

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other in-
structions on
reverse side)Form approved.
Budget Bureau No. 42-R355.5.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG*

1a. TYPE OF WELL: OIL WELL ☒ GAS WELL ☐ DRY ☐ Other Co-monlged

b. TYPE OF COMPLETION:

NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESV. ☐ Other ☐

2. NAME OF OPERATOR

B. Martin & Associates, Inc.

3. ADDRESS OF OPERATOR

2110 N. Sullivan, Farmington, NM 87401

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

At surface 1990' FSL and 1650' FWL

At top prod. interval reported below

At total depth

5. LEASE DESIGNATION AND SERIAL NO.

Contract #362

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

Jicarilla Apache

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

9. WELL NO.

#20 Martin-Whittaker

10. FIELD AND POOL, OR WILDCAT

WILDCAT

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

OR AREA

SW $\frac{1}{2}$ Sec. 8, T23N, R4W

BUREAU OF LAND MANAGEMENT

14. PERMIT NO. AND DATE ISSUED OF AREA

Jan. 10, 1984

12. COUNTY OR

PARISH

Rio Arriba

13. STATE

NM

15. DATE SPUDDED

16. DATE T.D. REACHED

17. DATE COMPL. (Ready to prod.)

18. ELEVATIONS (DF. RBB, RT, GR, ETC.)*

19. ELEV. CASINGHEAD

2/22/84

2/20/84

6/2/84

6936' GR

6936' GR

20. TOTAL DEPTH, MD & TVD

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

22. IF MULTIPLE COMPL.,

HOW MANY*

23. INTERVALS

ROTARY TOOLS

CABLE TOOLS

6611'

6610'

0-6611

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

5194-5212, 5677-5933, 6369-6509 Gallup

25. WAS DIRECTIONAL

SURVEY MADE

No

26. TYPE ELECTRIC AND OTHER LOGS RUN

SFL, BHC, CN, IES, GR

27. WAS WELL CORED

No

28.

CASING RECORD (Report all strings set in well)

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
9 5/8"	32	273'	12 1/2"	181.6ft ³	None
7"	23	485'	8 3/4"	762.50ft ³	None

29.

LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
4 1/2"	4717'	6611'	218ft ³	N/A	2 3/8	6535	N/A

31. PERFORATION RECORD (Interval, size and number)

5194-5212	.41	30
5677-5933	.41	81
6369-6509	.41	56

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
5194-5212	Stress Frac
5677-5933	85,000 gal. oil & 96,000# sand
6369-6509	48,880 gal. oil & 33,000# sand

33.*

PRODUCTION

DATE FIRST PRODUCTION 6/2/84		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Pumping					WELL STATUS (Producing or shut-in) Producing	
DATE OF TEST 6/8/84	HOURS TESTED 24	CHOKE SIZE 3/4	PROD'N. FOR TEST PERIOD →	OIL—BBL. 32	GAS—MCF. 55	WATER—BBL. 2	GAS-OIL RATIO 1718 to 1	
FLOW. TUBING PRESS. 45	CASING PRESSURE 45	CALCULATED 24-HOUR RATE →	OIL—BBL. 32	GAS—MCF. 55	WATER—BBL. 2	OIL GRAVITY-API (CORR.) 42		

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

Vented

TEST WITNESSED BY

Mr. Cary Green

35. LIST OF ATTACHMENTS

Deviation Affidavit

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

SIGNED

William L. Martin

TITLE

Operator

DATE 6/13/84

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

FARMINGTON RESOURCE AREA

BY

Smn

ACCEPTED FOR RECORD

JUN 19 1984

INSTRUCTIONS

General: This form is designed for submitting a complete and correct well completion report and log on all types of lands and leases to either a Federal agency or a State agency, or both, pursuant to applicable Federal and/or State laws and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State office. See instructions on Items 22 and 24, and 33, below regarding separate reports for separate completions.

If not filed prior to the time this summary record is submitted, copies of all currently available logs (drillers, geologists, sample and core analysis, all types electric, etc.), formation and pressure tests, and directional surveys, should be attached hereto, to the extent required by applicable Federal and/or State laws and regulations. All attachments should be listed on this form, see Item 35.

