool <b>Undesignated (Blinbry)</b>					Kind of Lease (State, Fed, Fee) <b>Patented</b>		
If well produces oil or condensate give location of tanks			Unit Letter <b>G</b>	Section <b>11</b>	Township <b>20-S</b>	Range <b>37-E</b>	
Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/> <b>Shell Pipe Line Company</b>				Address (give address to which approved copy of this form is to be sent) <b>P. O. Box 1910 - Midland, Texas</b>			
Is Gas Actually Connected? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>							
Authorized transporter of casing head gas <input type="checkbox"/> or dry gas <input checked="" type="checkbox"/> <b>Warren Petroleum Company</b>			Date Connected <b>2-20-62</b>	Address (give address to which approved copy of this form is to be sent) <b>Lovington, New Mexico</b>			

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

### REASON(S) FOR FILING (please check proper box)

New Well .... **New Well** ..... ☒  
 Change in Transporter (check one)  
 Oil ..... ☐ Dry Gas ..... ☐  
 Casing head gas . ☐ Condensate . ☐

Change in Ownership ..... ☐  
 Other (explain below)

Remarks

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

Executed this the **23rd** day of **February**, 19**62**.

OIL CONSERVATION COMMISSION

Approved by

Title

Date

By

Title

Company

Address

**Assistant District Superintendent**

**TEXACO Inc.**

**P. O. Box 728 - Hobbs, New Mexico**

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# NEW MEXICO OIL CONSERVATION COMMISSION

Santa Fe, New Mexico

(Form C-104)  
Revised 7/1/57

## REQUEST FOR (OIL) - (GAS) ALLOWABLE

New Well  
Recompletion

This form shall be submitted by the operator before an initial allowable will be assigned to any completed Oil or Gas well. Form C-104 is to be submitted in QUADRUPLICATE to the same District Office to which Form C-101 was sent. The allowable will be assigned effective 7:00 A.M. on date of completion or recompletion, provided this form is filed during calendar month of completion or recompletion. The completion date shall be that date in the case of an oil well when new oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit. TEXACO Inc. P. O. Box 728

Hobbs, New Mexico February 23, 1962  
(Place) (Date)

WE ARE HEREBY REQUESTING AN ALLOWABLE FOR A WELL KNOWN AS:

TEXACO Inc. C. H. Weir "B" Well No. 5, in SW 1/4 NE 1/4,  
(Company or Operator) (Lease)  
G, Sec. 11, T. 20-S, R. 37-E, NMPM, Blinebry (Oil) Undesignated Pool  
Unit Letter

Lea County Date Spudded Nov. 30, 1961 Date Drilling Completed Jan. 7, 1962

Please indicate location:

D	C	B	A
E	F	G	H
		X	
L	K	J	I
M	N	O	P

Elevation 3610' (D.F.) Total Depth 6393' PBD 6935'

Top Oil/Gas Pay 5814' Name of Prod. Form. Blinebry

### PRODUCING INTERVAL -

Perforations See remarks

Open Hole None Depth Casing Shoe 6937' Depth Tubing 5800'

### OIL WELL TEST -

Natural Prod. Test: bbls. oil, bbls water in hrs, min. Size Choke

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): 30 bbls. oil, 0 bbls water in 24 hrs, min. Size 28/64'

### GAS WELL TEST -

Natural Prod. Test: MCF/Day; Hours flowed Choke Size

Method of Testing (pitot, back pressure, etc.):

Test After Acid or Fracture Treatment: MCF/Day; Hours flowed

Choke Size Method of Testing:

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): See remarks

Casing Tubing Date first new Press. -- Press. -- oil run to tanks February 3, 1962

Oil Transporter Shell Pipe Line Company

Gas Transporter Warren Petroleum Company

Remarks: Perforate 5 1/2" casing with 2 jet shots per ft. 5814' to 5817', 5826' to 5829', 5845' to 5847', 5854' to 5858', 5870' to 5872', and 5894' to 5896'. Acidize with 2000 gals LST NEA and 250 lbs crushed naphthalene. Swab dry. Frac with 15,000 gals refined oil and 22,500 lbs sand.

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

Approved \_\_\_\_\_, 19\_\_\_\_

OIL CONSERVATION COMMISSION

By: \_\_\_\_\_

Title \_\_\_\_\_

TEXACO Inc.

