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

RECEIVED

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
JUN 1 7 1982
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

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

O. C. D.
ARTESIA OFFICE

RECEIVED

MAR 14 1979

I. PROPRAT ON OFFICE

Operator: ARCO Oil and Gas Company - ☒
Division of Atlantic Richfield Company

Address: P. O. Box 1710, Hobbs, New Mexico 88240

Reasons for filing (Check proper box):
 New Well ☐ Change in Transporter of: Oil ☐ Dry Gas ☐
 Recompletion ☐ Casinghead Gas ☐ Condensate ☐
 Change in Ownership ☐ Other (Please explain): Change in Operator Name effective: 4-1-79

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

II. DESCRIPTION OF WELL AND LEASE

Lessee Name	C.A. Russell	Well No., Prop. Name, Including Formation	5 Grayburg Jackson OGSA	Kind of Lease	State, Federal or Fee
Location					Federal
Unit Letter	E	2200 Feet From The North Line and	440 Feet From The West		
Line of Section	18	Township	17S	Range	31E, NMPM, Eddy County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil or Condensate	Texas New Mexico Pipeline Co.	Address (Give address to which approved copy of this form is to be sent)	Box 1510, Midland Texas 79701
Name of Authorized Transporter of Casinghead Gas or Dry Gas	Continental Pipeline Co.	Address (Give address to which approved copy of this form is to be sent)	Box 2197, Houston, Texas 77001
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge.	Is gas actually connected?	When
	D 18 17 31	Yes	6-1-60

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 Resrv.	Diff. Resrv.
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
No Change								
Pool	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
Perforations			Depth Casing Shoe					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

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

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
No Change			
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	Casing Pressure	Choke Size

VI. CERTIFICATE OF COMPLIANCE

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

George V. Parks
(Signature)

District Prod & Drilg Supt.

3-12-79

(Date)

OIL CONSERVATION COMMISSION

APR 6 1979

APPROVED _____, 19

BY *W. C. Russell*

TITLE SUPERVISOR, DISTRICT II

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

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

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

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

Separate Forms C-104 must be filed for each pool in multiply commingled wells.

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SF
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 Form 9-331-C for such proposals.)

1. oil ☒ gas ☐
well well other

2. NAME OF OPERATOR ARCO Oil and Gas Co.
Div of Atlantic Richfield Co.

3. ADDRESS OF OPERATOR
P. O. Box 1710, Hobbs, N M 88241-1710

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 2200' FNL & 440' FWL
AT TOP PROD. INTERVAL: as above
AT TOTAL DEPTH: as above

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:
TEST WATER SHUT-OFF ☐ ☐
FRACTURE TREAT ☐ ☐
SHOOT OR ACIDIZE ☐ ☐
REPAIR WELL ☐ ☐
PULL OR ALTER CASING ☐ ☐
MULTIPLE COMPLETE ☐ ☐
CHANGE ZONES ☐ ☐
ABANDON* ☐ ☐
(other) Repair surf csg, shut off waterflow

5. LEASE
LC-029548 (a)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
C. A. Russell

9. WELL NO.
5

10. FIELD OR WILDCAT NAME

Grayburg Jackson QGSA

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
18-17S-31E

12. COUNTY OR PARISH: 13. STATE
Eddy N M

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
3771' GR

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

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

1. Rig up, install BOP. POH w/comp assy.
2. Run GR-TS & determine water flow entry.
3. Set RBP below water flow. Dump 2 sx sd on top.
4. Perforate 7" csg below flow. Set cmt retr above water flow & perfs. Cmt sqz holes w/ quick set cmt for water zone & amt to be determined. WOC.
5. Drill out cmt. Press test sqz job. Run temp survey for TOC.
6. Reset BP above prior sqz holes in 7" csg.
7. Perf 7" csg above TOC. Run dye marker, determine volume.
8. RIH w/cmt retr, cmt sqz 7" csg perfs & circ cmt to surf. WOC.
9. Drill out cmt. Press test csg & sqz job. POH w/RBP.
10. Run CBL 3200'surf. CO to 3500'.
11. RIH w/comp assy return to production.

