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# NEW MEXICO OIL CONSERVATION COMMISSION

30-495-22633  
Form C-101  
Revised 1-1-65

5A. Indicate Type of Lease
STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.

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

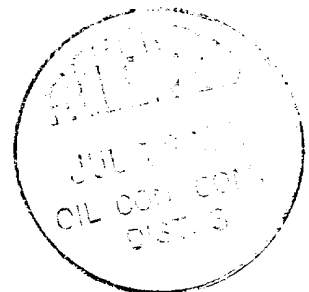
1a. Type of Work		7. Unit Agreement Name	
b. Type of Well DRILL <input checked="" type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input type="checkbox"/> OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> SINGLE ZONE <input type="checkbox"/> MULTIPLE ZONE <input type="checkbox"/>		8. Farm or Lease Name Santa Fe-Leggs	
2. Name of Operator Dome Petroleum Corporation		9. Well No. 1	
3. Address of Operator Minerals Management Inc., Suite 105, 501 Airport Drive, Farmington, New Mexico 87401		10. Field and Pool, or Wildcat Wildcat	
4. Location of Well UNIT LETTER <u>O</u> LOCATED <u>990</u> FEET FROM THE <u>South</u> LINE AND <u>2310</u> FEET FROM THE <u>East</u> LINE OF SEC. <u>11</u> TWP. <u>21N</u> RGE. <u>10W</u> NMPM		12. County San Juan	
21. Elevations (Show whether DF, RT, etc.) 6359' GL; 6371' KB		19. Proposed Depth 6500'	19A. Formation Entrada
21A. Kind & Status Plug. Bond Statewide	21B. Drilling Contractor Four Corners Drilling Co.	20. Rotary or C.T. Rotary	
22. Approx. Date Work will start 7-15-77			

## PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
13 1/4	9 5/8	36.00	200	200	Surface
8 3/4	7	20 & 23	6500	1000 (2Stage)	Surface

Operator proposes to drill an Entrada test to the depth of 6500'. Completion will be determined from logs. A Series 900 (3000 psi W.P.) blowout preventer will be used during drilling operations below surface pipe.

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

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

Signed [Signature] Title Area Manager Date July 13, 1977  
(This space for State Use)

APPROVED BY [Signature] TITLE Superintendent DATE 7/13/77  
CONDITIONS OF APPROVAL, IF ANY:

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

All distances must be from the outer boundaries of the Section

Operator <b>DOMO PETROLEUM CORPORATION</b>			Lease <b>SANTA FE LEGGS</b>		Well No. <b>1</b>
Unit Letter <b>J</b>	Section <b>11</b>	Township <b>21 NORTH</b>	Range <b>10 WEST</b>	County <b>SAN JUAN</b>	
Actual Footage Location of Well: <b>990</b> feet from the <b>SOUTH</b> line and <b>2310</b> feet from the <b>EAST</b> line					
Ground Level Elev. <b>6359</b>	Producing Formation <b>Entrada</b>	Pool <b>Wildcat</b>		Dedicated Acreage: <b>40</b> — Acres	

1. Outline the acreage dedicated to the subject well by colored pencil or hachure marks on the plat below.
2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty),
3. If more than one lease of different ownership is dedicated to the well, have the interests of all owners been consolidated by communitization, unitization, force-pooling, etc?

( ) Yes ( ) No If answer is "yes," type of consolidation .....

If answer is "no," list the owners and tract descriptions which have actually consolidated. (Use reverse side of this form if necessary.) .....

No allowable will be assigned to the well until all interests have been consolidated (by communitization, unitization, forced-pooling, or otherwise) or until a non standard unit, eliminating such interests, has been approved by the Commission.

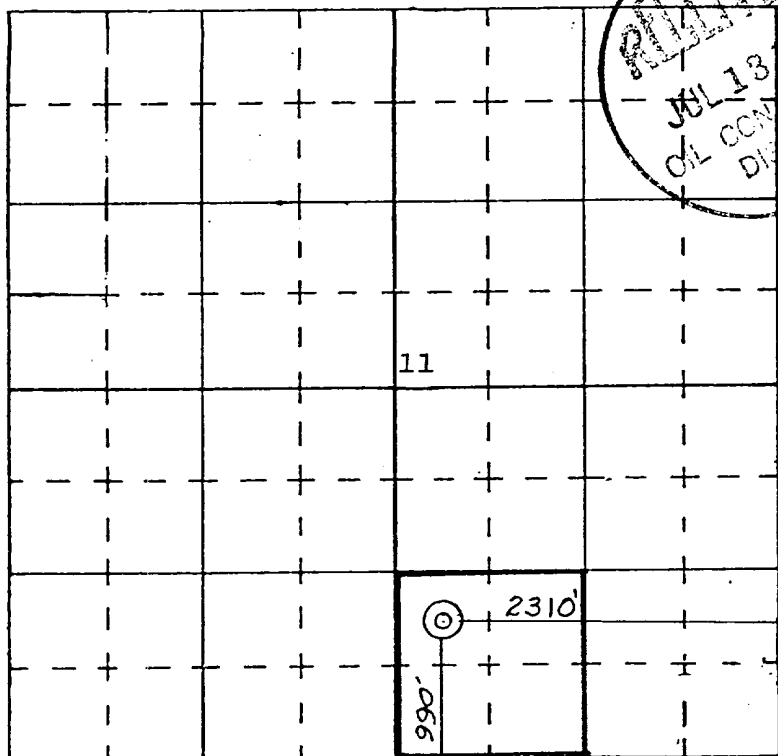
**CERTIFICATION**

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

*[Signature]*  
 Name \_\_\_\_\_  
 Area Manager  
 Position \_\_\_\_\_  
 Minerals Management Inc.  
 Company \_\_\_\_\_  
 July 13, 1977  
 Date \_\_\_\_\_

I hereby certify that the well location shown on this plat was plotted from field notes of accurate surveys made by me or under my supervision, and that the same is true and correct to the best of my knowledge and belief.

**12 July 1977**  
 Date Surveyed \_\_\_\_\_  
*[Signature]*  
 Registered Professional Engineer  
 and/or Land Surveyor **James P. Leese**



N

SCALE—4 INCHES EQUALS 1 MILE

**SAN JUAN ENGINEERING COMPANY, FARMINGTON, N. M.**

**1463**

Certificate No.