(Company or Operator)

By: \_\_\_\_\_

(Signature)

Title Assistant District Superintendent  
Send Communications regarding well to:

Name J. G. Blevins, Jr.

Address P. O. Box 728 - Hobbs, New Mexico

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PRODUCTION OFFICE	
OPERATOR	

# NEW MEXICO OIL CONSERVATION COMMISSION

FORM C-103  
(Rev 3-55)

## MISCELLANEOUS REPORTS ON WELLS

(Submit to appropriate District Office as per Commission Rule 1106)

1962 JAN 22 AM 8:51

Name of Company: **TEXACO Inc.** Address: **P. O. Box 726---Hobbs, New Mexico**

Lease	Well No.	Unit Letter	Section	Township	Range
<b>C. H. Weir "B"</b>	<b>5</b>	<b>G</b>	<b>11</b>	<b>20-S</b>	<b>37-E</b>

Date Work Performed	Pool	County
<b>January 16, 1962</b>	<b>*</b>	<b>Lea</b>

THIS IS A REPORT OF: (Check appropriate block)

- ☐ Beginning Drilling Operations   
 ☒ Casing Test and Cement Job   
 ☐ Other (Explain):  
☐ Plugging   
 ☐ Remedial Work \*Skaggs(Glorietta), Skaggs(Drinkard), & Blinebry (Gas)

Detailed account of work done, nature and quantity of materials used, and results obtained.

TD--6937'

8 5/8" Casing Cemented at 1429'

Ran 6,924' of 5 1/2" O. D. Casing, 14.00 LB, J-55, 8-R, and cemented at 6937' with 1050 SX incorn with 3% Diacel "AM" and 4% LWL. Plug at 6903'. Bond Log ran January 15, 1962, top of cement at 2525'. Cement tied in at base of salt. Job complete 7:00 A. M., January 15, 1962.

Tested 5 1/2" O. D. Casing for 30 minutes with 1700 PSI from 7:00 to 7:30 A. M., January 16, 1962. Tested O. K. Drilled cement plug and re-tested for 30 minutes with 1700PSI from 9:30 to 10:00 A. M., January 16, 1962. Tested O. K. Job complete 10:00 A. M., January 16, 1962.

Witnessed by	Position	Company
<b>C. F. Jackson</b>	<b>Production Foreman</b>	<b>TEXACO Inc.</b>

### FILL IN BELOW FOR REMEDIAL WORK REPORTS ONLY

#### ORIGINAL WELL DATA

D F Elev.	T D	P B T D	Producing Interval	Completion Date
-----------	-----	---------	--------------------	-----------------

Tubing Diameter	Tubing Depth	Oil String Diameter	Oil String Depth
-----------------	--------------	---------------------	------------------

Perforated Interval(s)

Open Hole Interval	Producing Formation(s)
--------------------	------------------------

#### RESULTS OF WORKOVER

Test	Date of Test	Oil Production BPD	Gas Production MCFPD	Water Production BPD	GOR Cubic feet/Bbl	Gas Well Potential MCFPD
Before Workover						
After Workover						

OIL CONSERVATION COMMISSION

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

Approved by	Name
	<b>Assistant District Superintendent</b>
Title	Company
<b>Assistant District Superintendent</b>	<b>TEXACO Inc.</b>
Date	

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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
PRODUCTION OFFICE	
OPERATOR	

# NEW MEXICO OIL CONSERVATION COMMISSION

FORM C-103  
(Rev 3-55)

## MISCELLANEOUS REPORTS ON WELLS

(Submit to appropriate District Office as per Commission Rule 1106)

Name of Company <b>TEXACO Inc.</b>				Address <b>P.O. Box 728 - Hobbs, New Mexico</b>			
Lease <b>C. H. Weir "B"</b>	Well No. <b>5</b>	Unit Letter <b>G</b>	Section <b>11</b>	Township <b>20-S</b>	Range <b>37-E</b>		
Date Work Performed <b>December 3, 1961</b>		Pool <b>*</b>		County <b>Lea</b>			

THIS IS A REPORT OF: (Check appropriate block)

- ☐ Beginning Drilling Operations
 ☒ Casing Test and Cement Job
 ☐ Other (Explain): **Elinebry (Gas)**
- ☐ Plugging
 ☐ Remedial Work \* **Skaggs (Glorieta) Skaggs (Drinkard)**

Detailed account of work done, nature and quantity of materials used, and results obtained.