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED Jerry W. Schmidt TITLE Dist. Drlg. Supt. DATE 2/23/82

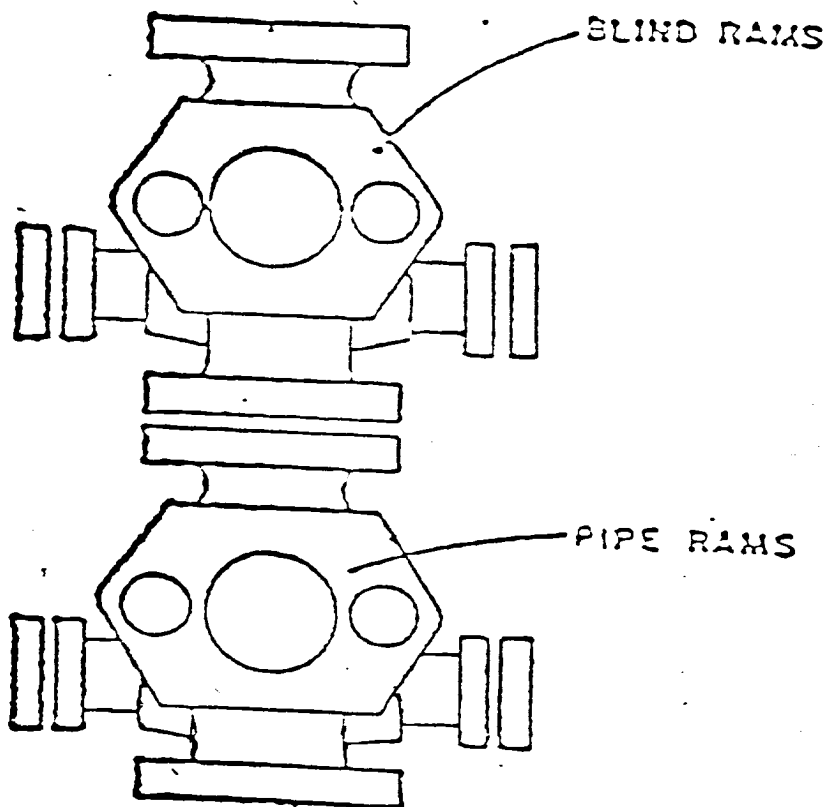
(This space for Federal or State office use)

APPROVED BY PETER W. CHESTER TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

FEB 25 1982

U.S. GEOLOGICAL SURVEY
ROSWELL, NEW MEXICO

*See Instructions on Reverse Side



ARCO Oil & Gas Company

Division of Atlantic Richfield Company

Blow Out Preventer Program

Lease Name C. A. Russell

Well No. 5

Location 2200' FNL & 440' FWL

Sec 18-17S-31E, Eddy Co, NM

BOP to be tested when installed on well and will be maintained in good working condition during drilling. All wellhead fittings to be of sufficient pressure to operate in a safe manner.

JWS
2/27/82

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DISTRIBUTION
SANTA FE
FILE
U.S.G.S.
LAND OFFICE
TRANSPORTER <input type="checkbox"/> OIL
<input type="checkbox"/> GAS
OPERATOR
PRODUCTION OFFICE

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

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

SEP 19 1969

O. C. C.
ARTESIA OFFICE

I. OPERATOR
 Operator Atlantic Richfield Company
 Address P. O. Box 1976, Roswell, New Mexico 88201
 Reason for filing (Check proper box):
 New well ☐ Change in Transporter oil ☐
 Re-completion ☐ Oil ☐ Dry Gas ☐
 Change in Ownership ☐ Casinghead Gas ☒ Condensate ☐
 Bff: 7-1-69
 If change of ownership give name and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Lease No.	Well No.	Pool Name, including Formation	Kind of Lease
<u>C. A. Russell</u>		<u>5</u>	<u>Grayburg Jackson O.G.S.A.</u>	State, Federal or Fee <u>Federal</u>
Location	Unit Letter	Feet From The	Line and	Feet From The
<u>2200</u> <u>400</u>	<u>E</u>	<u>South</u>	<u>440</u>	<u>West</u>
Line of Section	Township	Range	NEPM	Eddy
<u>16</u>	<u>17S</u>	<u>31E</u>		

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)
<u>Texas New Mexico Pipeline Company</u>	<u>P. O. Box 1510, Midland, Texas 79701</u>
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)
<u>Continental Oil Company</u>	<u>P. O. Box 1267, Ponca City, Oklahoma 74602</u>
If well produces oil or liquids, give location of tanks.	Is gas actually connected? When
Unit <u>D</u> Sec. <u>18</u> Twp. <u>17S</u> Rge. <u>31E</u>	<u>Yes</u> <u>6-1-60</u>

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 Prod. Dist. Reinf.
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 oil available 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 - 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	Casing Pressure	Choke Size

VI. CERTIFICATE OF COMPLIANCE

OIL CONSERVATION COMMISSION

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.

