

District I
 PO Box 1980, Hobbs, NM 88241-1980
 District II
 811 South First, Artesia, NM 88210
 District III
 1000 Rio Brazos Rd., Aztec, NM 87410
 District IV
 2040 South Pacheco, Santa Fe, NM 87505

State of New Mexico
 Energy, Minerals & Natural Resources Department

OIL CONSERVATION DIVISION
 2040 South Pacheco
 Santa Fe, NM 87505

Form C-102
 Revised October 18, 1994
 Instructions on back
 Submit to Appropriate District Office
 State Lease - 4 Copies
 Fee Lease - 3 Copies

AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

API Number 30 025 2592		Pool Code 64600	Pool Name Wilson-Yates Seven Rivers
Property Code 17217	Property Name Wilson State		Well Number 31
OGRID No. 7622	Operator Name Eunice Well Service		Elevation 3650

¹⁰ Surface Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
J	24	21	34E		2970	North	1980	East	Lea

¹¹ Bottom Hole Location If Different From Surface

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

¹² Dedicated Acres 4.0	¹³ Joint or Infill	¹⁴ Consolidation Code	¹⁵ Order No.
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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

16					¹⁷ OPERATOR CERTIFICATION I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief Signature: <u>Rex Busby</u> Printed Name: <u>Rex Busby</u> Title: <u>Genl Mgr</u> Date: <u>4-2-96</u>
				$\begin{matrix} 2970 \\ 3646 \\ \hline 330 \end{matrix}$	
					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 belief. Date of Survey Signature and Seal of Professional Surveyer: Certificate Number

District II

PO Drawer DD, Artesia, NM 88211-0719

District III

1000 Rio Brazos Rd., Aztec, NM 87410

District IV

PO Box 2088, Santa Fe, NM 87504-2088

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

Instructions on back
Submit to Appropriate District Office
5 Copies

AMENDED REPORT

I. ⁹⁵ REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

¹ Operator name and Address Eunice Well Servicing Co. PO Box 880 Eunice, NM 88231		² OGRID Number 7622
		³ Reason for Filing Code CH 5/1/95
⁴ API Number 30-025-2592	⁵ Pool Name Wilson-Yates Seven Rivers	⁶ Pool Code 4466
⁷ Property Code 1111	⁸ Property Name Wilson State	⁹ Well Number 31

II. ¹⁰ Surface Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South Line	Feet from the	East/West line	County
J	24	21S	34E		2970	North	1980	East	Lea

¹¹ Bottom Hole Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
¹² Lee Code	¹³ Producing Method Code	¹⁴ Gas Connection Date	¹⁵ C-129 Permit Number	¹⁶ C-129 Effective Date	¹⁷ C-129 Expiration Date				

III. Oil and Gas Transporters

¹⁸ Transporter OGRID	¹⁹ Transporter Name and Address	²⁰ POD	²¹ O/G	²² POD ULSTR Location and Description
7111	GPM Gas Corp 4001 Penbrook Address, TX. 79702	6548377	E	

IV. Produced Water

²³ POD	²⁴ POD ULSTR Location and Description
-------------------	--

V. Well Completion Data

²⁵ Spud Date	²⁶ Ready Date	²⁷ TD	²⁸ PBDT	²⁹ Perforations
³⁰ Hole Size	³¹ Casing & Tubing Size	³² Depth Set	³³ Sacks Cement	

VI. Well Test Data

³⁴ Date New Oil	³⁵ Gas Delivery Date	³⁶ Test Date	³⁷ Test Length	³⁸ Tbg. Pressure	³⁹ Csg. Pressure
⁴⁰ Choke Size	⁴¹ Oil	⁴² Water	⁴³ Gas	⁴⁴ AOF	⁴⁵ Test Method

⁴⁶ I hereby certify that the rules of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Signature: *Rex Busby*
Printed name: Rex Busby
Title: *Asst Gen Mgr*
Date: 5-9-95 Phone: 505 394 2518

OIL CONSERVATION DIVISION
Approved by: *[Signature]*
Title: *Geologist*
Approval Date: JUN 9 0 1995

⁴⁷ If this is a change of operator fill in the OGRID number and name of the previous operator

[Signature] C. Dale Keltow PRESIDENT 5-9-95
Previous Operator Signature Printed Name Title Date
Kel... Operating Co. #174119

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

State of New Mexico
 Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION
 RE Form C-104
 Revised 1-1-89
 See Instructions
 at Bottom of Page
 '94 JAN 31 AM 8:50

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

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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION
 TO TRANSPORT OIL AND NATURAL GAS

I.

Operator KELTON OPERATING CORPORATION	Well API No. 30-025-02592
Address P. O. Box 276, Andrews, Texas 79714	
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)	
New Well <input type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Operator <input checked="" type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
If change of operator give name and address of previous operator Caprock Oil & Gas, Inc., P. O. Box 828, Andrews, Texas 79714	

II. DESCRIPTION OF WELL AND LEASE

Lease Name State	Well No. 31	Pool Name, including Formation Wilson-Yates Seven Rivers	Kind of Lease <input checked="" type="checkbox"/> State Federal or Fee	Lease No.
Location Unit Letter <u>J</u> : <u>2970</u> Feet From The <u>North</u> Line and <u>1980</u> Feet From The <u>East</u> Line Section <u>24</u> Township <u>21S</u> Range <u>34E</u> , NMPM, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <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 <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
GPM Gas Corporation	4001 Penbrook, Odessa, Texas 79702					
If well produces oil or liquids, give location of tanks.	Unit M	Sec. 24	Twp. 21S	Rge. 34E	Is gas actually connected? Yes	When? NA

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

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded	Date Compl. Ready to Prod.		Total Depth			P.B.T.D.		
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay			Tubing Depth		
Perforations						Depth Casing Shoe		
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET			SACKS CEMENT		

V. TEST DATA AND REQUEST FOR ALLOWABLE

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

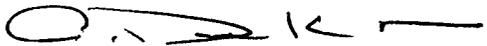
Date First New Oil Run To Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas- MCF

GAS WELL

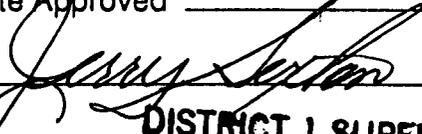
Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. OPERATOR CERTIFICATE OF COMPLIANCE

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


 Signature _____
 C. Dale Kelton President
 Printed Name _____ Title _____
 1-21-94 (915) 524-6400
 Date _____ Telephone No. _____

OIL CONSERVATION DIVISION
 JAN 25 1994

Date Approved _____
 By 
 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.

Submit to Appropriate
District Office
State Lease - 4 copies
Fee Lease - 3 copies