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# NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103  
Supersedes Old  
C-102 and C-103  
Effective 1-1-85

5a. Indicate Type of Lease	
State <input type="checkbox"/>	Fee <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.	

## SUNDRY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		7. Unit Agreement Name	
2. Name of Operator Dome Petroleum Corporation		8. Farm or Lease Name Santa Fe-Leggs	
3. Address of Operator Minerals Management Inc., Suite 105, 501 Airport Drive, Farmington, New Mexico 87401		9. Well No. 1	
4. Location of Well UNIT LETTER O 990 FEET FROM THE South LINE AND 2310 FEET FROM THE East LINE, SECTION 11 TOWNSHIP 21N RANGE 10W NMPM.		10. Field and Pool, or Wildcat Wildcat	
15. Elevation (Show whether DF, RT, GR, etc.) 6359' GL, 6371' KB		12. County San Juan	

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>

SUBSEQUENT REPORT OF:

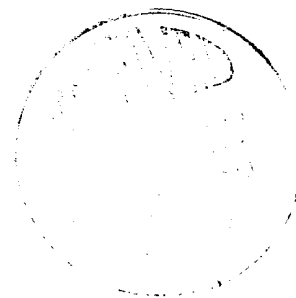
REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
CASING TEST AND CEMENT JOBS <input type="checkbox"/>	OTHER <input checked="" type="checkbox"/> Spud & Set Surface Casing

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.

7-16-77 Spudded 13 1/4" hole at 2:30 a.m.

Ran 5 jts (195') 9 5/8"-36#, K-55, ST&C casing set at 209' KB.  
Cemented w/200 sx Class "B", 2% CaCl. Plug down at 10:15 a.m.  
Circulated cement.

**CONFIDENTIAL**



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

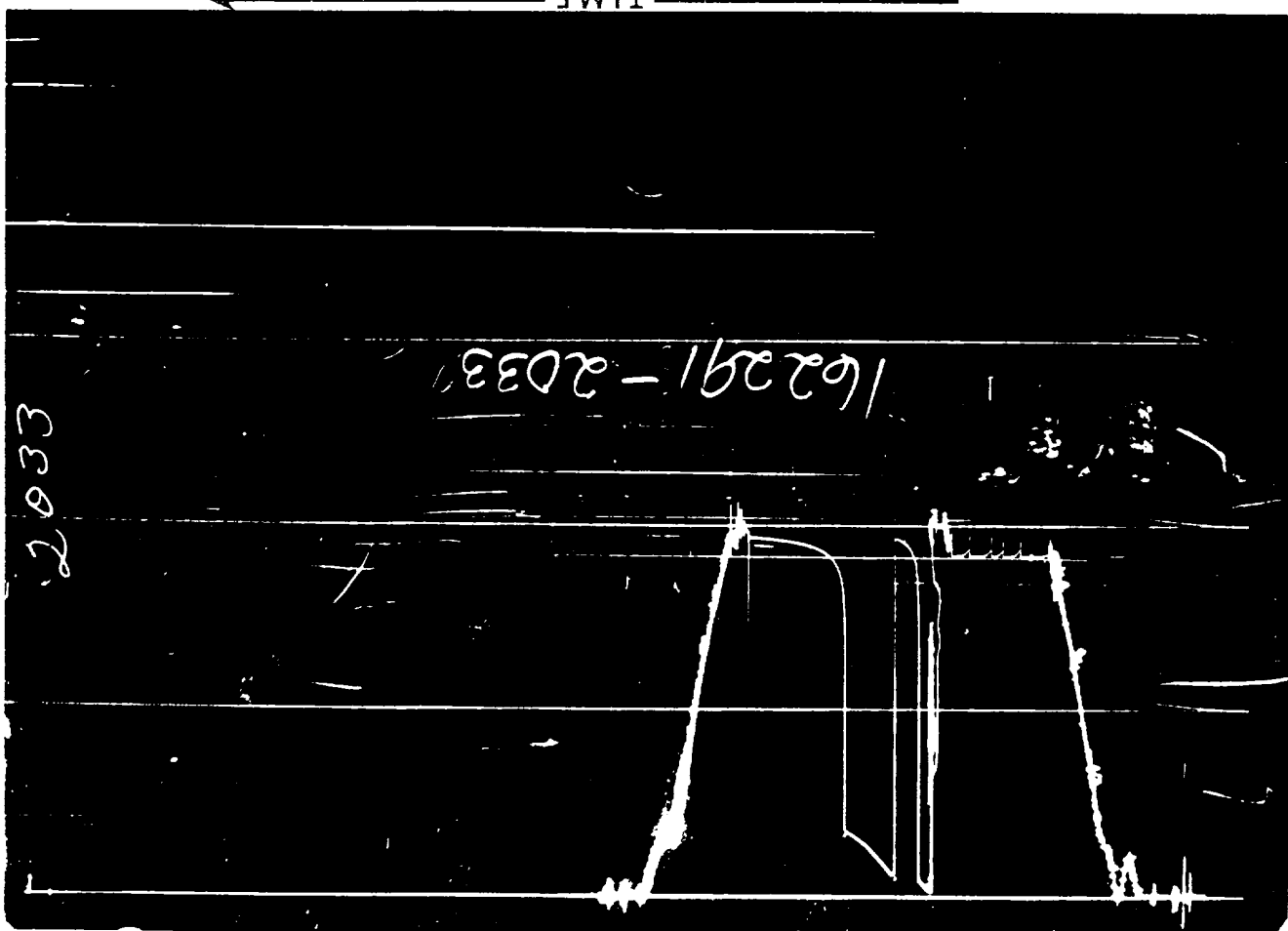
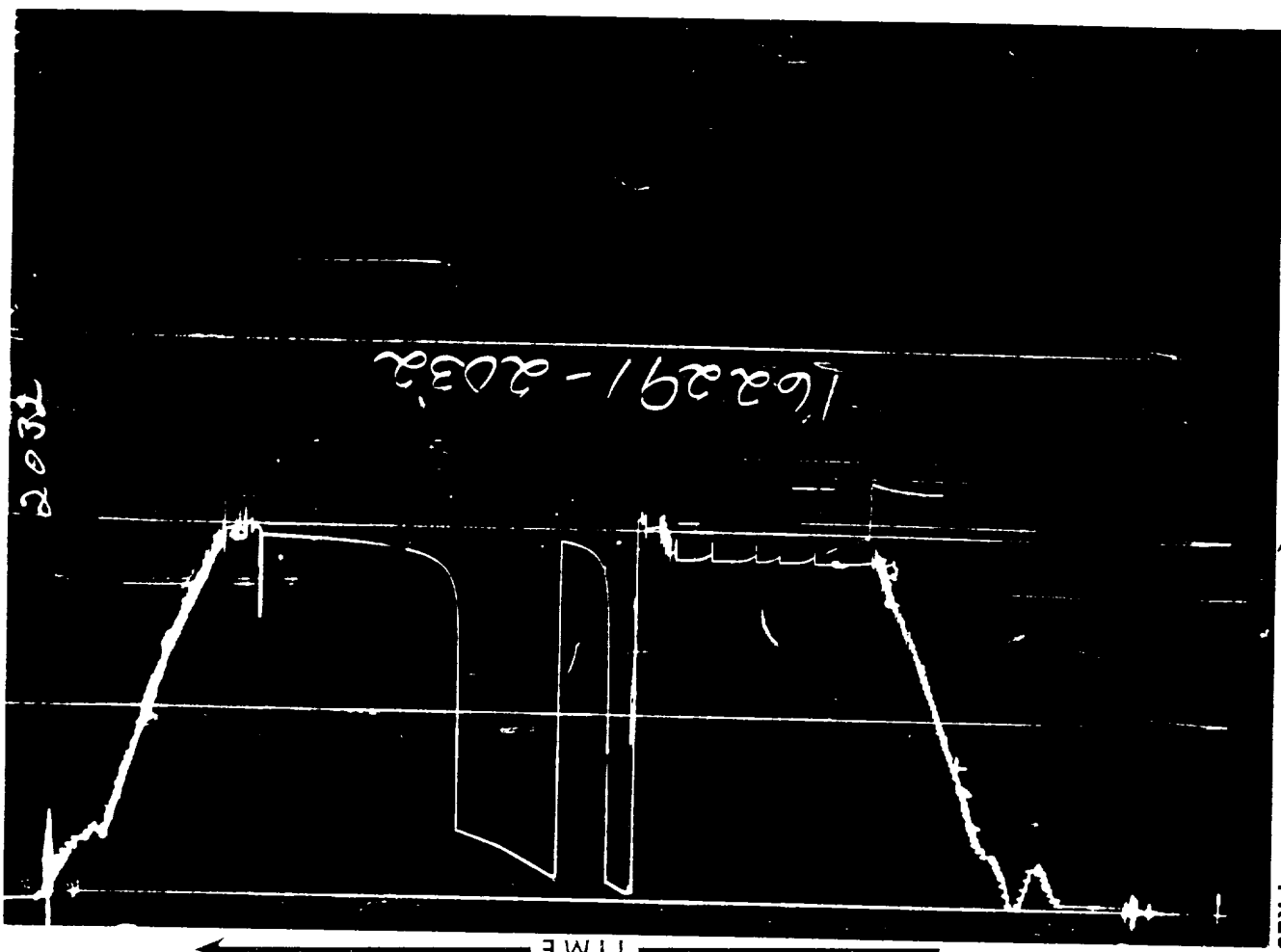
SIGNED [Signature] TITLE Area Manager  
Minerals Management Inc. DATE July 18, 1977