Item 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

Item 18: Indicate which elevation is used as reference (where not otherwise shown) for depth measurements given in other spaces on this form and in any attachments.

Items 22 and 24: If this well is completed for separate production from more than one interval zone (multiple completion), so state in Item 22, and in Item 24 show the producing interval, or intervals, top(s), bottom(s) and name(s) (if any) for only the interval reported in Item 33. Submit a separate report (page) on this form, adequately identified, for each additional interval to be separately produced, showing the additional data pertinent to such interval.

Item 29: "Sacks Cement": Attached supplemental records for this well should show the details of any multiple stage cementing and the location of the cementing tool.

Item 33: Submit a separate completion report on this form for each interval to be separately produced. (See instruction for Items 22 and 24 above.)

37. SUMMARY OF POROUS ZONES:

SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF; CORREL INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL, TESTED, CUSHION TEST, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.			
Pictured Cliffs Mesa Verde Gallup	2557'	2650'		38.	GEOLOGIC MARKERS	
				NAME	MEAS. DEPTH	TRUE VERT. DEPTH
				Pictured Cliffs	2557'	Same
	4038'	5672'		Lewis	2650'	"
				Mesa Verde	4038'	"
	5672'			Gallup	5672'	"

OIL CONSERVATION DIVISION

Revised 10-1-78

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS3091/N
7-16-84

COPIES RECEIVED	
DISTRIBUTION	
STAFF	
OFFICE	
TRANSPORTER	OIL
PRODUCER	GAS
OPERATION OFFICE	
STAFF	

W.B. Martin & Associates, Inc.

2110 N. Sullivan, Farmington, NM 87401

Reason(s) for filing (Check proper box)

Well ☒
Completion ☐
Change in Ownership ☐

Change in Transporter of:

Oil ☐ Dry Gas ☐
Casinghead Gas ☐ Condensate ☐

Other (Please explain)

RECEIVED
JUN 15 1984Change of ownership give name
Address of previous ownerOIL CON. DIV.
DIST. 3

DESCRIPTION OF WELL AND LEASE

Well Name	Well No.	Pool Name, including Formation	Kind of Lease	Lease No.
Martin-Whittaker	20	S. Andrew Gallup	State, Federal or Fee Federal	#362

Unit Letter K ; 1990' Feet From The South Line and 1650' Feet From The West Line

Line of Section 8 Township 23N Range 4W, NMPM, Rio Arriba County

SIGNATURE OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐
Giant Refining Company Address (Give address to which approved copy of this form is to be sent)
P.O. Box 256, Farmington, NM 87499Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐
El Paso Natural Gas Company Address (Give address to which approved copy of this form is to be sent)
P.O. Box 1492, El Paso Texas 79978

Well produces oil or liquids, Location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	K	8	23N	4W	Waiting on Hookup	

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

COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res't.	Diff. Res't.
	X		X					
Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
2/02/84	6/2/84	6611'	6610'					
Strat. (DF, RAB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
6936' GR	Gallup	5194'	6535'					
Strat.			Depth Casing Shoe					
5194-5212', 5677'-6933', 6369-6509'			6610'					

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
2 1/2"	9 5/8"	273'	181.6ft ³
3 3/4"	7"	4869.57'	762.50ft ³
4 1/2"	4 1/2" Liner	4777-6611'	218ft ³
2"	2 3/8"	6535'	None

TEST DATA AND REQUEST FOR ALLOWABLE

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)

First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
6/2/84	6/8/84	Pumping	
Time of Test	Tubing Pressure	Casing Pressure	Choke Size
24hrs	45#	45#	3/4"
Oil Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF
1.81bbls	32bbls	2bbls	55MCF

WELL

Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
N/A	N/A	N/A	N/A
Test Method (pilot, back pr.)	Tubing Pressure (Shut-In)	Casing Pressure (Shut-In)	Choke Size
N/A	N/A	N/A	N/A

CERTIFICATE OF COMPLIANCE

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

William S. Martin
(Signature)

Operator

(Title)

6/13/84

(Date)

OIL CONSERVATION DIVISION

6-26-84
APPROVED JUN 26 1984

BY Original Signed by FRANK T. CHAVEZ

TITLE SUPERVISOR DISTRICT # 3

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 recompleted wells.