TD - 1429'

Spudded 11" hole 8:00 P.M. November 30, 1961

Ran 1419' of 8-5/8" O.D. Casing, 24.00 Lb, J-55. 8-R, and cemented at 1429' with 400 sx Incor 4% Gel and 200 sx Incor Neat. Cement circulated. Plug at 1400'. Job complete 2:00 P.M. December 2, 1961.

Tested 8-5/8" O.D. Casing for 30 minutes with 600 PSI from 2:00 to 2:30 P.M. December 3, 1961. Tested O.K. Drilled cement plug and re-tested for 30 minutes with 600 PSI from 4:30 to 5:00 P.M. December 3, 1961. Tested O.K. Job complete 5:00 P.M. December 3, 1961.

Witnessed by <b>C. F. Jackson</b>	Position <b>Production Foreman</b>	Company <b>TEXACO Inc.</b>
--------------------------------------	---------------------------------------	-------------------------------

FILL IN BELOW FOR REMEDIAL WORK REPORTS ONLY

### ORIGINAL WELL DATA

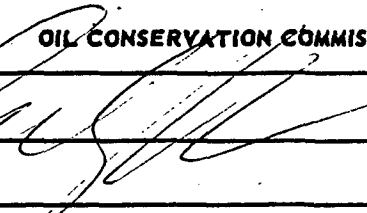
D F Elev.	TD	P BTD	Producing Interval	Completion Date
Tubing Diameter	Tubing Depth	Oil String Diameter	Oil String Depth	
Perforated Interval(s)				
Open Hole Interval			Producing Formation(s)	

### RESULTS OF WORKOVER

Test	Date of Test	Oil Production BPD	Gas Production MCFPD	Water Production BPD	GOR Cubic feet/Bbl	Gas Well Potential MCFPD
Before Workover						
After Workover						

OIL CONSERVATION COMMISSION

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

Approved by 	Name <b>J. G. Elevins, Jr.</b>
Title	Position <b>Assistant District Superintendent</b>
Date	Company <b>TEXACO Inc.</b>

65215

**NEW MEXICO OIL CONSERVATION COMMISSION**  
**Santa Fe, New Mexico**

Form C-101  
Revised (12/1/55)

## NOTICE OF INTENTION TO DRILL

must be given to the District Office of the Oil Conservation Commission and approval obtained before drilling or recompletion changes in the proposed plan are considered advisable, a copy of this notice showing such changes will be returned to the sender. this notice in QUINTUPLICATE. One copy will be returned following approval. See additional instructions in Rules and Regulations of the Commission. If State Land submit 6 Copies Attach Form C-128 in triplicate to first 3 copies of form C-101

Midland, Texas  
(Place)

November 15, 1961  
(Date)

OIL CONSERVATION COMMISSION  
SANTA FE, NEW MEXICO

Gentlemen:

You are hereby notified that it is our intention to commence the Drilling of a well to be known as  
**TEXACO Inc.**

(Company or Operator)

C. H. Weir "B" (Lease), Well No. 5, in G (Unit). The well is

located 1980 feet from the North line and 1650 feet from the

East line of Section 11, T-20-S, R -37-E, NMPM.

(GIVE LOCATION FROM SECTION LINE) Skaggs (Glorieta), Skaggs Lea County

Drinkard Undesignated Pool, Blinebry (gas)

If State Land the Oil and Gas Lease is No. - - - -

If patented land the owner is C. H. Weir

Address Box 875, Hobbs, New Mexico

We propose to drill well with drilling equipment as follows: Rotary

The status of plugging bond is \$10,000 blanket surety bond of Maryland Casualty Co. has been filed with State Geologist.

Drilling Contractor Not known at present

We intend to complete this well in the (1) Glorieta (oil) (2) Blinebry (gas) (3) Drinkard (oil)

formation at an approximate depth of 6900 feet.

### CASING PROGRAM

We propose to use the following strings of Casing and to cement them as indicated:

Size of Hole	Size of Casing	Weight per Foot	New or Second Hand	Depth	Sacks Cement
11"	8-5/8"	24#	New	1430'	600*
7-7/8"	5-1/2"	14, 15.5 & 17#	New	6900'	800 *
			*400 sx Incor	4% gel / 200	sx Incor neat

If changes in the above plans become advisable we will notify you immediately.

ADDITIONAL INFORMATION (If recompletion give full details of proposed plan of work.)