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-102
Revised 1-1-89

OIL CONSERVATION DIVISION

OIL CONSERVATION DIVISION
RECEIVED

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

'93 JAN 4 AM 9 55

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

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

WELL LOCATION AND ACREAGE DEDICATION PLAT

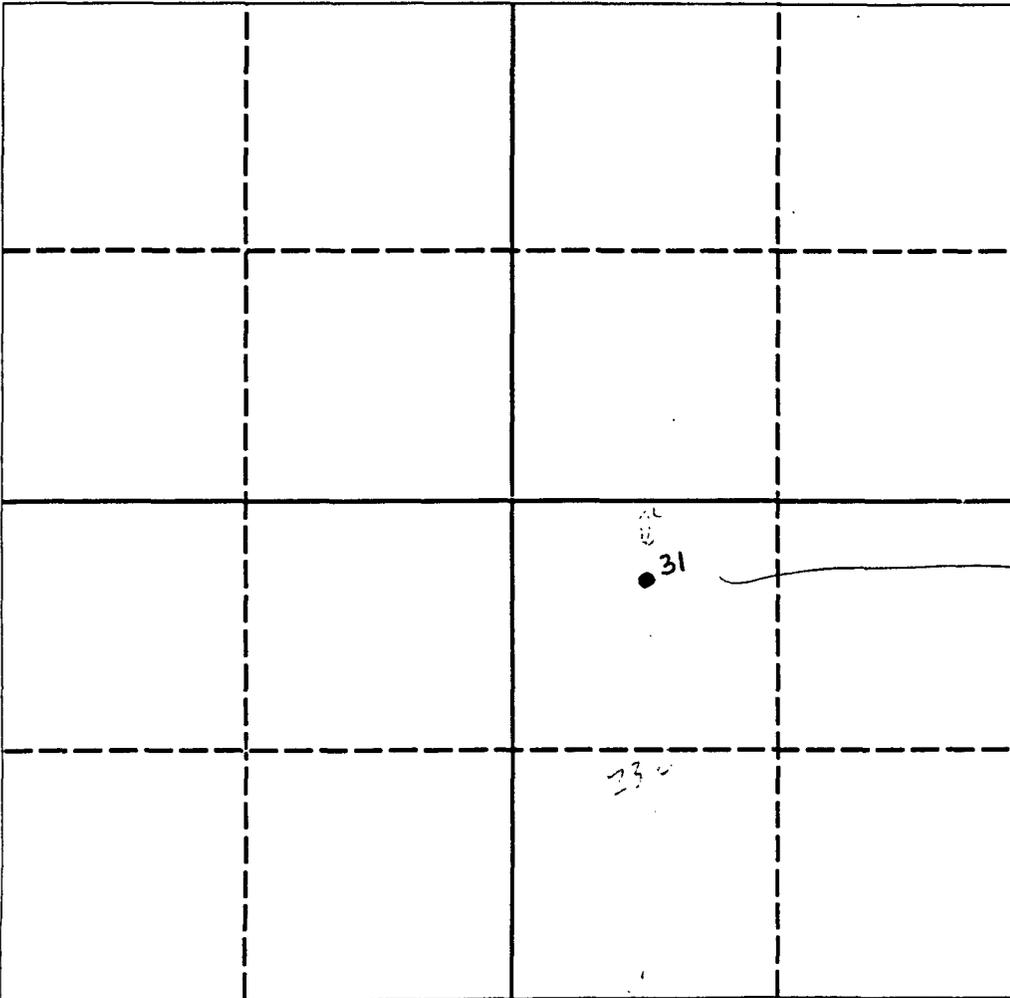
All Distances must be from the outer boundaries of the section

Operator Caprock Oil & Gas, Inc.		Lease State		Well No. 31
Unit Letter J	Section 24	Township 21	Range 34E	County NMPM Lea

Actual Footage Location of Well:
2970 feet from the North line and 1980 feet from the East line of Section

Ground level Elev. 3650	Producing Formation Yates-Seven Rivers	Pool Wilson Yates-Seven Rivers Assoc	Dedicated Acreage: 160 Acres
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- Outline the acreage dedicated to the subject well by colored pencil or hachure marks on the plat below.
- If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).
- If more than one lease of different ownership is dedicated to the well, have the interest 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 interest, has been approved by the Division.



OPERATOR CERTIFICATION

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

Signature
Jessie Dominguez

Printed Name
Jessie Dominguez

Position
Agent

Company
Caprock Oil & Gas, Inc.

Date
12/22/92

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

State of New Mexico
 Energy, Minerals and Natural Resources Department

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

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

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

OIL CONSERVATION DIVISION
 RECEIVED

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

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

'92 AUG 5 AM 9 19

I. OPERATOR

Operator CARROCK OIL & GAS, INC.	Well API No.
Address P.O. Box 828 ANDREWS, TEXAS 79714	
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)	
New Well <input type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Operator <input checked="" type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
If change of operator give name and address of previous operator POGO PRODUCING COMPANY P.O. Box 10340	

II. DESCRIPTION OF WELL AND LEASE

Lease Name STATE	Well No. 31	Pool Name, including Formation SEVERN WILSON-YATES RIVERS	Kind of Lease <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal or Fee	Lease No. B-10792
Location MIDLAND, TEXAS 79702				
Unit Letter J	2970	Feet From The NORTH	Line and 1980	Feet From The EAST
Section 24	Township 21-S	Range 34-E	NMPM	County LEA

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <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 <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)			
PHILLIPS 66 NATURAL GAS CO. EFFECTIVE 1/1/92	1001 PENBROOK ST. ODESSA TX 79762			
If well produces oil or liquids, give location of tanks.	Unit M	Sec. 24	Twp. 21S	Rge. 34E
				Is gas actually connected? <input checked="" type="checkbox"/> YES
				When? N.A.

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

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded	Date Compl. Ready to Prod.		Total Depth			P.B.T.D.		
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay			Tubing Depth		
Perforations						Depth Casing Shoe		
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET			SACKS CEMENT		

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

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

GAS WELL

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

VI. OPERATOR CERTIFICATE OF COMPLIANCE

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

Alvin Collins
 Signature
ALVIN COLLINS (PRESIDENT)
 Printed Name
 Date **6-1-89**
 Telephone No. **915-523-6500**

OIL CONSERVATION DIVISION
AUG 25 1989

Date Approved _____

By **ORIGINAL SIGNED BY JERRY SEXTON**
DISTRICT I SUPERVISOR

Title _____

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

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

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

State of New Mexico
Energy, Minerals and Natural Resources Department

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

OIL CONSERVATION DIVISION

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

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

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

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

I.

Operator CAPROCK OIL & GAS, INC	Well API No.
Address P.O. Box 828 ANDREWS, TEXAS 79714	
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)	
New Well <input type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Operator <input checked="" type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
If change of operator give name and address of previous operator POGO PRODUCING COMPANY P.O. BOX SANTA FE	

RECEIVED
AUG 28 1989
OIL CONSERVATION DIV.

II. DESCRIPTION OF WELL AND LEASE

Lease Name STATE	Well No. 31	Pool Name, Including Formation WILSON-YATES RIVERS	Kind of Lease State, Federal or Fee	Lease No. B-10792
Location Unit Letter <u>J</u> : <u>2970</u> Feet From The <u>NORTH</u> Line and <u>1980</u> Feet From The <u>EAST</u> Line Section <u>24</u> Township <u>21-S</u> Range <u>34-E</u> , NMPM, <u>LEA</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <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 <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Phillips 66 NATURAL GAS CO	1001 PENBROOK ST. ODESSA TX 79762
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When?
	M 24 21S 34E YES N.A.

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

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded	Date Compl. Ready to Prod.	Total Depth		P.B.T.D.				
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay		Tubing Depth				
Perforations						Depth Casing Shoe		
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET		SACKS CEMENT				

V. TEST DATA AND REQUEST FOR ALLOWABLE

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

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

GAS WELL

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

VI. OPERATOR CERTIFICATE OF COMPLIANCE

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

Alvin Collins
Signature
ALVIN COLLINS (PRESIDENT)
Printed Name
6-1-89
Date
915-523-6500
Telephone No.

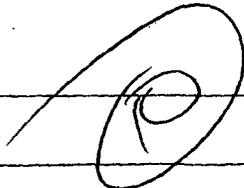
OIL CONSERVATION DIVISION
AUG 25 1989

Date Approved _____
By *Jerry Suter*
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.

STATE	
FILE	
U.S.C.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	



Operator
Pogo Producing Company

Address
P.O. Box 10340, Midland, TX 79702

Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input type="checkbox"/>	Change well name from Wilson 2 State No. 31 to State No. 31
Recompletion <input type="checkbox"/>	
Change in Ownership <input checked="" type="checkbox"/>	
Change in Transporter of:	
Oil <input type="checkbox"/>	Dry Gas <input type="checkbox"/>
Casinghead Gas <input type="checkbox"/>	Condensate <input type="checkbox"/>

If change of ownership give name and address of previous owner **Kaiser-Francis Oil Co., P.O. Box 535528, Tulsa, OK 74153**

I. DESCRIPTION OF WELL AND LEASE

Lease Name State	Well No. 31	Pool Name, including Formation Wilson-Yates - Seven Rivers	Kind of Lease State, Federal or Fee State	Lease No. B107
Location				
Unit Letter J	2970	Feet From The North	Line and 1980	Feet From The East
Line of Section 24	Township 21-S	Range 34-E	, NMPM, Lea	

II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <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 <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Phillips Petroleum Company	4001 Penbrook St., Odessa, TX 79762
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When?
	M 24 21S 34E Yes N.A.

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

III. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Some Restr.	Drill.
(X)								
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			

IV. 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 rate 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 - Bbla.	Water - Bbla.	Gas - MCF

GAS WELL

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

V. 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.

[Signature]
(Signature)

Production Superintendent

(Title)

9 - 9 - 83

(Date)

OIL CONSERVATION COMMISSION

APPROVED **SEP 23 1983**, 19

BY *[Signature]*
TITLE **DISTRICT 1 SUPERVISOR**

This form is to be filed in compliance with RULE 110a. If this is a request for allowable for a newly drilled or deep well, this form must be accompanied by a tabulation of the data 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 a well name or number, or transporter, or other such change of conditions. Separate Forms C-104 must be filed for each pool in a well.