Original Signed by A. R. Hendrick

APPROVED BY \_\_\_\_\_ TITLE Area Manager DATE July 18, 1977

CONDITIONS OF APPROVAL, IF ANY:





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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

B.R.

Operator Dome Petroleum Corporation	
Address %Minerals Management Inc., Suite 105, 501 Airport Drive, Farmington, New Mexico 87401	
Reason(s) for filing (Check proper box)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Other (Please explain)	

If change of ownership give name  
and address of previous owner

I. DESCRIPTION OF WELL AND LEASE

Lease Name Santa Fe-Leggs	Well No. 1	Pool Name, Including Formation Wildcat - Entrada	Kind of Lease State, Federal or Fee Fee	Lease No. --
Location				
Unit Letter <u>O</u> ; <u>990</u> Feet From The <u>South</u> Line and <u>2310</u> Feet From The <u>East</u>				
Line of Section <u>11</u> Township <u>21N</u> Range <u>10W</u> , NMPM, San Juan County				

I. 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)	
Permian Corporation	P.O. Box 1183, Houston, Texas 77001	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
If well produces oil or liquids, give location of tanks.		
Unit O	Sec. 11	Twp. 21N
Rge. 10W	Is gas actually connected? No	
When		

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

II. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well <input type="checkbox"/>	New Well <input checked="" type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Res'v. <input type="checkbox"/>	Diff. Res'v. <input type="checkbox"/>
Date Spudded 7-16-77	Date Compl. Ready to Prod. 8-13-77		Total Depth 5644'		P.B.T.D. 5588'			
Elevations (DF, RKB, RT, GR, etc.) 6359' GR, 6371' KB	Name of Producing Formation Entrada		Top Oil/Gas Pay 5404'		Tubing Depth 3046'			
Perforations 5404'-5412'					Depth Casing Shoe 5630'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
13 1/4	9 5/8", 36#		209		200			
8 3/4	7", 20&23#		5630		960 (2 stage)			
--	3 1/4", 9.3#		--		--			

III. 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 8-13-77	Date of Test 8-15-77 - 8-16-77	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 18 hrs.	Tubing Pressure --	Casing Pressure --	Choke Size --
Actual Prod. During Test 199 Bbl.	Oil-Bbls. 176	Water-Bbls. 23	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

IV. 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.

W. L. Lindsey  
Area Manager (Signature)  
Minerals Management Inc.  
(Title)  
8-17-77  
(Date)

OIL CONSERVATION COMMISSION

APPROVED AUG 25 1977, 19  
BY Original Signed by A. R. Kendrick  
TITLE SUPERVISOR DIST. 23

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.