### FORMATIONS EXPECTED:

Top of Anhydrite	1400'	Top of Grayburg	3763'	Top of Tubb	6375'
" " Yates	2695'	" " San Andres	4063'	" " Drinkard	6830'
" " Queen	3511'	" " Glorieta	5247'	Total Depth	6900'
" " Penrose	3629'	" " Blinebry	5796'		

Approved: NOV 17 1961 19

Except as follows:

OIL CONSERVATION COMMISSION

TEXACO Inc.

(Company or Operator)

By

J. J. Velten

Position Division Civil Engineer

Send Communications regarding well to

Name TEXACO Inc.

Address P. O. Box 3109, Midland, Texas

**NEW MEXICO OIL CONSERVATION COMMISSION**  
**WELL LOCATION AND ACREAGE DEDICATION PLAT**

FORM C-128  
 Revised 5/1/57

SEE INSTRUCTIONS FOR COMPLETING THIS FORM ON THE REVERSE SIDE

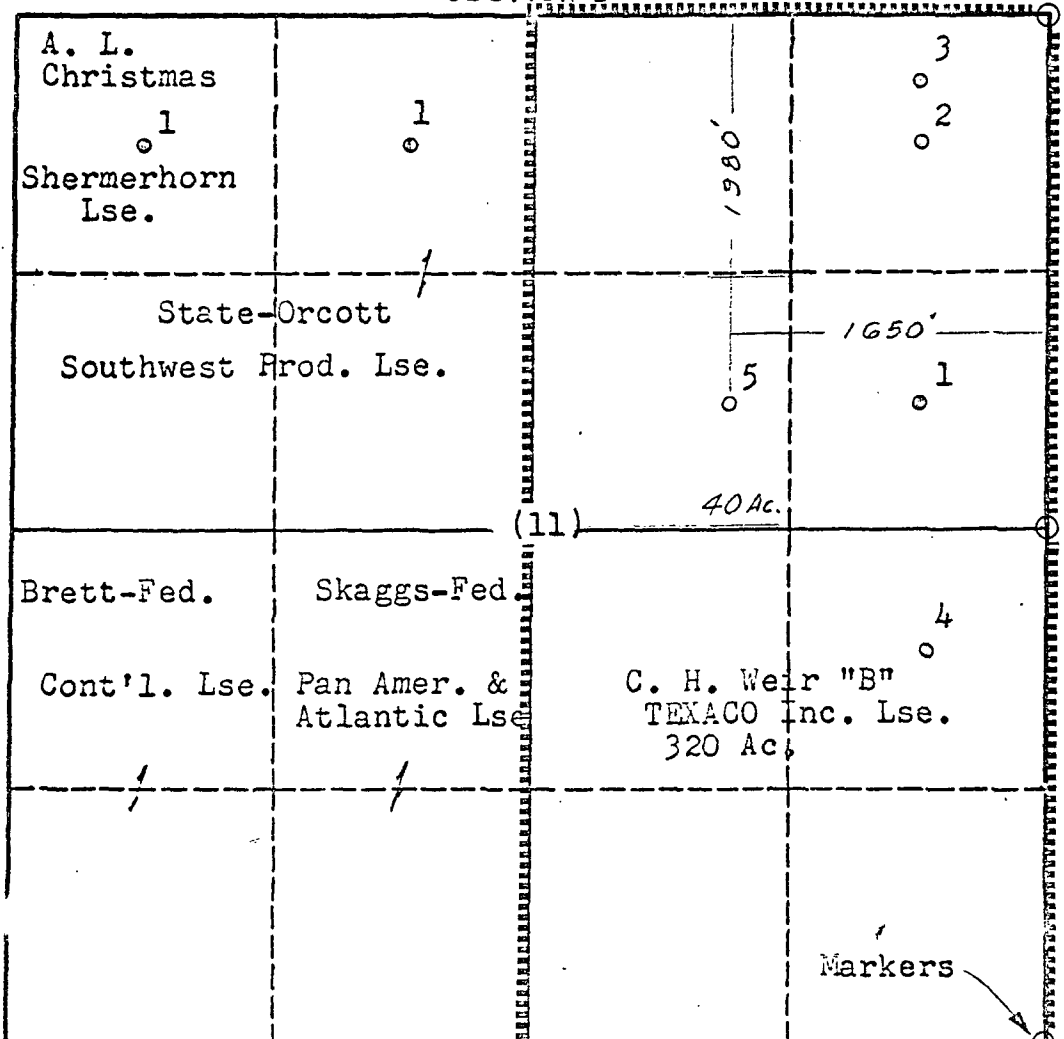
**SECTION A**

Operator <b>TEXACO Inc.</b>		Lease <b>C. H. Weir "B"</b>		Well No. <b>5</b>	
Unit Letter <b>G</b>	Section <b>11</b>	Township <b>20 South</b>	Range <b>37 East</b>	County <b>Lea</b>	
Actual Footage Location of Well: <b>1980</b> feet from the <b>North</b> line and <b>1650</b> feet from the <b>East</b> line Sec. <b>11</b>					
Ground Level Elev.	Producing Formation <b>Glorieta (Oil)</b>	Pool <b>Skaggs (Glorieta)</b>	Dedicated Acreage: <b>40</b> Acres		

- \* To be a triple with Blinebry (Gas) & Drinkard (Oil)
- Is the Operator the only owner in the dedicated acreage outlined on the plat below? YES ☐ NO ☒. ("Owner" means the person who has the right to drill into and to produce from any pool and to appropriate the production either for himself or for himself and another. (65-3-29 (e) NMSA 1935 Comp.)