APPROVED _____, 19
 BY W. A. Everett
 TITLE _____

(Signature)
Accounting Material Supervisor
 (Title)
August 28, 1969
 (Date)

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.

NEW MEXICO OIL CONSERVATION COMMISSION
SANTA FE, NEW MEXICO

Form C-110
Revised 7/1/55

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

RECEIVED

CERTIFICATE OF COMPLIANCE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

JUL 28 1960

Company or Operator SINCLAIR OIL & GAS COMPANY Lease C.A. Russell

Well No. 5 Unit Letter E S 18 T 17 R 31 Pool Grayburg-Jackson

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

If well produces oil or condensate, give location of tanks: Unit E S 18 T 17 R 31

Authorized Transporter of Oil or Condensate Texas-New Mexico Pipeline Co

Address Box 1510, Midland, Texas
(Give address to which approved copy of this form is to be sent)

Authorized Transporter of Gas Skelly Oil Co

Address Box 1650, Tulsa, Okla Date Connected 6-1-60
(Give address to which approved copy of this form is to be sent)

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

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

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

Change in Ownership () Other ()

Remarks: (Give explanation below)

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

Executed this the 12 day of July 19 60

By _____

Approved Jul 22 1960 19 _____

Title Dist Supt

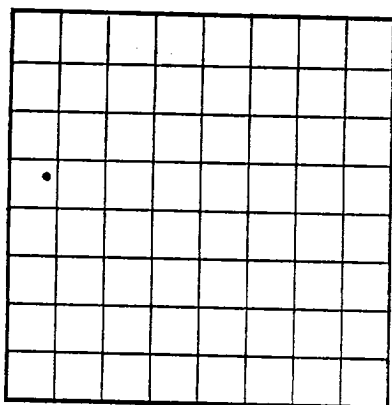
OIL CONSERVATION COMMISSION

Company Sinclair Oil & Gas Co

By W. H. Armstrong

Address 520 E Broadway, Hobbs, N.M.

Title Secretary



LOCATE WELL CORRECTLY

U. S. LAND OFFICE Las Cruces
 SERIAL NUMBER 029548-A
 LEASE OR PERMIT TO PROSPECT _____

UNITED STATES
 DEPARTMENT OF THE INTERIOR
 GEOLOGICAL SURVEY

LOG OF OIL OR GAS WELL

Company American Republics Corpn. Address Box 547, Artesia, N. M.
 Lessor or Tract C. A. Russell Field Gray-Jackson State New Mexico
 Well No. 5 Sec. 18 T. 17 R. 31 Meridian N.M.P.M. County Eddy
 Location 440 ft. {N.} of S. Line and 440 ft. {E.} of W. Line of NW 1/4 Sec. 18 Elevation 3771
(Derrick floor relative to sea level)

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

Signed W B Macey
 Title District Superintendent

Date 5/21/51

The summary on this page is for the condition of the well at above date.

Commenced drilling 3-14-, 1930 Finished drilling 6-20, 1930

OIL OR GAS SANDS OR ZONES

(Denote gas by G)

No. 1, from 1965 to 1970 No. 4, from 3111 to 3115
 No. 2, from 2080 to 2090 No. 5, from 3178 to _____
 No. 3, from 3090 to 3095 No. 6, from 3400 to 3444

IMPORTANT WATER SANDS

No. 1, from 475 to 480 No. 3, from _____ to _____
 No. 2, from _____ to _____ No. 4, from _____ to _____

CASING RECORD

Size casing	Weight per foot	Threads per inch	Make	Amount	Kind of shoe	Cut and pulled from	Perforated		Purpose
							From—	To—	
12 1/2	50	10	534						
10	40	10	387						
6 5/8	24	8	3214						