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Form C-105  
Revised 11-1-76

# NEW MEXICO OIL CONSERVATION COMMISSION WELL COMPLETION OR RECOMPLETION REPORT AND LOG

5a. Indicate Type of Lease  
State ☐ Fee ☒

5. State Oil & Gas Lease No.

1a. TYPE OF WELL

OIL WELL ☒ GAS WELL ☐ DRY ☐ OTHER ☐

b. TYPE OF COMPLETION  
NEW WELL ☒ WORK OVER ☐ DEEPEN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ OTHER ☐

7. Unit Agreement Name

8. Farm or Lease Name  
Santa Fe-Leggs

9. Well No.  
1

10. Field and Pool, or Wildcat  
Wildcat - Entrada

2. Name of Operator  
Dome Petroleum Corporation

3. Address of Operator  
Minerals Management Inc., Suite 105,  
501 Airport Drive, Farmington, New Mexico 87401

4. Location of Well

UNIT LETTER O LOCATED 990 FEET FROM THE South LINE AND 2310 FEET FROM East

THE East LINE OF SEC. 11 TWP. 21N RGE. 10W NMPM

12. County  
San Juan

15. Date Spudded  
7-16-77

16. Date T.D. Reached  
7-31-77

17. Date Compl. (Ready to Prod.)  
8-14-77

18. Elevations (DF, RKB, RT, GR, etc.)  
6359' GR, 6371' KB

20. Total Depth  
5644'

21. Plug Back T.D.  
5588'

22. If Multiple Compl., How Many  
--

23. Intervals Drilled By  
Rotary Tools  
0-5644'

19. Elev. Casinghead

25. Was Directional Survey Made  
No

24. Producing Interval(s), of this completion - Top, Bottom, Name  
5404'-5608', Entrada

26. Type Electric and Other Logs Run  
Dual Induction Laterolog, CNL-Density, GR-BHC Sonic

27. Was Well Cored  
NO

28. CASING RECORD (Report all strings set in well)					
CASING SIZE	WEIGHT LB./FT.	DEPTH SET	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
9 5/8	36	210	13 1/4	200 sx	None
7	23&20	5630	8 3/4	960 sx (2 stage)	None

29. LINER RECORD				30. TUBING RECORD		
SIZE	TOP	BOTTOM	SACKS CEMENT	SIZE	DEPTH SET	PACKER SET
				3 1/2	3002	--

31. Perforation Record (Interval, size and number)  
5404'-5412' with 2 jet shots per foot

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

DEPTH INTERVAL	AMOUNT AND KIND MATERIAL USED

33. PRODUCTION

Date First Production  
8-14-77

Production Method (Flowing, gas lift, pumping - Size and type pump)  
Pumping

Well Status (Prod. or Shut-in)  
Producing

Date of Test	Hours Tested	Choke Size	Prod'n. For Test Period	Oil - Bbl.	Gas - MCF	Water - Bbl.	Gas - Oil Ratio
8-16-77	18			176	TSTM	23	--

Flow Tubing Press.	Casing Pressure	Calculated 24-Hour Rate	Oil - Bbl.	Gas - MCF	Water - Bbl.	Oil Gravity - API (Corr.,)
--	--		235	TSTM	31	32

34. Disposition of Gas (Sold, used for fuel, vented, etc.)

Test Witnessed By  
R. Vigil

35. List of Attachments  
DST Record

36. 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.

SIGNED [Signature] TITLE Area Manager Minerals Management Inc. DATE 8-22-77

## INSTRUCTIONS

This form is to be filed with the appropriate District Office of the Commission not later than 20 days after the completion of any newly-drilled or deepened well. It shall be accompanied by one copy of all electrical and radio-activity logs run on the well and a summary of all special tests conducted, including drill stem tests. All depths reported shall be measured depths. In the case of directionally drilled wells, true vertical depths shall also be reported. For multiple completions, Items 30 through 34 shall be reported for each zone. The form is to be filed in quintuplicate except on state land, where six copies are required. See Rule 1105.

**INDICATE FORMATION TOPS IN CONFORMANCE WITH GEOGRAPHICAL SECTION OF STATE**

### Southeastern New Mexico

### Northwestern New Mexico

T. Anhy _____	T. Canyon _____	T. Ojo Alamo _____	T. Penn. "B" _____
T. Salt _____	T. Strawn _____	T. Kirtland-Fruitland _____	T. Penn. "C" _____
D. Salt _____	T. Atoka _____	T. Pictured Cliffs _____	T. Penn. "D" _____
T. Yates _____	T. Miss _____	T. Cliff House _____	T. Leadville _____
T. 7 Rivers _____	T. Devonian _____	T. Menefee _____	T. Madison _____
T. Queen _____	T. Silurian _____	T. Point Lookout _____	T. Elbert _____
T. Grayburg _____	T. Montoya _____	T. Mancos _____	T. McCracken _____
T. San Andres _____	T. Simpson _____	T. Gallup _____	T. Ignacio Qtzte _____
T. Glorieta _____	T. McKee _____	Base Greenhorn _____	T. Granite _____
T. Paddock _____	T. Ellenburger _____	T. Dakota _____	T. _____
T. Blinebry _____	T. Gr. Wash _____	T. Morrison _____	T. _____
T. Tubb _____	T. Granite _____	T. Todilto _____	T. _____
T. Drinkard _____	T. Delaware Sand _____	T. Entrada _____	T. _____
T. Abo _____	T. Bone Springs _____	T. Wingate _____	T. _____
T. Wolfcamp _____	T. _____	T. Chinle _____	T. _____
T. Penn. _____	T. _____	T. Permian _____	T. _____
T. Cisco (Bough C) _____	T. _____	T. Penn. "A" _____	T. _____

## OIL OR GAS SANDS OR ZONES

No. 1, from \_\_\_\_\_ to \_\_\_\_\_

No. 2, from \_\_\_\_\_ to \_\_\_\_\_

No. 3, from \_\_\_\_\_ to \_\_\_\_\_

No. 4, from \_\_\_\_\_ to \_\_\_\_\_

No. 5, from \_\_\_\_\_ to \_\_\_\_\_

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.....to.....feet.....

No. 2, from.....to.....feet.....

No. 3, from.....to.....feet.....

No. 4, from.....to.....feet.....