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

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

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-85

I. OPERATOR
Operator: Kaiser-Francis Oil Company
Address: P.O. Box 35528, Tulsa, Oklahoma 74135
Reason(s) for filing (Check proper box):
 New Well Change in Transporter of:
 Recompletion Oil Dry Gas
 Change in Ownership Casinghead Gas Condensate Other (Please explain) SANTA FE

If change of ownership give name and address of previous owner: Coquina Oil Corporation, P.O. Drawer 2960, Midland, Texas 79702

II. DESCRIPTION OF WELL AND LEASE
 Lease Name: Wilson State 2 State Well No.: 31 Pool Name, including Formation: Wilson Yates Seven Rivers Kind of Lease: State, Federal or Fee State Lease No.: B-10792
 Location: Unit Let or J; 2970 Feet From The North Line and 1980 Feet From The East
 Line of Section 24 Township 21S Range 34E, NMPM, Lea County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS
 Name of Authorized Transporter of Oil or Condensate Address (Give address to which approved copy of this form is to be sent)
 Name of Authorized Transporter of Casinghead Gas or Dry Gas Address (Give address to which approved copy of this form is to be sent)
Phillips Petroleum Company 4001 Penbrook, Odessa, Texas 79762
 If well produces oil or liquids, give location of tanks. Unit M Sec. 24 Twp. 21S Rge. 34E Is gas actually connected? Yes When N/A

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

GAS WELL

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

VI. CERTIFICATE OF COMPLIANCE
 I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.
Gonna M. Knapp
 (Signature)
 Engineer Tech
 (Title)
 November 24, 1982
 (Date)

OIL CONSERVATION COMMISSION
JAN 13 1983
 APPROVED _____
 BY [Signature]
 TITLE SUPERVISOR DISTRICT 1
 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.

Name of Authorized Transporter of Casinghead Gas at Dry Gas
 Name of Authorized Transporter of Casinghead Gas at Dry Gas
 Phillips Petroleum Company
 Unit Sec. Twp. Rge. When
 M 24 21 34
 If well produces oil or liquids, give location of tanks.
 Address (Give address to which approved copy of this form is to be sent)
 4001 Penbrook, Odessa, Texas 79762
 Is gas actually connected? Yes
 P.B.T.D. --

If this production is commingled with that from any other lease or pool, give commingling order number:
 IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Restv.	Diff. Restv.
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.			Tubing Depth		
Elevations (DF, RKB, RT, CR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Depth Casing Shoe			SACKS CEMENT		
TUBING, CASING, AND CEMENTING RECORD								
HOLE 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
Actual Prod. During Test	Oil - Bble.	Water - Bble.
		Gas - MCF

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bble. 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.

Steve Guley
 (Signature)
 Production Engineer
 (Title)
 August 7, 1981
 (Date)

OIL CONSERVATION COMMISSION
 APPROVED AUG 12 1981
 BY [Signature]
 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 allowance 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.
 Concrete Forms 6-104 must be filed for each well in multiple.

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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

5a. Indicate Type of Lease
State Fee

5. State Oil & Gas Lease No.
B-10792

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 type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER-	7. Unit Agreement Name
2. Name of Operator Wilson Oil Company	8. Farm or Lease Name Wilson State
3. Address of Operator P.O. Box 457 Artesia, New Mexico 88210	9. Well No. 31
4. Location of Well UNIT LETTER <u>J</u> , <u>2970</u> FEET FROM THE <u>N.</u> LINE AND <u>1980</u> FEET FROM THE <u>E</u> LINE, SECTION <u>24</u> TOWNSHIP <u>21S</u> RANGE <u>34E</u> NMPM.	10. Field and Pool, or Wildcat
15. Elevation (Show whether DF, RT, GR, etc.) 3650	12. County Lea

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

<p>NOTICE OF INTENTION TO:</p> <p>PERFORM REMEDIAL WORK <input type="checkbox"/></p> <p>TEMPORARILY ABANDON <input type="checkbox"/></p> <p>PULL OR ALTER CASING <input type="checkbox"/></p> <p>OTHER <input type="checkbox"/></p>	<p>SUBSEQUENT REPORT OF:</p> <p>PLUG AND ABANDON <input type="checkbox"/></p> <p>CHANGE PLANS <input type="checkbox"/></p> <p>OTHER <input type="checkbox"/></p>	<p>REMEDIAL WORK <input type="checkbox"/></p> <p>COMMENCE DRILLING OPNS. <input type="checkbox"/></p> <p>CASING TEST AND CEMENT JOB <input type="checkbox"/></p> <p>OTHER <u>Well status report</u> <input type="checkbox"/></p> <p>ALTERING CASING <input type="checkbox"/></p> <p>PLUG AND ABANDONMENT <input type="checkbox"/></p>
---	--	---

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.

Stand by gas supply for pumping wells.

Handwritten stamp: B-10792
MAY 27 1976

Handwritten: Expires 10/1/76

Handwritten: M

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

SIGNED W. R. Law TITLE V-President DATE 5-25-76

APPROVED BY Jerry Sub TITLE SUPERVISOR DISTRICT 1 DATE MAY 27 1976

CONDITIONS OF APPROVAL, IF ANY:

ORIGINAL

SEP 16 AM 11:36

NEW MEXICO OIL CONSERVATION COMMISSION

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

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LAND OFFICE	
OPERATOR	

5a. Indicate Type of Lease
State Fee

5. State Oil & Gas Lease No.
B-10792

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 GAS WELL OTHER- Shut in gas well

2. Name of Operator
Wilson Oil Company

3. Address of Operator
P. O. Box 457, Artesia, New Mexico

4. Location of Well
UNIT LETTER J 2970 FEET FROM THE North LINE AND 1980 FEET FROM
THE East LINE, SECTION 24 TOWNSHIP 21 RANGE 34 NMPM.

15. Elevation (Show whether DF, RT, GR, etc.)
3650 DF

7. Unit Agreement Name

8. Farm or Lease Name
State

9. Well No.
31

10. Field and Pool, or Wildcat
Wilson

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"/>		CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER <input type="checkbox"/>		OTHER <u>Report on shut-in well</u> <input checked="" type="checkbox"/>	

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

Tentative plans to use small volume of gas from this well for pumping engines.

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

SIGNED N. R. Sant TITLE Vice President DATE September 8, 1966

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

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LAND OFFICE	
OPERATOR	

HDBBS OFFICE O. C. C.
 MAIN OFFICE - NEW MEXICO
 CONSERVATION COMMISSION
 MAR 3 11 45 AM '66
 MAR 7 AM 8 33

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

5a. Indicate Type of Lease
 State Fee
 5. State Oil & Gas Lease No.
 B-10792

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 type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> Shut in gas well	7. Unit Agreement Name
2. Name of Operator Wilson Oil Company	8. Farm or Lease Name State
3. Address of Operator P. O. Box 457, Artesia, New Mexico	9. Well No. 31
4. Location of Well UNIT LETTER <u>J</u> , <u>2970</u> FEET FROM THE <u>North</u> LINE AND <u>1980</u> FEET FROM THE <u>East</u> LINE, SECTION <u>24</u> TOWNSHIP <u>21</u> RANGE <u>34</u> N.M.P.M.	10. Field and Pool, or Wildcat Wilson
15. Elevation (Show whether DF, RT, GR, etc.) 3650 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 CHANGE PLANS OTHER
 TEMPORARILY ABANDON
 PULL OR ALTER CASING

SUBSEQUENT REPORT OF:

REMEDIAL WORK ALTERING CASING
 COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT
 CASING TEST AND CEMENT JOB
 OTHER Report on shut in well

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.

Tentative plans to use small volume of gas from this well for pumping engines.

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

SIGNED [Signature] TITLE Vice President DATE March 1, 1966

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

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NEW MEXICO OIL CONSERVATION COMMISSION

SEP 14 11 25 AM '65

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

5a. Indicate Type of Lease
State Fee

5. State Oil & Gas Lease No.
B-10792

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 type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- Shut In gas well	7. Unit Agreement Name
2. Name of Operator Wilson Oil Company	8. Farm or Lease Name State
3. Address of Operator P. O. Box 457, Artesia, New Mexico	9. Well No. 31
4. Location of Well UNIT LETTER <u>J</u> <u>2970</u> FEET FROM THE <u>North</u> LINE AND <u>1980</u> FEET FROM THE <u>East</u> LINE, SECTION <u>24</u> TOWNSHIP <u>21</u> RANGE <u>34</u> NMPM.	10. Field and Pool, or Wildcat Wilson
15. Elevation (Show whether DF, RT, GR, etc.) 3650 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 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 <u>Shut In</u> <input checked="" type="checkbox"/>

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

Status of the subject well is shut in gas well, since there is no market available in this area.