  - If the answer to question one is "no," have the interests of all the owners been consolidated by communitization agreement or otherwise? YES ☒ NO ☐. If answer is "yes," Type of Consolidation Joint Operating Agreement
  - If the answer to question two is "no," list all the owners and their respective interests below:

Owner	Land Description

**SECTION B**



**CERTIFICATION**

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

Name J. J. Velten  
 Position Division Civil Engineer  
 Company TEXACO Inc.  
 Date 11/15/61

I hereby certify that the well location shown on the plat in SECTION B 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 11/15/61  
 Registered Professional Engineer and/or Land Surveyor J. J. Velten  
 Certificate No. 8174

0 330 660 990 1320 1650 1980 2310 2640 2000 1500 1000 500 0

NEW MEXICO OIL CONSERVATION COMMISSION  
WELL LOCATION AND ACREAGE DEDICATION PLAT

FORM C-125  
Revised 5/1/57

SEE INSTRUCTIONS FOR COMPLETING THIS FORM ON THE REVERSE SIDE

SECTION A

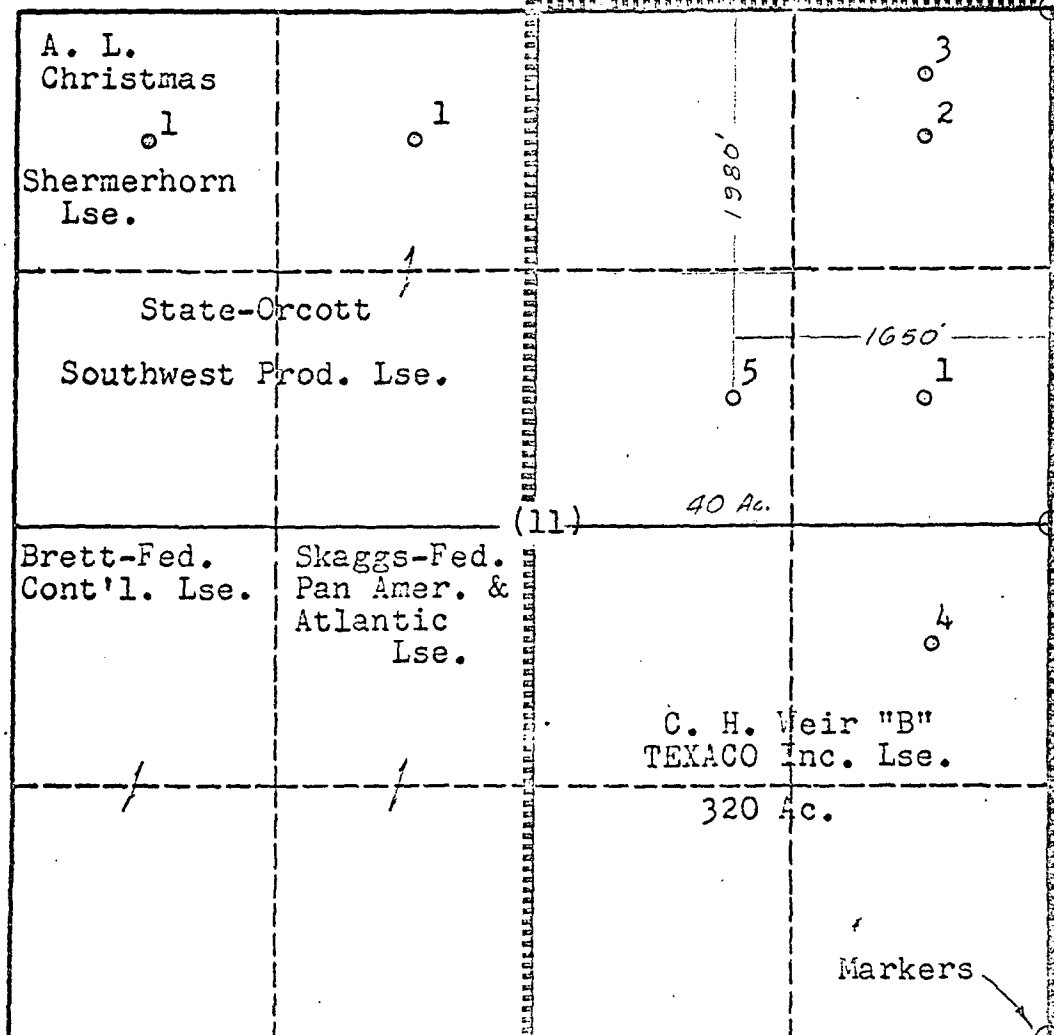
Operator TEXACO Inc.		Lease C. H. Weir "B"		Well No. # 5
Unit Letter G	Section 11	Township 20 South	Range 37 East	County Lea
Actual Footage Location of Well: 1980 feet from the North line and 1650 feet from the East line Sec. 11				
Ground Level Elev.	Producing Formation Drinkard(Oil)	Pool Skaggs(Drinkard)	Dedicated Acreage: 40 Acres	