FORMATION RECORD (Attach additional sheets if necessary)

From	To	Thickness in Feet	Formation	From	To	Thickness in Feet	Formation



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# 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 <input type="checkbox"/>	Fee <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.	
7. Unit Agreement Name	
8. Farm or Lease Name	
Santa Fe-Leggs	
9. Well No.	
1	
10. Field and Pool, or Wildcat	
Wildcat	
12. County	
San Juan	

## SUNDRY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>
2. Name of Operator
Dome Petroleum Corporation
3. Address of Operator
%Minerals Management Inc., Suite 105, 501 Airport Drive, Farmington, New Mexico 87401
4. Location of Well
UNIT LETTER <u>O</u> <u>990</u> FEET FROM THE <u>South</u> LINE AND <u>2310</u> FEET FROM THE <u>East</u> LINE, SECTION <u>11</u> TOWNSHIP <u>21N</u> RANGE <u>10W</u> NMPM.
15. Elevation (Show whether DF, RT, GR, etc.)
6359' GL, 6371' KB

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

PERFORM REMEDIAL WORK ☐  
TEMPORARILY ABANDON ☐  
PULL OR ALTER CASING ☐  
OTHER ☐

PLUG AND ABANDON ☐  
CHANGE PLANS ☐  
OTHER ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐  
COMMENCE DRILLING OPNS. ☐  
CASING TEST AND CEMENT JOBS ☐  
OTHER Production Casing ☒

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.

8-1-77 Ran 5627', 136 jts, 7" (3426', 83 jts-20#; 2201', 53 jts-23#) K-55 ST&C casing set at 5630'. Cemented first stage w/390 sx Halliburton Light w/10# Gilsonite per sx tailed w/100 sx Class "B" w/10% salt. Plug down at 3:30 p.m. Opened DV tool at 2801' and circulated 4 hrs.

Cemented second stage w/420 sx Halliburton Light w/10# Gilsonite per sx tailed w/50 sx Class "B" w/10% salt. Plug down at 9:00 p.m. Circulated cement after opening DV tool and on second stage.

CONFIDENTIAL



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

SIGNED [Signature]

TITLE Area Manager  
Minerals Management Inc. DATE 8-2-77

APPROVED BY [Signature]

TITLE [Signature] DATE [Signature]

CONDITIONS OF APPROVAL, IF ANY:

Okal

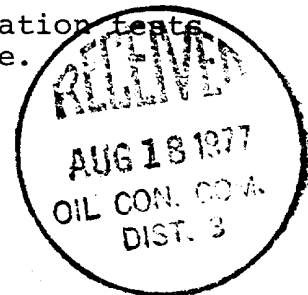
TABULATION OF DEVIATION TEST  
DOME PETROLEUM CORPORATION  
SANTA FE-LEGGS WELL NO. 1  
SAN JUAN COUNTY, NEW MEXICO

<u>DEVIATION</u>	<u>DEPTH</u>
1/2°	182'
3/4°	729'
1°	1223'
3/4°	1819'
1/2°	2328'
1/2°	2825'
1/4°	3329'
2°	3848'
3 1/2°	4128'
2°	4285'
1 1/2°	4475'
1 1/2°	4675'
1°	4881'
1°	5379'
2°	5640'

AFFIDAVIT

This is to certify that the above deviation tests  
are correct to the best of my knowledge.

*W. E. Landry*  
W. E. Landry  
Area Manager  
Minerals Management Inc.



Subscribed and sworn to before me 17 of August,  
1977. My commission expires 8-4-1978.  
Notary Public Nancy York.

OF THE STATE OF NEW MEXICO

IN THE MATTER OF THE HEARING  
CALLED BY THE OIL CONSERVATION  
COMMISSION OF NEW MEXICO FOR  
THE PURPOSE OF CONSIDERING:

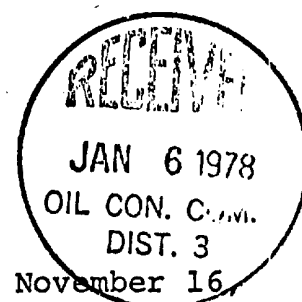
CASE NO. 6059  
Order No. R-5600

NOMENCLATURE

APPLICATION OF DOME PETROLEUM CORPORATION  
FOR POOL CREATION, AN OIL DISCOVERY ALLOWABLE  
AND A SPECIAL DEPTH BRACKET ALLOWABLE,  
SAN JUAN COUNTY, NEW MEXICO.

ORDER OF THE COMMISSION

BY THE COMMISSION:



This cause came on for hearing at 9 a.m. on November 16, 1977, at Santa Fe, New Mexico, before Examiner Richard L. Stamets.

NOW, on this 27th day of December, 1977, the Commission, a quorum being present, having considered the testimony, the record, and the recommendations of the Examiner, and being fully advised in the premises,

FINDS:

(1) That due public notice having been given as required by law, the Commission has jurisdiction of this cause and the subject matter thereof.

(2) That the applicant, Dome Petroleum Corporation, is the owner of the Santa Fe-Leggs Well No. 1, located in Unit 0 of Section 11, Township 21 North, Range 10 West, NMPM, San Juan County, New Mexico.

(3) That said well was completed as an oil well capable of producing from the Entrada formation on August 13, 1977, through perforations from 5404 feet to 5412 feet.

(4) That the applicant seeks the creation of a new pool for Entrada production for said well, and the assignment of an oil discovery allowable in the amount of 27,020 barrels of oil to said well.

(5) That said well has in fact made discovery of a new oil pool, and is entitled to the assignment of such discovery allowable.

(6) That a new pool in San Juan County, New Mexico, should be created and defined, classified as an oil pool for Entrada

production, and designated as the Leggs-Entrada Oil Pool, comprising the following-described lands:

TOWNSHIP 21 NORTH, RANGE 10 WEST, NMPM  
Section 11: All

(7) That the discovery well for said pool, the Dome Petroleum Corporation Santa Fe-Leggs Well No. 1, located in Unit 0 of said Section 11, should be assigned an oil discovery allowable in the amount of 27,020 barrels to be produced in addition to the well's regularly assigned allowable during the next 730 days.

(8) That the applicant further seeks the establishment of a special depth bracket allowable of 750 barrels per day for said Leggs-Entrada Oil Pool.

(9) That the well completed in the Leggs-Entrada Oil Pool is capable of producing large volumes of oil and water.

(10) That the ultimate recovery of oil in said pool will not be adversely affected by high rates of production but will instead be improved thereby.

(11) That approval of the application should serve to prevent waste and protect correlative rights.