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

SIGNED N. K. Law TITLE Vice President DATE September 13, 1965

APPROVED BY [Signature] TITLE [Signature] DATE SEP 15 1965

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NEW MEXICO OIL CONSERVATION COMMISSION

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Supersedes Old
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Effective 1-1-65

5a. Indicate Type of Lease
State Fee

5. State Oil & Gas Lease No.
B-10792

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 type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- Shut In gas well	7. Unit Agreement Name
2. Name of Operator Wilson Oil Company	8. Farm or Lease Name State
3. Address of Operator P. O. Box 457, Artesia, New Mexico	9. Well No. 31
4. Location of Well UNIT LETTER <u>J</u> , <u>2970</u> FEET FROM THE <u>North</u> LINE AND <u>1980</u> FEET FROM THE <u>East</u> LINE, SECTION <u>24</u> TOWNSHIP <u>21</u> RANGE <u>34</u> NMPM.	10. Field and Pool, or Wildcat Wilson
15. Elevation (Show whether DF, RT, GR, etc.) 3650 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 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 <u>Shut In</u> <input checked="" type="checkbox"/>

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

Status of the subject well is shut in gas well, since there is no market available in this area.

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

SIGNED M. R. Lark TITLE Vice President DATE March 4, 1965

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

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	GAS
PRODUCTION OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION FORM C-103

MISCELLANEOUS REPORTS ON WELLS

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

SEP 17 11 32 AM '64
OFFICE O. C. C.

Name of Company **Wilson Oil Company** Address **Box 457, Artesia, New Mexico**

Lease **Wilson State** Well No. **31** Uffit Letter **J** Section **24** Township **21** Range **34**

Date Work Performed _____ Pool **Wilson** County **Lea**

THIS IS A REPORT OF: (Check appropriate block)

- Beginning Drilling Operations Casing Test and Cement Job Other (Explain):
 Plugging Remedial Work **Shut in gas well**

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

Status of the subject well is shut in gas well, since there is no market available in this area.

Witnessed by **Joe B. Allen** Position **Prod. Supt.** Company **Company**

FILL IN BELOW FOR REMEDIAL WORK REPORTS ONLY

ORIGINAL WELL DATA

D F Elev. _____ TD _____ 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 **W. R. L...**
Title _____ Position **Vice President**
Date **SEP 17 1964** Company **Wilson Oil Company**

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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 1104)

Name of Company Wilson Oil Company		Address Box 457, Artesia, New Mexico					
Lease Wilson State	Well No. 31	Unit Letter J	Section 24	Township 21	Range 34		
Date Work Performed	Pool Wilson	County Lea					

THIS IS A REPORT OF: (Check appropriate block)

<input type="checkbox"/> Beginning Drilling Operations	<input type="checkbox"/> Casing Test and Cement Job	<input checked="" type="checkbox"/> Other (Explain): Shut in gas well
<input type="checkbox"/> Plugging	<input type="checkbox"/> Remedial Work	

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

Status of the subject well is shut in gas well, since there is no market available in this area.

Witnessed by Joe B. Allen	Position Production Supt.	Company Wilson Oil Company
-------------------------------------	-------------------------------------	--------------------------------------

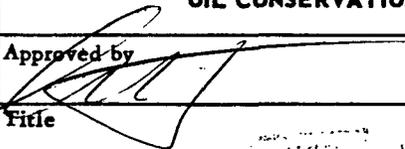
FILL IN BELOW FOR REMEDIAL WORK REPORTS ONLY

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 N. R. Lamb	Position Vice President	Company Wilson Oil Company
Title			
Date			

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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 9106)

Name of Company Wilson Oil Company		Address Box 457, Artesia, New Mexico				
Lease Wilson State	Well No. 31	Unit Letter J	Section 24	Township 21	Range 34	
Date Work Performed	Pool Wilson	County Lea				

THIS IS A REPORT OF: (Check appropriate block)

Beginning Drilling Operations
 Casing Test and Cement Job
 Other (Explain):
 Plugging
 Remedial Work
Shut in gas well

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

Status of the subject well is shut in gas well, since there is no market available in this area.

Witnessed by Joe B. Allen	Position Production Supt.	Company Wilson Oil Company
-------------------------------------	-------------------------------------	--------------------------------------

FILL IN BELOW FOR REMEDIAL WORK REPORTS ONLY

ORIGINAL WELL DATA

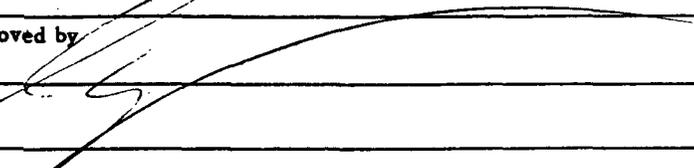
D F Elev.	T D	P B T D	Producing Interval	Completion Date
Tubing Diameter	Tubing Depth	Oil String Diameter	Oil String Depth	
Perforated Interval(s)				
Open Hole Interval		Producing Formation(s)		

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 N. R. Lamb
Title	Position N. R. Lamb Vice President
Date	Company Wilson Oil Company

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 Wilson Oil Company				Address Box 457, Artesia, New Mexico			
Lease Wilson State B-10792		Well No. 31	Unit Letter J	Section 24	Township 21	Range 34	
Date Work Performed			Pool			County Lee	

THIS IS A REPORT OF: (Check appropriate block)

- Beginning Drilling Operations
 Casing Test and Cement Job
 Other (Explain): **Shut in gas well**
 Plugging
 Remedial Work

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

Status of the subject well is shut in gas well, since there is no market available for this area.

Witnessed by Joe B. Allen	Position Production Supt.	Company Wilson Oil Company
-------------------------------------	-------------------------------------	--------------------------------------

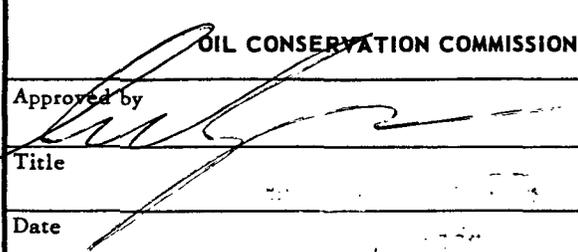
FILL IN BELOW FOR REMEDIAL WORK REPORTS ONLY

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 N. R. Lamb		
Title	Position N. R. Lamb Vice President		
Date	Company Wilson Oil Company		

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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 Wilson Oil Company		Address Box 457, Artesia, New Mex 100			
Lease State (B-10792)	Well No. 31	Unit Letter J	Section 24	Township 21	Range 34
Date Work Performed Feb. 1949	Pool Wilson	County Lea			

THIS IS A REPORT OF: (Check appropriate block)

- Beginning Drilling Operations
 Casing Test and Cement Job
 Other (Explain):
 Plugging
 Remedial Work
Shut in gas well

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

Status of the subject well is shut in gas well since there is not market available for this area.

Witnessed by Joe B. Allen	Position Production Supt.	Company Wilson Oil Company
-------------------------------------	-------------------------------------	--------------------------------------

FILL IN BELOW FOR REMEDIAL WORK REPORTS ONLY

ORIGINAL WELL DATA

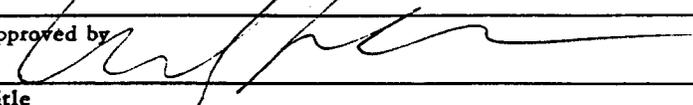
D F Elev.	T D	P B T D	Producing Interval	Completion Date
Tubing Diameter	Tubing Depth	Oil String Diameter	Oil String Depth	
Perforated Interval(s)				
Open Hole Interval		Producing Formation(s)		

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 N. R. Lamb
Title ...	Position N. R. Lamb Vice President
Date	Company Wilson Oil Company

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 Wilson Oil Company			Address Box 457, Artesia, New Mexico			
Lease State (B-10792)	Well No. 31	Unit Letter J	Section 24	Township 21	Range 34	
Date Work Performed Feb. 1949	Pool Wilson	County Lea				

THIS IS A REPORT OF: (Check appropriate block)

- Beginning Drilling Operations
 Casing Test and Cement Job
 Other (Explain):
 Plugging
 Remedial Work
 Shut in gas well

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

Status of the subject well is shut in gas well since there is no market available for this area.