MUDDING AND CEMENTING RECORD

Size casing	Where set	Number sacks of cement	Method used	Mud gravity	Amount of mud used
12 1/2	534	25 sacks			
10	1387	105			
6 5/8	3214	Landed			

PLUGS AND ADAPTERS

Heaving plug—Material _____ Length _____ Depth set _____

6 5/8 3214	Landed			

PLUGS AND ADAPTERS

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

SHOOTING RECORD

Size	Shell used	Explosive used	Quantity	Date	Depth shot	Depth cleaned out
3½	Nitra		60	7/14/80	3430	to 3485

TOOLS USED

Rotary tools were used from _____ feet to _____ feet, and from _____ feet to _____ feet
Cable tools were used from 0 feet to 3545 feet, and from _____ feet to _____ feet

DATES

-----, 19-----	Put to producing ----- June 20, -----, 1930
The production for the first 24 hours was ----- 50 ----- barrels of fluid of which 100 % was oil; ----- % emulsion; ----- % water; and ----- % sediment.	Gravity, °Bé. -----
If gas well, cu. ft. per 24 hours -----	Gallons gasoline per 1,000 cu. ft. of gas -----
Rock pressure, lbs. per sq. in. -----	

EMPLOYEES

EMPLOYEES			
		, Driller	J. Neely, Driller
		, Driller	T. Miller, Driller

FORMATION RECORD

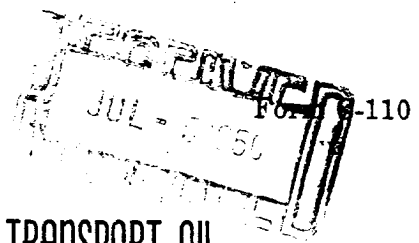
FROM—	TO—	TOTAL FEET	FORMATION
0	35	35	Sand
35	360	325	Red rock
360	400	40	Gyp
400	505	105	Red beds (salt water @475)
505	547	42	Gyp & red beds
547	1377	830	Salt & anhydrite
1377	1495	118	Lime & anhydrite
1495	1515	20	Red beds
1515	2387	882	Red beds & anhydrite
2387	2415	18	Red sand
2415	2465	50	Lime & anhydrite
2465	2710	245	Grey lime
2710	2792	82	Brown lime
2792	3545	753	Grey lime

(OVER)

16-43094-2

LOUISIANA RECORD—CONTINUED

OIL CONSERVATION COMMISSION
STATE OF NEW MEXICO



CERTIFICATE of COMPLIANCE and AUTHORIZATION to TRANSPORT OIL

Company or Operator American Republics Corp. Lease C. A. Russell
Address Box 547, Artesia, N. M. Houston, Texas
(Local or Field Office) (Principal Place of Business)
Unit E Wells No. 5 Sec. 18 T. 17 R. 31 Field Grayburg-Jackson County Eddy
Kind of Lease Federal Location of Tanks NW/4 Sec. 18
Transporter Texas-New Mexico P. L. Co. Address of Transporter Midland, Texas
(Local or Field Office)
Percent of oil to be transported 100. Other transporters author-
(Principal Place of Business) ized to transport oil from this unit are None %
REMARKS:

Same Transporter - Made in compliance with OCC Directive dated 5/26/50.

The undersigned certifies that the rules and regulations of the Oil Conservation Commission have been complied with except as noted above and that gathering agent is authorized to transport the percentages of oil produced from the above described property and that this authorization will be valid until further notice to the transporter named herein or until cancelled by the Oil Conservation Commission of New Mexico.

Executed this the 16th day of June, 1945

American Republics Corporation
(Company or Operator)

By W. B. Macey
Title District Superintendent

State of New Mexico
County of Eddy } ss.

Before me, the undersigned authority, on this day personally appeared W. B. Macey known to me to be the person whose name is subscribed to the above instrument, who being by me duly sworn on oath states that he is authorized to make this report and has knowledge of the facts stated herein and that said report is true and correct.

Subscribed and sworn to before me, this the 16th day of June, 1945
My Commission Expires May 31, 1953 James Street

Notary Public in and for Eddy County, New Mexico

Approved: James Street 1945

OIL CONSERVATION COMMISSION

By James Street

(See Instructions on Reverse Side)