(12) That the subject application should be approved.

IT IS THEREFORE ORDERED:

(1) That a new pool in San Juan County, New Mexico, classified as an oil pool for Entrada production, is hereby created and designated as the Leggs-Entrada Oil Pool, consisting of the following described area:

TOWNSHIP 21 NORTH, RANGE 10 WEST, NMPM  
Section 11: All

(2) That the discovery well for said pool, the Dome Petroleum Corporation Santa Fe-Leggs Well No. 1, located in Unit 0 of said Section 11, is hereby assigned an oil discovery allowable in the amount of 27,020 barrels, to be produced in addition to said well's regularly assigned allowable, at the rate of approximately 37 barrels per day during the next 730 days.

(3) That effective January 1, 1978, a special depth bracket allowable of 750 barrels of oil per day is hereby established for said Leggs-Entrada Oil Pool.

(4) That jurisdiction of this cause is retained for the entry of such further orders as the Commission may deem necessary

DONE at Santa Fe, New Mexico, on the day and year hereinabove designated.

STATE OF NEW MEXICO  
OIL CONSERVATION COMMISSION

PHIL R. LUCERO, Chairman

  
EMERY C. ARNOLD, Member

  
JOE D. RAMEY, Member & Secretary

S E A L

jr/



# DOME PETROLEUM CORP.

2900 DOME TOWER  
1625 BROADWAY  
DENVER, COLORADO 80202

0-11-21N-10W

TELEPHONE  
(303) 620-3000

March 9, 1982

J. D. Ramey  
Secretary Director  
New Mexico Oil Conservation Division  
P.O. Box 2088  
Santa Fe, New Mexico 87501

Re: Leggs Water Disposal  
Application

File: WF

Gentlemen:

Attached is the most recent water analysis from Santa Fe Leggs No. 1. The water quality is better than previously seen. This should make the case for water disposal even more favorable.

Very truly yours,  
DOME PETROLEUM CORP.

M. I. Choran  
Sr. Reservoir Engineer



*Murray Choran*

MIC:jp

Attch.

cc: Frank Chavez  
District Office for  
NW New Mexico  
Aztec, New Mexico

Bureau of Indian Affairs  
Navajo Area Office  
Window Rock, Arizona

Chaco Culture National  
Historical Park  
Broomfield, New Mexico

CORE LABORATORIES, INC.  
3428 Stanford Dr., N.E.  
Albuquerque, New Mexico 87107  
Phone: 505-884-1411

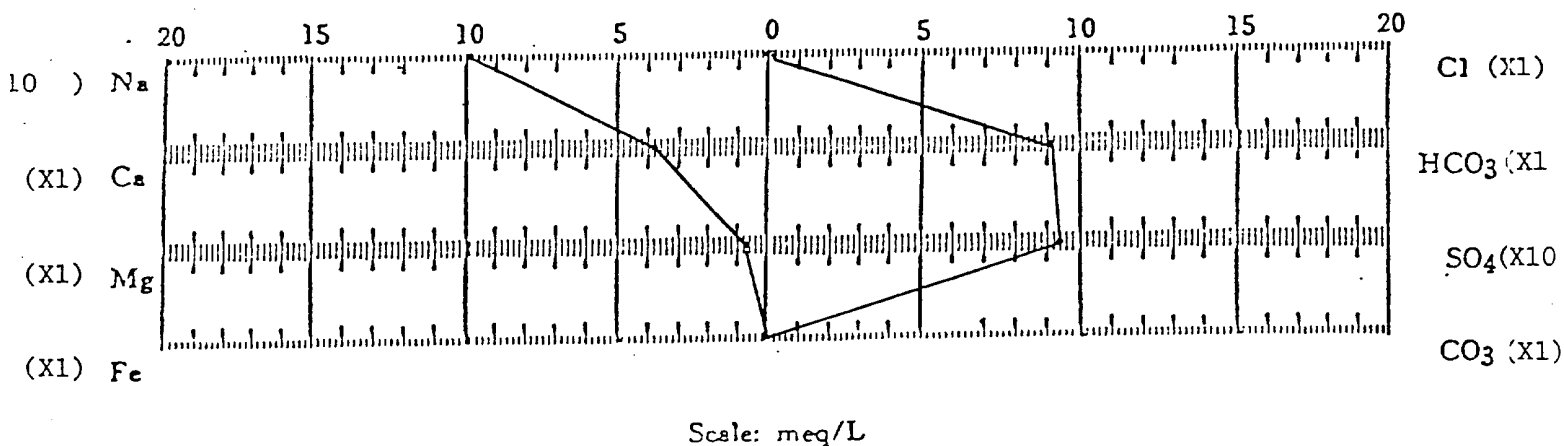
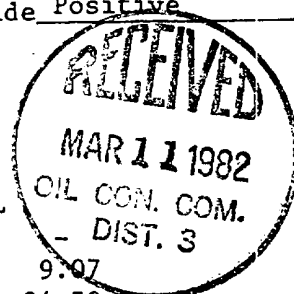
File W82065

Company Dome Petroleum Corp. Well Name Santa Fe Leggs No. 1 Sample No. #1  
Formation Entrada SS(Water) Depth \_\_\_\_\_ Sampled From \_\_\_\_\_  
Location \_\_\_\_\_ Field Santa Fe Leggs County \_\_\_\_\_ State New Mexico  
Date Sampled 01/27/82 Date Analyzed 02/26/82 Analyst J. F. Ashby

Total Dissolved Solids 7469 mg/L (calculated) Specific Gravity 1.005 @ 77 °F  
Resistivity 0.794 ohm-meters @ 77 °F (measured) Hydrogen Sulfide Positive  
pH 8.0 @ 77 °F

Constituents	mg/L	meq/L
Sodium (calc.)	2270	98.74
Calcium	76.0	3.79
Magnesium	8.8	0.72
Iron	0.06	0.00
Potassium	11.0	0.28

Constituents	mg/L	meq/L
Chloride	<0.1	
Bicarbonate	553.0	9.07
Sulfate	4550	94.79
Carbonate	<0.1	-
Hydroxide	<0.1	-



OIL CONSERVATION DIVISION

Form C-117 A  
Revised 2-1-82

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

TANK CLEANING, SEDIMENT OIL REMOVAL, TRANSPORTATION  
OF MISCELLANEOUS HYDROCARBONS AND DISPOSAL PERMIT

PERMIT NUMBER 3-283

DOMESTIC PETROLEUM CORP.  
(Operator or Owner)

3000 SOUTHWEST RIVER RD. - FARMINGTON  
(Address)

SANTA FE LEGGS #1  
(Lease Name if Sediment Oil)

0° 11' 21" 100'  
(Location - UL Sec. Twp. Rge.)