\* To be a triple with Glorieta(Oil) & Blinebry(Gas)

1. Is the Operator the only owner in the dedicated acreage outlined on the plat below? YES \_\_\_\_\_ NO X. ("Owner" means the person who has the right to drill into and to produce from any pool and to appropriate the production either for himself or for himself and another. (65-3-29 (e) NMSA 1935 Comp.)
2. If the answer to question one is "no," have the interests of all the owners been consolidated by communitization agreement or otherwise? YES X NO \_\_\_\_\_. If answer is "yes," Type of Consolidation Joint Operating Agreement
3. If the answer to question one is "no," list all the owners and their respective interests below:

Owner	Land Description

SECTION B



CERTIFICATION

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

Name J. J. Velten  
Position Division Civil Engineer  
Company TEXACO Inc.  
Date 11/15/61

I hereby certify that the well location shown on the plat in SECTION B 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 11/15/61  
Registered Professional Engineer and/or Land Surveyor J. J. Velten  
Certificate No. 8174

Markers

**NEW MEXICO OIL CONSERVATION COMMISSION**  
**WELL LOCATION AND ACREAGE DEDICATION PLAT**

FORM C-123  
 Revised 5/1/57

SEE INSTRUCTIONS FOR COMPLETING THIS FORM ON THE REVERSE SIDE

**SECTION A**

Operator <b>TEXACO Inc.</b>		Lease <b>C. H. Weir "B"</b>	Well No.- <b>5</b>
--------------------------------	--	--------------------------------	-----------------------

Unit Letter <b>G</b>	Section <b>11</b>	Township <b>20 South</b>	Range <b>37 East</b>	County <b>Lea</b>
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Actual Footage Location of Well:  
**1930** feet from the **North** line and **1650** feet from the **East** line Sec. **11**