Witnessed by Joe B. Allen	Position Production Supt.	Company Wilson Oil Company
------------------------------	------------------------------	-------------------------------

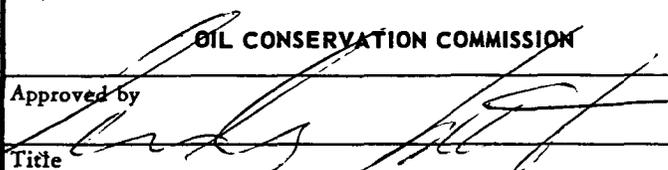
FILL IN BELOW FOR REMEDIAL WORK REPORTS ONLY

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 N. L. Law		
Title Vice President	Position Vice President		
Date MAR 4 1949	Company Wilson Oil Company		

ORIGINAL

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)

DISTRICT OFFICE OCC
1000 SEP 12 5
DISTRICT OFFICE OCC

Name of Company **Wilson Oil Company** Address **Box 1436, Artesia, 51, New Mexico**

Lease **State (B-10792)** Well No. **31** Unit Letter **J** Section **24** Township **21** Range **34**

Date Work Performed **Feb., 1949** Pool **Wilson** County **Lea**

THIS IS A REPORT OF: (Check appropriate block)

- Beginning Drilling Operations
- Casing Test and Cement Job
- Other (Explain): **Shut in gas well**
- Plugging
- Remedial Work

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

Status of the subject well is shut in gas well since there is no market available for this area.

1950 SEP 6 11 AM
DISTRICT OFFICE OCC

Witnessed by **Joe B. Allen** Position **Production Supt.** Company **Wilson Oil Company**

FILL IN BELOW FOR REMEDIAL WORK REPORTS ONLY

ORIGINAL WELL DATA

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

Tubing Diameter Tubing Depth Oil String Diameter Oil String Depth

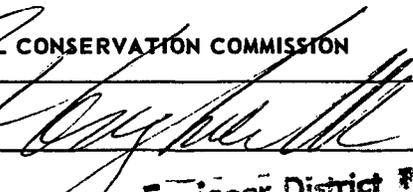
Perforated Interval(s)

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						

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

Approved by  Title **Engineer District #**

Date **SEP 10 1960**

Name **Raymond Law** Position **Vice President** Company **Wilson Oil Company**

ORIGINAL OIL CONSERVATION COMMISSION
 Santa Fe, New Mexico
MISCELLANEOUS REPORTS ON WELLS

FEB 1 1949
 RECEIVED
 HOBBS OFFICE

Submit this report in triplicate to the Oil Conservation Commission or its proper agent within ten days after the work specified is completed. It should be signed and sworn to before a notary public for reports on beginning drilling operations, results of shooting well, results of test of casing shut off, result of plugging of well, and other important operations, even though the work was witnessed by an agent of the Commission. Reports on minor operations need not be signed and sworn to before a notary public. See additional instructions in the Rules and Regulations of the Commission.

Indicate nature of report by checking below.

REPORT ON BEGINNING DRILLING OPERATIONS		REPORT ON REPAIRING WELL	
REPORT ON RESULT OF SHOOTING OR CHEMICAL TREATMENT OF WELL		REPORT ON PULLING OR OTHERWISE ALTERING CASING	
REPORT ON RESULT OF TEST OF CASING SHUT-OFF	X	REPORT ON DEEPENING WELL	
REPORT ON RESULT OF PLUGGING OF WELL			

Santa Fe, New Mexico Date 2-16-49 Place

OIL CONSERVATION COMMISSION,
 SANTA FE, NEW MEXICO
 Gentlemen:

Following is a report on the work done and the results obtained under the heading noted above at the _____

Wilson Oil Company State 3-10792 Well No. 31 in the _____
 Company or Operator Lease
NW 1/4 SE 1/4 of Sec. 24, T. 21, R. 34, N. M. P. M.,
Wilson Field, Lea County.

The dates of this work were as follows: _____

Notice of intention to do the work was (was not) submitted on Form C-102 on 2-16-49 19____
 and approval of the proposed plan was (was not) obtained. (Cross out incorrect words.)

DETAILED ACCOUNT OF WORK DONE AND RESULTS OBTAINED

16" casing set at 180' with 150 sacks cement
 The plug was drilled and shut-off test O.K.

Witnessed by Joe B. Allen Wilson Oil Company Field Superintendent
 Name Company Title

Subscribed and sworn before me this 16 th

day of February 1949

Guarita Stenton
 Notary Public

I hereby swear or affirm that the information given above is true and correct.

Name Raymond Lamb

Position Asst to the President

Representing Wilson Oil Company
 Company or Operator

My commission expires August 28, 1949

Address _____

Remarks:

APPROVED

Ray. Yarbrough
 Name
 Title

ORIGINAL

OIL CONSERVATION COMMISSION

Santa Fe, New Mexico

MISCELLANEOUS REPORTS ON WELLS

RECEIVED
FEB 17 1949

Submit this report in triplicate to the Oil Conservation Commission or its proper agent within ten days after the specified is completed. It should be signed and sworn to before a notary public for reports on beginning drilling operations, results of shooting well, results of test of casing shut off, result of plugging of well, and other important operations, even though the work was witnessed by an agent of the Commission. Reports on minor operations need not be signed and sworn to before a notary public. See additional instructions in the Rules and Regulations of the Commission. Indicate nature of report by checking below.

REPORT ON BEGINNING DRILLING OPERATIONS		REPORT ON REPAIRING WELL
REPORT ON RESULT OF SHOOTING OR CHEMICAL TREATMENT OF WELL		REPORT ON PULLING OR OTHERWISE ALTERING CASING
REPORT ON RESULT OF TEST OF CASING SHUT-OFF	<input checked="" type="checkbox"/>	REPORT ON DEEPENING WELL
REPORT ON RESULT OF PLUGGING OF WELL		

2-16-49

Date

Santa Fe, New Mexico

Place

OIL CONSERVATION COMMISSION,
SANTA FE, NEW MEXICO

Gentlemen:

Following is a report on the work done and the results obtained under the heading noted above at the _____

Wilson Oil Company

State B-10792

Well No. 31

in

Company or Operator Wilson of Sec. 24, T. 21, R. 34, N. M. P. Wilson Field, La Cou

The dates of this work were as follows: 2-11-49

Notice of intention to do the work was (was not) submitted on Form C-102 on 2-16-49 and approval of the proposed plan ~~was~~ (was not) obtained. (Cross out incorrect words.)

DETAILED ACCOUNT OF WORK DONE AND RESULTS OBTAINED

**7" casing set at 3674' and cemented with 400 sacks.
Water shut off test O.K.**

Witnessed by Mr. Joe B. Allen Wilson Oil Co. Field Superintendent

Name	Company	Title
------	---------	-------

Subscribed and sworn before me this 16 th

day of February 19 49

Juanta Denton
Notary Public

My commission expires August 28, 1949

I hereby swear or affirm that the information given is true and correct.

Name Raymond Lamb
Position Ass't to the President

Representing Wilson Oil Company
Company or Operator

Address P.O. Box 627 Santa Fe, N.

Remarks:

APPROVED

Ray. Lamb
Name
Title

ORIGINAL

NEW MEXICO OIL CONSERVATION COMMISSION

Santa Fe, New Mexico

HOBBS OFFICE OCC

MISCELLANEOUS REPORTS ON WELLS

1954 JUN 17 AM 8:07

Submit this report in TRIPLICATE to the District Office, Oil Conservation Commission, within 10 days after the work specified is pleted. It should be signed and filed as a report on Beginning Drilling Operations, Results of test of casing shut-off, result of plugging of result of well repair, and other important operations, even though the work was witnessed by an agent of the Commission. See addi instructions in the Rules and Regulations of the Commission.

Indicate Nature of Report by Checking Below

REPORT ON BEGINNING DRILLING OPERATIONS		REPORT ON RESULT OF TEST OF CASING SHUT-OFF		REPORT ON REPAIRING WELL
REPORT ON RESULT OF PLUGGING WELL		REPORT ON RECOMPLETION OPERATION	X	REPORT ON (Other)

June 11, 1954

(Date)

Artesia, N. Mex.

(Place)

Following is a report on the work done and the results obtained under the heading noted above at the

Wilson Oil Company

(Company or Operator)

State (B-10792)

(Lease)

Well No. 31 in the NW 1/4 SE 1/4 of Sec. 2

(Contractor)

T. 21, R. 34, NMPM, Wilson Pool, Lea Co

The Dates of this work were as follows: June

Notice of intention to do the work (was) ~~approved~~ submitted on Form C-102 on June 7, 1954

(Cross out incorrect words)

and approval of the proposed plan (was) ~~approved~~ obtained.