OPERATION TO BE PERFORMED:

☐ Tank Cleaning ☒ Sediment Oil Removal ☐ Transportation of Miscellaneous Hydrocarbons

Operator or Owner Representative authorizing work M.D. Hollenhorst

Date Work to be Performed 8/16/83

TANK CLEANING DATA

Tank Number \_\_\_\_\_ Volume \_\_\_\_\_

Tank Type \_\_\_\_\_ Volume Below Load Line \_\_\_\_\_

SEDIMENT OIL OR MISCELLANEOUS HYDROCARBON DATA

Sediment Oil From: ☒ Pit ☐ Cellar ☐ Other\*

Miscellaneous Oil

Tank Bottoms From: ☐ Pipeline Station ☐ Crude Terminal ☐ Refinery ☐ Other\*

Catchings From: ☐ Gasoline Plant ☐ Gathering Lines ☐ Salt Water Disposal System  
☐ Other\*

Pipeline Break Oil or Spill ☐

\*Other (Explain) \_\_\_\_\_

VOLUME AND DESTINATION

Estimated Volume 3 Bbls. Field test volume of good oil \_\_\_\_\_ Bbls.  
[Not required prior to Division approval.]

Destination (Name and Location of treating plant or other facility) \_\_\_\_\_

DESTRUCTION OF SEDIMENT OIL

Destruction by: ☒ Burning ☐ Pit Disposal ☐ Use on Roads or Firewalls ☐ Other  
(Explain) IT IS PROPOSED TO BURN THE OIL ACCUMULATED IN PIT

Location of Destruction WELL PIT

Justification of Destruction NON RECOVERABLE OIL

APPLICATION MAY BE MADE BY EITHER OF THE FOLLOWING:

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

Owner DOMESTIC PETROLEUM CORP. Transporter \_\_\_\_\_

By M.D. Hollenhorst By \_\_\_\_\_

Title AREA PRODUCTION SUPT. Title \_\_\_\_\_

Date 8/16/83 Date \_\_\_\_\_

NEW MEXICO OIL CONSERVATION COMMISSION

Approved By Jeff Edmister Title DEPUTY OIL & GAS INSPECTOR, DIST. #3 Date AUG 14 1983

A COPY OF THIS FORM MUST BE ON LOCATION DURING TANK CLEANING, REMOVAL OF SEDIMENT OIL OR MISCELLANEOUS HYDROCARBONS, AND MUST BE PRESENTED WITH TANK BOTTOMS, SEDIMENT OIL, MISCELLANEOUS HYDROCARBONS AT THE TREATING PLANT TO WHICH IT IS DELIVERED.



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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  
MAR 14 1984  
OIL CON. DIV.  
DIST. 3

Operator TEXACO Inc.,	
Address P. O. Box 2100, Denver, Colorado 80201	
Reason for filing (Check proper box)	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 ownership give name and address of previous owner Dome Petroleum Corp., 1625 Broadway, Denver, Colorado

I. DESCRIPTION OF WELL AND LEASE

Lease Name SANTA FE LEGGS	Well No. 1	Pool Name, Including Formation LEGGS-ENTRADA	Kind of Lease State, Federal or Fee FEE	Lease No.
Location				
Unit Letter <u>0</u> : <u>990</u> Feet From The <u>SOUTH</u> Line and <u>2310</u> Feet From The <u>EAST</u>				
Line of Section <u>11</u> Township <u>21N</u> Range <u>10W</u> , NMPM, <u>SAN JUAN</u> County				

I. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> PERMIAN CORP.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1183, HOUSTON, TX 77001
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When
	0 11 21N 10W NO

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

V. 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, RAB, 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

VI. 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/C	Length of Test	Bois. Condensate-MCF	Gravity of Condensate
Testing Method (pilot, back prod.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

I. 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.  
TEXACO Inc. as Operator for Texaco Oils

Albert R. Mandy  
(Signature)  
Field Supt.

(Title)

3-9-84

(Date)

OIL CONSERVATION COMMISSION

APPROVED MAY 07 1984, 19\_\_\_\_  
BY Frank J. Quigley  
Inc. SUPERVISOR DISTRICT 3  
TITLE \_\_\_\_\_

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 multiple

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	GAS
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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

Operator TEXACO INC.	
Address P.O. Box EE, Cortez, CO. 81321	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input type="checkbox"/>	Previous transporter was Permian, now it is Gary Energy Corp.
Recompletion <input type="checkbox"/>	
Change in Ownership <input type="checkbox"/>	
Change in Transporter of: Oil <input checked="" type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	

Change of ownership give name and address of previous owner \_\_\_\_\_

DESCRIPTION OF WELL AND LEASE

Lease Name Santa Fe Leggs	Well No. 1	Pool Name, including Formation Leggs - Entrada	Kind of Lease State, Federal or Fee Fee	Lease No.
Location Unit Letter 0 ; 990' Feet From The South Line and 2310' Feet From The East Line of Section 11 Township 21N Range 10W , NMPM, San Juan County				

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Gary Energy Corp.	Address (Give address to which approved copy of this form is to be sent) 115 Inverness Dr., Englewood, CO. 80112
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. 0 11 21N 10W
Is gas actually connected?	When No

If this 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'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

TEST DATA AND REQUEST FOR ALLOWABLE  
ON 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

AS 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

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.

SIGNED A. R. MARX

AREA SUPERINTENDENT

10/10/86

OIL CONSERVATION COMMISSION

APPROVED \_\_\_\_\_, 1986  
BY \_\_\_\_\_  
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.

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

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

I. Operator  
TEXACO INC.  
Address  
P. O. Box EE, Cortez, CO. 81321  
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)  
Previous transporter was Gary Energy Corp., now it is Giant Industries Inc.

