

# NM OIL CONSERVATION

Submit To Appropriate District Office Two Copies District I 1625 N French Dr., Hobbs, NM 88240 District II 811 S. First St., Artesia, NM 88210 District III 1000 Rio Brazos Rd., Aztec, NM 87401 District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505		<b>ARTESIA DISTRICT</b> State of New Mexico Energy, Minerals and Natural Resources  <b>Oil Conservation Division</b> 1220 South St. Francis Dr. Santa Fe, NM 87505			<b>Form C-105</b> Revised August 1, 2011	
		NOV 07 2014 <b>RECEIVED</b>				
<b>WELL COMPLETION OR RECOMPLETION REPORT AND LOG</b>						
4. Reason for filing: <input checked="" type="checkbox"/> <b>COMPLETION REPORT</b> (Fill in boxes # 1 through #31 for State and Fee wells only) <input type="checkbox"/> <b>C-144 CLOSURE ATTACHMENT</b> (Fill in boxes #1 through #9, #15 Date Rig Released and #32 and/or #33; attach this and the plat to the C-144 closure report in accordance with 19.15.17.13.K NMAC)				5. Lease Name or Unit Agreement Name <b>Hepler Fee</b>		
				6. Well Number: <b>1</b>		
7. Type of Completion: <input checked="" type="checkbox"/> <b>NEW WELL</b> <input type="checkbox"/> <b>WORKOVER</b> <input type="checkbox"/> <b>DEEPENING</b> <input type="checkbox"/> <b>PLUGBACK</b> <input type="checkbox"/> <b>DIFFERENT RESERVOIR</b> <input type="checkbox"/> <b>OTHER</b>						
8. Name of Operator <b>Mack Energy Corporation</b>				9. OGRID <b>013837</b>		
10. Address of Operator <b>P.O. Box 960, Artesia, NM 88210</b>				11. Pool name or Wildcat <b>Cass Draw; Bone Spring</b>		
<b>12. Location</b>	<b>Unit Ltr</b>	<b>Section</b>	<b>Township</b>	<b>Range</b>	<b>Lot</b>	<b>Feet from the</b>
Surface:	C	34	22S	27E		1175
BH:	F	34E	22S	27E		1686
<b>13. Date Spudded</b>	<b>14. Date T.D. Reached</b>	<b>15. Date Rig Released</b>		<b>16. Date Completed (Ready to Produce)</b>		<b>17. Elevations (OF and RKB, RT, GR, etc.)</b>
8/27/2014	9/6/2014	9/9/2014		10/9/2014		3111.5' GR
<b>18. Total Measured Depth of Well</b>		<b>19. Plug Back Measured Depth</b>		<b>20. Was Directional Survey Made?</b>		<b>Gamma Ray, Neutron, Density Log Run</b>
9378'		9330'		Yes		Lateralog, Spectral Gamma Ray
22. Producing Interval(s), of this completion - Top, Bottom, Name <b>6653-9126' Cass Draw; Bone Spring</b>						
<b>23. CASING RECORD (Report all strings set in well)</b>						
<b>CASING SIZE</b>	<b>WEIGHT LB./FT.</b>	<b>DEPTH SET</b>		<b>HOLE SIZE</b>	<b>CEMENTING RECORD</b>	<b>AMOUNT PULLED</b>
13 3/8" J-55	48#	420'		17 1/2"	420	None
9 5/8" J-55	36#	1838'		12 1/4"	625	None
7" HCP-110 & L-80	26#	9378'		8 3/4"	1450	None
<b>24. LINER RECORD</b>						
<b>SIZE</b>	<b>TOP</b>	<b>BOTTOM</b>	<b>SACKS CEMENT</b>	<b>SCREEN</b>	<b>25. TUBING RECORD</b>	
					<b>SIZE</b>	<b>DEPTH SET</b>
					2 7/8" L-80	6550'
					<b>PACKER SET</b>	
						6550'
26. Perforation record (interval, size, and number) 6653-6814', 50, 42 7302-7440', 50, 42 8098-8120', 50, 42 8694-8844', 50, 42 8952-9126', 50, 42				27. ACID, SHOT, FRACTURE, CEMENT, SQUEEZE, ETC. DEPTH INTERVAL      AMOUNT AND KIND MATERIAL USED 6653-9126'      See C-103 for details		
<b>28. PRODUCTION</b>						
<b>Date First Production</b>		<b>Production Method (Flowing, gas lift, pumping - Size and type pump)</b>			<b>Well Status (Prod. or Shut-in)</b>	
10/17/2014		Pumping			Producing	
<b>Date of Test</b>	<b>Hours Tested</b>	<b>Choke Size</b>	<b>Prod'n For Test Period</b>	<b>Oil - Bbl</b>	<b>Gas - MCF</b>	<b>Water - Bbl.</b>
10/30/2014	24 hours			66	Waiting on Gas Meter	306
<b>Flow Tubing Press.</b>	<b>Casing Pressure</b>	<b>Calculated 24-Hour Rate</b>	<b>Oil - Bbl.</b>	<b>Gas - MCF</b>	<b>Water - Bbl.</b>	<b>Oil Gravity - API - (Corr.)</b>
			66	Waiting on Gas Meter	306	43.20
29. Disposition of Gas (Sold, used for fuel, vented, etc.) <b>Sold</b>						30. Test Witnessed By <b>Robert Chase</b>
31. List Attachments <b>Logs, Directional &amp; Deviation Survey</b>						
32. If a temporary pit was used at the well, attach a plat with the location of the temporary pit.						
33. If an on-site burial was used at the well, report the exact location of the on-site burial:						
Latitude      Longitude      NAD 1927 1983						
I hereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief						
Signature <u>Deana Weaver</u>		Name <u>Deana Weaver</u>		Title <u>Production Clerk</u>		Date <u>11.5.14</u>
E-mail Address <u>dweaver@mec.com</u>						

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