DETAILED ACCOUNT OF WORK DONE AND RESULTS OBTAINED

The subject well was drilled from 3797 to 3856 with rotary tools. The plug back inside the 7" casing was set at 3674'. The original gas interval was reperforated and hydrofraced with 12,000 gallons. The well is completed for a volume of 100,000 cu. ft. of gas per day. The gas will be used as lease fuel on Lease B-10792.

Well Log - 3797 to 3816 - lime
 3816 to 3828 - gray sand
 3828 - 3824 - Sand and lime
 3834 - 3856 - lime

Witnessed by Joe B. Allen (Name)

Wilson Oil Company (Company)

Vice-Pres. Prod. (Title)

Approved: OIL CONSERVATION COMMISSION

P. G. Johnson (Name)

Oil & Gas Inspector

JUN 18 1954

(Title)

(Date)

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

Name: D. Raymond Lavel

Position: Vice-President

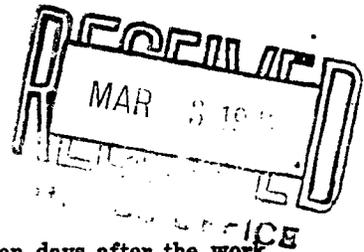
Representing: Wilson Oil Company

Address: Box 1436, Artesia, New Mex

OIL CONSERVATION COMMISSION

Santa Fe, New Mexico

MISCELLANEOUS REPORTS ON WELLS



Submit this report in triplicate to the Oil Conservation Commission or its proper agent within ten days after the work specified is completed. It should be signed and sworn to before a notary public for reports on beginning drilling operations, results of shooting well, results of test of casing shut off, result of plugging of well, and other important operations, even though the work was witnessed by an agent of the Commission. Reports on minor operations need not be signed and sworn to before a notary public. See additional instructions in the Rules and Regulations of the Commission.

Indicate nature of report by checking below.

REPORT ON BEGINNING DRILLING OPERATIONS		REPORT ON REPAIRING WELL	
REPORT ON RESULT OF SHOOTING OR CHEMICAL TREATMENT OF WELL		REPORT ON PULLING OR OTHERWISE ALTERING CASING	
REPORT ON RESULT OF TEST OF CASING SHUT-OFF		REPORT ON DEEPENING WELL	
REPORT ON RESULT OF PLUGGING OF WELL / Back	X		

3-2-49

Santa Fe, New Mexico

Date

Place

OIL CONSERVATION COMMISSION,
SANTA FE, NEW MEXICO

Gentlemen:

Following is a report on the work done and the results obtained under the heading noted above at the _____

Wilson Oil Company State B-10792 Well No. 31 in the _____

Company or Operator

Lease

NW 1/4 SE 1/4 of Sec. 24, T. 21, R. 34, N. M. P. M.,

Wilson Field, Loa County.

The dates of this work were as follows: 2-16-49 to 2-26-49

Notice of intention to do the work was (~~was not~~) submitted on Form C-102 on 2-16 19 49

and approval of the proposed plan was (~~was not~~) obtained. (Cross out incorrect words.)

DETAILED ACCOUNT OF WORK DONE AND RESULTS OBTAINED

The above listed well was plugged back to 3660' using 33 Sx cement. 7" casing was perforated as follows: 3527 to 3535', 3545 to 3557', and 3595 to 3630'. A total of 224 shots was used. The well produced an estimated 200 MCF of gas. Well shut-in.

Witnessed by Mr. Joe B. Allen Wilson Oil Company Field Supt.
Name Company Title

Subscribed and sworn before me this _____

2nd day of March 19 49

Jessie A. Newton
Notary Public

I hereby swear or affirm that the information given above is true and correct.

Name Raymond Lamb

Position Ass't to the President

Representing Wilson Oil Company
Company or Operator

My commission expires August 28, 1949 Address P.O. Box 627 Santa Fe, New Mexico

Remarks:

APPROVED

Date 3-2-49

Ray Lamb
Name
Title

ORIGINAL

(Rev)

NEW MEXICO OIL CONSERVATION COMMISSION
Santa Fe, New Mexico

HOBBS OFFICE OCC

It is necessary that Form C-104 be approved before this form can be approved an an initial allowable be assigned to any completed well. Submit this form in QUADRUPPLICATE. 1954 JUN 18 AM 9:2

CERTIFICATE OF COMPLIANCE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Company or Operator Wilson Oil Company Lease State

Address Box 1436, Artesia, New Mexico
(Local or Field Office) (Principal Place of Business)

Unit J, Well(s) No. 31, Sec. 24, T. 21, R. 34, Pool Wilson

County Lea Kind of Lease: State B-10792

If Oil well Location of Tanks Gas Well

Authorized Transporter See "Remarks" Address of T

(Local or Field Office) (Principal Place of Business)

Per cent of Oil or Natural Gas to be Transported..... Other Transporters authorized to transport Oil or N
from this unit are.....

REASON FOR FILING: (Please check proper box)

NEW WELL..... CHANGE IN OWNERSHIP.....

CHANGE IN TRANSPORTER..... OTHER (Explain under Remarks).....

REMARKS:

Gas to be used on Lease B-10792 and will be transported in
Company Lease Gas Line.

The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been com

Executed this the 17 day of June 1954

Approved JUN 18 1954, 19.....

Wilson Oil Company

OIL CONSERVATION COMMISSION

By [Signature]

By [Signature]

Title Oil & Gas Inspector

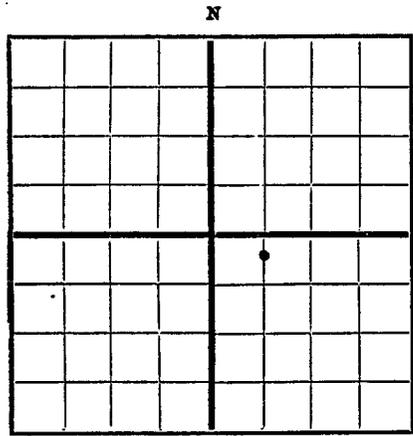
Title Vice-President

ORIGINAL

RECEIVED
MAR 3 1949
HOBBES OFFICE

FORM C-105

NEW MEXICO OIL CONSERVATION COMMISSION
Santa Fe, New Mexico



WELL RECORD

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

AREA 640 ACRES
LOCATE WELL CORRECTLY

Wilson Oil Company Box 627, Santa Fe, New Mexico
Company or Operator Address
State B-10792 Well No. 31 in NW SE of Sec. 24 T 21
Lease
R. 34, N. M. P. M., Wilson Field, Lea County.
Well is 2970 feet south of the North line and 1980 feet west of the East line of Sec. 24
If State land the oil and gas lease is No. B-10792 Assignment No.
If patented land the owner is Address
If Government land the permittee is Address
The Lessee is Wilson Oil Co. Address Santa Fe, New Mexico
Drilling commenced December 20 19 48 Drilling was completed February 16, 19 49
Name of drilling contractor Company Tools. Address
Elevation above sea level at top of casing 3650 feet.
The information given is to be kept confidential until 19

OIL SANDS OR ZONES

No. 1, from 3527 to 3535 Gas No. 4, from to
No. 2, from 3545 to 3557 Gas No. 5, from to
No. 3, from 3610 to 3625 Gas No. 6, from to

IMPORTANT WATER SANDS

Include data on rate of water inflow and elevation to which water rose in hole.
No. 1, from 120 to 125 feet.
No. 2, from 160 to 165 feet.
No. 3, from 215 to 225 feet.
No. 4, from 880 to 900 feet.

CASING RECORD

SIZE	WEIGHT PER FOOT	THREADS PER INCH	MAKE	AMOUNT	KIND OF SHOE	CUT & FILLED FROM	PERFORATED		PURPOSE
							FROM	TO	
16"	70	8 rd	New	180	Larkin			Surface	
13	48	"	SH	700	"			Water Shut-off	
10 3/4	38	"	SH	1220	"			"	
8 5/8	36	"	SH	1956	"			"	
7"	20	"	New	3674	Halliburton			Oil String	

MUDDING AND CEMENTING RECORD

SIZE OF HOLE	SIZE OF CASING	WHERE SET	NO. SACKS OF CEMENT	METHODS USED	MUD GRAVITY	AMOUNT OF MUD USED
22	16"	180	150	Halliburton		
8 1/4	7"	3674	400	Halliburton		

PLUGS AND ADAPTERS

Heaving plug—Material..... Length..... Depth Set.....
 Adapters — Material..... Size.....