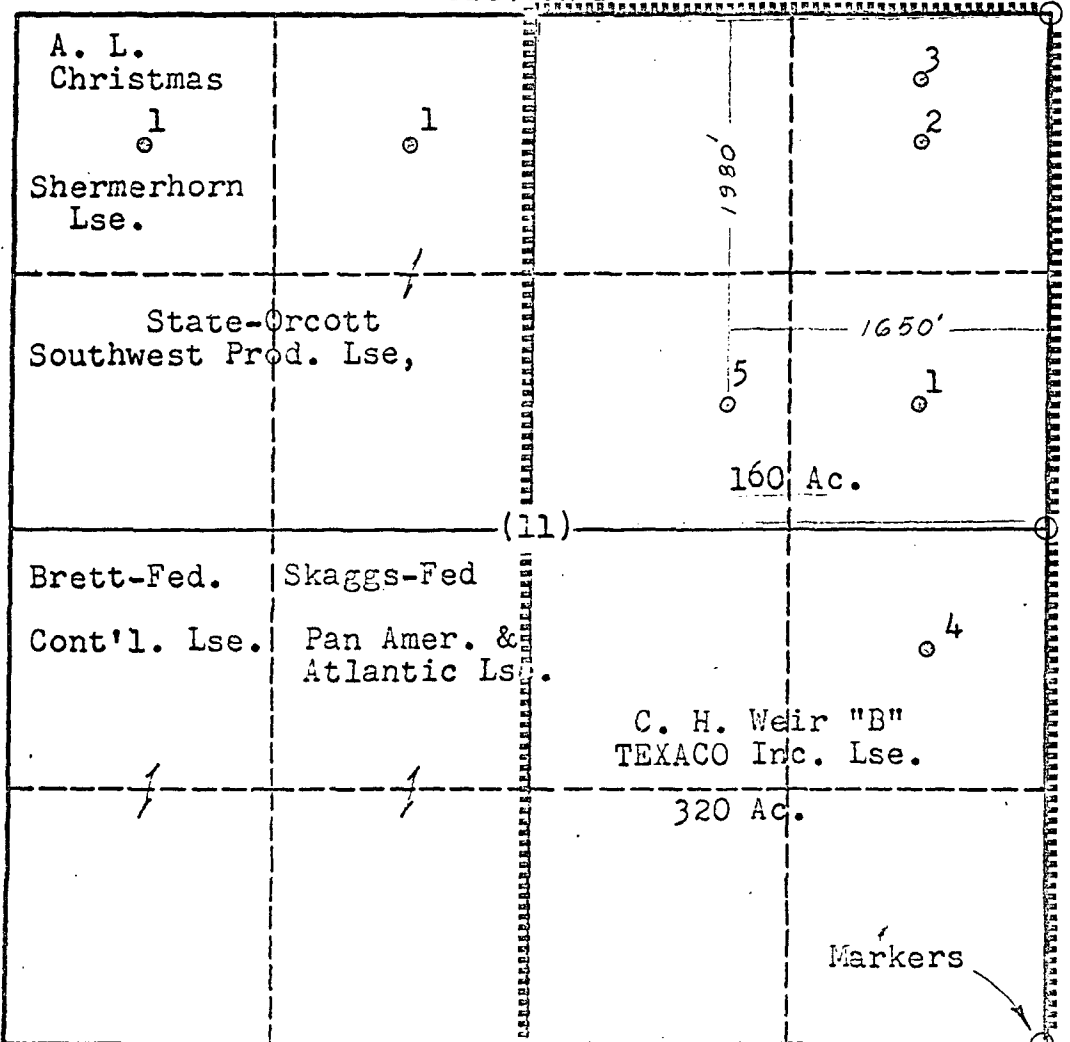
Ground Level Elev.	Producing Formation <b>Blinebry (Gas)</b>	Pool <b>Undesignated Blinebry (Gas)</b>	Dedicated Acreage: <b>100</b> Acres
--------------------	--	--	--

\* To be a triple with Glorieta (Oil) & Drinkard (Oil)

1. Is the Operator the only owner in the dedicated acreage outlined on the plat below? YES \_\_\_\_\_ NO X . ("Owner" means the person who has the right to drill into and to produce from any pool and to appropriate the production either for himself or for himself and another. (65-3-29 (e) NMSA 1935 Comp.)
2. If the answer to question one is "no," have the interests of all the owners been consolidated by communitization agreement or otherwise? YES X NO \_\_\_\_\_. If answer is "yes," Type of Consolidation Joint Operating Agreement
3. If the answer to question two is "no," list all the owners and their respective interests below:

Owner	Land Description

**SECTION B**



**CERTIFICATION**

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

Name J. J. Velten  
 Position Division Civil Engineer  
 Company TEXACO Inc.  
 Date 11/15/61

I hereby certify that the well location shown on the plat in SECTION B 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 11/15/61  
 Registered Professional Engineer and/or Land Surveyor J. J. Velten  
 Certificate No. 8174

0 330 660 990 1320 1650 1980 2310 2640 2000 1500 1000 500 0