RECORD OF SHOOTING OR CHEMICAL TREATMENT

SIZE	SHELL USED	EXPLOSIVE OR CHEMICAL USED	QUANTITY	DATE	DEPTH SHOT OR TREATED	DEPTH CLEANED OUT

Results of shooting or chemical treatment.....

RECORD OF DRILL-STEM AND SPECIAL TESTS

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

TOOLS USED

Rotary tools were used from..... feet to..... feet, and from..... feet to..... feet
 Cable tools were used from 0..... feet to 3803..... feet, and from..... feet to..... feet

PRODUCTION

Put to producing....., 19.....
 The production of the first 24 hours was..... barrels of fluid of which.....% was oil;% emulsion;% water; and.....% sediment. Gravity, Be.....
 If gas well, cu. ft. per 24 hours 200,000 est.,..... Gallons gasoline per 1,000 cu. ft. of gas.....
 Rock pressure, lbs. per sq. in.....

EMPLOYEES

J. W. Whaley....., Driller H. T. Reynolds....., Driller
 W. R. High....., Driller G. C. Parrish....., Driller

FORMATION RECORD ON OTHER SIDE

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

Subscribed and sworn to before me this 1st.....

day of March, 1919

Juanita Denton
 Notary Public

My Commission expires August 28, 1949

Artesia, New Mexico March 1, 1919
 Place Date

Name *Raymond Lamb*

Position Engineer

Representing Wilson Oil Company
 Company or Operator

Address Box 627, Santa Fe, New Mexico

FORMATION RECORD

FROM	TO	THICKNESS IN FEET	FORMATION
0	25	25	Caliche, Surface sand
25	120	95	Sand
120	125	5	Water sand
125	140	15	Gravel
140	160	20	Red rock
160	165	5	Water sand
165	190	25	Red rock
190	215	25	Yellow mud
215	225	10	Water sand
225	685	460	Red rock
685	700	15	Sandy shale
700	810	110	Sandy shale
810	820	10	Sand
820	880	60	Sandy shale
880	900	20	Water sand
900	1010	110	Sand & shale
1010	1221	211	Sandy shale
1221	1636	415	Red rock & shale
1636	1665	29	Anhydrite
1665	1675	10	Red rock
1675	1757	82	Anhydrite
1757	1880	123	Salt
1880	2090	210	Salt & red rock
2090	2245	20	Anhydrite
2245	2265	20	Anhydrite
2265	2875	610	Salt
2875	2930	55	Anhydrite
2930	3145	215	Salt
3145	3171	26	Anhydrite
3171	3306	135	Salt
3306	3309	3	Anhydrite
3309	3337	28	Salt & Anhydrite
3337	3380	43	Anhydrite & Limestone
3380	3469	89	Gray Limestone
3469	3477	8	Brandy limestone
3477	3500	23	Gray Limestone
3500	3504	4	Sandy limestone
3504	3527	23	Gray limestone
3527	3557	30	Sand & Limestone
3557	3572	15	Sand
3572	3605	83	Gray Limestone
3605	3624	19	Gas sand
3624	3644	20	Sand & limestone
3644	3674	30	Lime
3674	3776	2	Gray & white limestone
3776	3803	27	White lime.....TOTAL DEPTH

Plugged back 3660

ORIGINAL

NEW MEXICO OIL CONSERVATION COMMISSION
Santa Fe, New Mexico

(Rev. 1-27-54)

REQUEST FOR ~~WELL~~ (GAS) ALLOWABLE

DISTRICT OFFICE 006

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. An allowable will be assigned effective 7:00 A.M. on date of completion or recompletion, provided this form is filed during the first month of completion or recompletion. The completion date shall be that date in the case of an oil well when oil is first produced into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

Artesia, N. Mex. June 17, 1954
(Place) (Date)

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

Wilson Oil Company State _____, Well No. 31, in NW 1/4 S _____
(Company or Operator) (Lease)
J, Sec. 24, T. 21, R. 34, NMPM, Wilson
(Unit)

Lea County. Date Spudded _____, Recompletion Date Completed June 19, 1954

Please indicate location:

Elevation 3650 Total Depth 3856, P.B. _____

Top oil/gas pay 3527 Prod. Form Yates

Casing Perforations: 3527 - 3625

Depth to Casing shoe of Prod. String 3674

Natural Prod. Test _____

based on _____ bbls. Oil in _____ Hrs _____

Test after acid or shot _____

Based on _____ bbls. Oil in _____ Hrs _____

Gas Well Potential 100,000 CFPD

Size choke in inches 16/64

Date first oil run to tanks or gas to Transmission system: June 7, 1954

Transporter taking Oil or Gas: _____

Remarks: Gas to be used on Lease B-10792 and will be transported in Company Lease Gas Line.

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

Approved JUN 18 1954, 1954

Wilson Oil Company
(Company or Operator)

By: N. Raymond Lamb
(Signature)

Title: Vice President
Send Communications regarding well to:

Name: N. Raymond Lamb

Address: Box 1436, Artesia, New Mexico

OIL CONSERVATION COMMISSION

By: P. G. Hanson
Oil & Gas Inspector
Title _____

ORIGINAL

NEW MEXICO OIL CONSERVATION COMMISSION

Santa Fe, New Mexico
MAIN OFFICE OCC

HOBBS OFFICE OCC

MISCELLANEOUS NOTICES

1954 JUN 8 AM 9:04

Submit this notice in TRIPLICATE to the District Office, Oil Conservation Commission, before the work specified is to begin. A copy will be returned to the sender on which will be given the approval, with any modifications considered advisable, or the rejection by the Commission or agent, of the plan submitted. The plan as approved should be followed, and work should not begin until approval is obtained. See additional instructions in the Rules and Regulations of the Commission.

Indicate Nature of Notice by Checking Below

NOTICE OF INTENTION TO CHANGE PLANS		NOTICE OF INTENTION TO TEMPORARILY ABANDON WELL		NOTICE OF INTENTION TO DRILL DEEPER	X
NOTICE OF INTENTION TO PLUG WELL		NOTICE OF INTENTION TO PLUG BACK		NOTICE OF INTENTION TO SET LINER	
NOTICE OF INTENTION TO SQUEEZE		NOTICE OF INTENTION TO ACIDIZE		NOTICE OF INTENTION TO SHOOT (Nitro)	
NOTICE OF INTENTION TO GUN PERFORATE		NOTICE OF INTENTION (OTHER)		NOTICE OF INTENTION (OTHER)	

OIL CONSERVATION COMMISSION
SANTA FE, NEW MEXICO

Artesia, New Mexico
(Place)

June 7, 1954
(Date)

Gentlemen:

Following is a Notice of Intention to do certain work as described below at the.....

Wilson Oil Company State Well No. 31 in J
(Company or Operator) (Unit)

NW 1/4 SE 1/4 of Sec. 24, T. 21, R. 34, NMPM., Wilson Pool
(40-acre Subdivision)

Lea County.

FULL DETAILS OF PROPOSED PLAN OF WORK
(FOLLOW INSTRUCTIONS IN THE RULES AND REGULATIONS)

Permission is requested to drill well from total depth 3797' to a depth not to exceed 4000' in an effort to secure commercial production.

Permission is also requested to acidize or hydrofrac for the stimulation of production.

Approved JUN 8 1954, 19.....
Except as follows:

Approved
OIL CONSERVATION COMMISSION
By S. G. Stanley
Title Engineer District 1

Wilson Oil Company
Company or Operator
By N. Raymond Lamb
Position Vice-President
Send Communications regarding well to:
Name N. Raymond Lamb
Address Box 1436, Artesia, N. M.

NEW MEXICO OIL CONSERVATION COMMISSION

SANTA FE, NEW MEXICO

MISCELLANEOUS NOTICES

RECEIVED
FEB 17 1949

Submit this notice in triplicate to the Oil Conservation Commission or its proper agent before the work specified is to begin. A copy will be returned to the sender on which will be given the approval, with any modifications considered advisable, or the rejection by the Commission or agent, of the plan submitted. The plan as approved should be followed, and work should not begin until approval is obtained. See additional instructions in the Rules and Regulations of the Commission.

Indicate nature of notice by checking below:

NOTICE OF INTENTION TO TEST CASING SHUT-OFF	<input checked="" type="checkbox"/>	NOTICE OF INTENTION TO SHOOT OR CHEMICALLY TREAT WELL	
NOTICE OF INTENTION TO CHANGE PLANS		NOTICE OF INTENTION TO PULL OR OTHERWISE ALTER CASING	
NOTICE OF INTENTION TO REPAIR WELL		NOTICE OF INTENTION TO PLUG WELL	
NOTICE OF INTENTION TO DEEPEN WELL			

Santa Fe, New Mexico Place 2-16-49 Date

OIL CONSERVATION COMMISSION,
Santa Fe, New Mexico.

Gentlemen:

Following is a notice of intention to do certain work as described below at the _____

Wilson Oil Company State B-10792 Well No. 31 in NW 1/4 SE 1/4
Company or Operator Lease

of Sec. 24, T. 21, R. 34, N. M. P. M., Wilson Field.
Lea County.

FULL DETAILS OF PROPOSED PLAN OF WORK
FOLLOW INSTRUCTIONS IN THE RULES AND REGULATIONS OF THE COMMISSION

16" casing to be run at 180' and cemented with 150 sacks cement.
The water shut-off test to be made before drilling ahead

FEB 17 1949

Approved _____, 19____
except as follows:

OIL CONSERVATION COMMISSION,
By Ray, your name
Title _____

Wilson Oil Company
Company or Operator
By Raymond Lamb
Position Ass't. to the President
Send communications regarding well to
Name Francis C. Wilson
Address P.O. Box 627
Santa Fe, New Mexico

NEW MEXICO OIL CONSERVATION COMMISSION

SANTA FE, NEW MEXICO

MISCELLANEOUS NOTICES

RECEIVED
FEB 17 1949

Submit this notice in triplicate to the Oil Conservation Commission or its proper agent before the work specified is to begin. A copy will be returned to the sender on which will be given the approval, with any modifications considered advisable, or the rejection by the Commission or agent, of the plan submitted. The plan as approved should be followed, and work should not begin until approval is obtained. See additional instructions in the Rules and Regulations of the Commission.

Indicate nature of notice by checking below:

NOTICE OF INTENTION TO TEST CASING SHUT-OFF	X	NOTICE OF INTENTION TO SHOOT OR CHEMICALLY TREAT WELL	
NOTICE OF INTENTION TO CHANGE PLANS		NOTICE OF INTENTION TO PULL OR OTHERWISE ALTER CASING	
NOTICE OF INTENTION TO REPAIR WELL		NOTICE OF INTENTION TO PLUG WELL	
NOTICE OF INTENTION TO DEEPEN WELL			

_____ Santa Fe, New Mexico _____ 2-16-49 _____
Place Date

OIL CONSERVATION COMMISSION,
 Santa Fe, New Mexico.

Gentlemen:

Following is a notice of intention to do certain work as described below at the _____
Wilson Oil Company State 3-10792 Well No. 31 in SW 1/4 S 1/4
Company or Operator Lease
 of Sec. 24, T. 27, R. 34, N. M. P. M., Wilson Field.
Lea County.

FULL DETAILS OF PROPOSED PLAN OF WORK
 FOLLOW INSTRUCTIONS IN THE RULES AND REGULATIONS OF THE COMMISSION
 Plan to run 7" casing at approximately 3675' and cement with 400 sacks

Approved _____, 19____
 except as follows:

Wilson Oil Company
Company or Operator
 By Raymond Lamb
 Position Ass't to the President
 Send communications regarding well to
 Name Francis C. Wilson
 Address P.O. Box 627
Santa Fe, New Mexico

OIL CONSERVATION COMMISSION
 By Ray J. Youbrack
 Title _____

ORIGINAL

NEW MEXICO OIL CONSERVATION COMMISSION

SANTA FE, NEW MEXICO

MISCELLANEOUS NOTICES

RECEIVED
FEB 17 1949
OFFICE

Submit this notice in triplicate to the Oil Conservation Commission or its proper agent before the work specified begin. A copy will be returned to the sender on which will be given the approval, with any modifications considered advisable, or the rejection by the Commission or agent, of the plan submitted. The plan as approved should be followed, and work should not begin until approval is obtained. See additional instructions in the Rules and Regulations of the Commission.

Indicate nature of notice by checking below:

NOTICE OF INTENTION TO TEST CASING SHUT-OFF		NOTICE OF INTENTION TO SHOOT OR CHEMICALLY TREAT WELL	
NOTICE OF INTENTION TO CHANGE PLANS	X	NOTICE OF INTENTION TO PULL OR OTHERWISE ALTER CASING	
NOTICE OF INTENTION TO REPAIR WELL		NOTICE OF INTENTION TO PLUG WELL	
NOTICE OF INTENTION TO DEEPEN WELL			

Santa Fe, New Mexico 2-16-49
Place Date

OIL CONSERVATION COMMISSION,
Santa Fe, New Mexico.

Gentlemen:

Following is a notice of intention to do certain work as described below at the _____
Wilson Oil Company State B-10792 Well No. 51 in NW 1/4
 Company or Operator Lease
 of Sec. 24, T. 21, R. 34, N. M. P. M., Wilson Co. Lea County.

FULL DETAILS OF PROPOSED PLAN OF WORK

FOLLOW INSTRUCTIONS IN THE RULES AND REGULATIONS OF THE COMMISSION

The above noted well was drilled to a total depth 3803' in limestone. Sulphur water was encountered from 3800' to 3803'. The 7" casing is set at 3674' and cemented with 400 sacks.

Permission is requested to plug well back with cement to approximately 3650' and perforate casing in the Yates Sand, and complete well as a gas well.

Approved _____ FEB 17 1949, 19 _____
 except as follows:

Wilson Oil Company
 Company or Operator
 By Raymond L. ...
 Position Ass't to the President
 Send communications regarding well to
 Name Wilson Oil Company
 Address P.O. Box 627
Santa Fe, New Mexico

OIL CONSERVATION COMMISSION,
 By Ray ...
 Title _____

Santa Fe, New Mexico

RECEIVED
DEC 18 1948
HOBBS

NOTICE OF INTENTION TO DRILL

Notice must be given to the Oil Conservation Commission or its proper agent and approval obtained before drilling begins. If changes in the proposed plan are considered advisable, a copy of this notice showing such changes will be returned to the sender. Submit this notice in triplicate. One copy will be returned following approval. See additional instructions in Rules and Regulations of the Commission.

Santa Fe, New Mexico

12-11-48

Place

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 _____

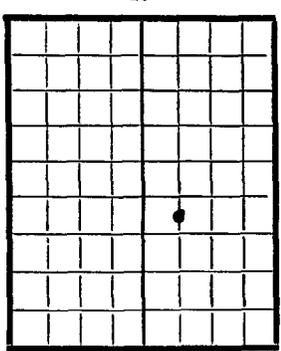
Wilson Oil Company
Company or Operator

State
Lease

Well No. 31 in NW 34

of Sec. 24, T. 21 S, R. 34 E, N. M. P. M., Wilson Field, Lea County.

N



The well is 2310 feet (N.) (S) of the south line and 1980 feet (E.) (W.) of the east line of Section 24-21-34

(Give location from section or other legal subdivision lines. Cross out wrong directions.)

If state land the oil and gas lease is No. B-10792 Assignment No. _____

If patented land the owner is _____

Address _____

If government land the permittee is _____

Address _____

The lessee is _____

Address _____

AREA 640 ACRES

LOCATE WELL CORRECTLY

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

Cable Tools to total depth

The status of a bond for this well in conformance with Rule 39 of the General Rules and Regulations of the Commission is as follows: \$ 10,000 Blanket Bond in full force and effect

We propose to use the following strings of casing and to land or cement them as indicated:

Size of Hole	Size of Casing	Weight Per Foot	New or Second Hand	Depth	Landed or Cemented	Sacks Cement
22	16	70	New	200	Cemented	200
15	13	48	S.H.	750	Landed	Aquagel
12	10	38	S.H.	1250	"	"
10	7	20	New	3650	Cemented	300

If changes in the above plan become advisable we will notify you before cementing or landing casing. We estimate that the first productive oil or gas sand should occur at a depth of about 3740 feet.

Additional information:

Approved _____, 19____
except as follows: Cement must
Return to top of well
on 7" casing

Sincerely yours,

Wilson Oil Company
Company or Operator

By Raymond Lant

Position Asst. To The President

Send communications regarding well to

Name Wilson Oil Company

Address P.O. Box 627 Santa Fe, New Mexico

OIL CONSERVATION COMMISSION,
By Roy Youbray
Title _____