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Santa Fe Leggs	Well No. 1	Pool Name, including Formation Leggs-Entrada	Kind of Lease State, Federal or Fee Fee	Lease No.
Location Unit Letter O : 990' Feet From The South Line and 2310' Feet From The East Line of Section 11 Township 21N Range 10W, N.M.P.M. San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Giant Industries Inc.	Address (Give address to which approved copy of this form is to be sent) P. O. Box 9156, Phoenix, AZ. 85068					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
If well produces oil or liquids, give location of tanks.	Unit O	Sec. 11	Twp. 21N	Rge. 10W	Is gas actually connected? No	When

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

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
Elevations (DF, RKB, RT, CR, 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 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. 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.

SCOTT A. KLEIN

(Signature)

AREA SUPERINTENDENT

(Title)

APR 29 1987

(Date)

OIL CONSERVATION COMMISSION

APPROVED

BY

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 completed wells.

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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  
TEXACO INC.

Address  
P. O. Box 2100, Denver, CO. 80201

Reason(s) for filing (Check proper box)

New Well ☐ Change in Transporter of: Oil ☐ Dry Gas ☐  
Recompletion ☐ Casinghead Gas ☐ Condensate ☐  
Change in Ownership ☒

Other (Please explain)  
This reports change of ownership from Texaco Oils Inc. to Texaco Producing Inc.

If change of ownership give name and address of previous owner  
Texaco Oils Inc., P. O. Box 2100, Denver, CO. 80201

II. DESCRIPTION OF WELL AND LEASE

Lease Name Santa Fe Leggs	Well No. 1	Pool Name, including Formation Leggs-Entrada	Kind of Lease State, Federal or Fee Fee	Lease No.
Location Unit Letter <u>CM</u> ; 990 Feet From The <u>South</u> Line and <u>2310</u> Feet From The <u>East</u> Line of Section <u>11</u> Township <u>21N</u> Range <u>10W</u> , NMPM, <u>San Juan</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Giant Refinery	Address (Give address to which approved copy of this form is to be sent) P.O. Box 9156, Phoenix, AZ 85068	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
If well produces oil or liquids, give location of tanks.	Unit <u>M</u>	Sec. <u>11</u>
	Twp. <u>21N</u>	Pge. <u>10W</u>
Is gas actually connected?		When

If this production is commingling 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 (pilot, 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.

TEXACO INC. As Operator for  
TEXACO PRODUCING INC.

SIGNED: A. A. KLEINER

(Signature)

AREA SUPERINTENDENT

(Title)

6/19/87

(Date)

OIL CONSERVATION COMMISSION

APPROVED JUN 26 1987, 19

BY: [Signature]

TITLE: SUPERVISION 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

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 <b>TEXACO INC.</b>	Well API No.
Address <b>3300 N. Butler, Farmington, NM 87401</b>	
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain) Previous transporter was New Well <input type="checkbox"/> Change in Transporter of: Giant Industries Inc., now it is Recompletion <input type="checkbox"/> Oil <input checked="" type="checkbox"/> Dry Gas <input type="checkbox"/> Meridian Oil Company effective 10/01/89. Change in Operator <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	
If change of operator give name and address of previous operator	

II. DESCRIPTION OF WELL AND LEASE

Lease Name <b>Santa Fe Leggs</b>	Well No. <b>1</b>	Pool Name, Including Formation <b>Leggs-Entrada</b>	Kind of Lease Fee State, Federal or Fee	Lease No.
Location Unit Letter <b>0</b> : <b>990</b> Feet From The <b>S</b> Line and <b>2310</b> Feet From The <b>E</b> Line Section <b>11</b> Township <b>21N</b> Range <b>10W</b> , NMPM, San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> <b>Meridian Oil Company</b>	Address (Give address to which approved copy of this form is to be sent) <b>P. O. Box 4289, Farmington, NM 87499</b>					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
If well produces oil or liquids, give location of tanks.	Unit <b>0</b>	Sec. <b>11</b>	Twp. <b>21N</b>	Rge. <b>10W</b>	Is gas actually connected? <b>NO</b>	When ?

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

IV. COMPLETION DATA

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

V. TEST DATA AND REQUEST FOR ALLOWABLE

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

Date First New Oil Run To Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	<b>D</b> <b>SEP 28 1989</b> <b>OIL CON. DIV.</b> <b>DIST. 3</b>
Length of Test	Tubing Pressure	Casing Pressure	
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	

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.

SIGNED: **A. A. KLEIER**

Signature

Area Manager

Printed Name

**SEP 28 1989**

Title

Date

Telephone No.

OIL CONSERVATION DIVISION

Date Approved **SEP 28 1989**

By

**SUPERVISION DISTRICT # 3**

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.

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 1-1-65

RECEIVED  
JAN 3 1990

OIL CON. DIV.  
DIST. 3

Operator A.P.A. Development Inc.,	
Address P.O. Box 215, Cortez, CO 81321	
Reason(s) for filing (Check proper box)	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 Ownership <input checked="" type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of ownership give name and address of previous owner Texaco Inc., P.O. Box 2100, Denver, CO 80201

I. DESCRIPTION OF WELL AND LEASE

Lease Name Santa Fe Leggs	Well No. 1	Pool Name, Including Formation Leggs-Entrada	Kind of Lease State, Federal or Fee Fee	Lease No.
Location Unit Letter <u>0</u> ; <u>990</u> Feet From The <u>South</u> Line and <u>2310</u> Feet From The <u>East</u> Line of Section <u>11</u> Township <u>21N</u> Range <u>10W</u> , NMPM, <u>San Juan</u> County				

I. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Giant Refinery	Address (Give address to which approved copy of this form is to be sent) P.O. Box 9156, Phoenix, AZ 85068					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
If well produces oil or liquids, give location of tanks.	Unit 0	Sec. 11	Twp. 21N	Rge. 10W	Is gas actually connected?	When

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

I. 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								
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		BACKS CEMENT			
JAN 27 1990 OIL CON. DIV. DIST. 3								

I. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

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

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

GAS WELL

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

I. 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.

Patsy S B Woolley  
(Signature)  
Pres. APA  
(Title)  
1/2/90  
(Date)

OIL CONSERVATION COMMISSION

APPROVED JAN 27 1993, 19\_\_\_\_  
Original Signed by CHARLES GIBLSON  
BY \_\_\_\_\_  
TITLE DEPUTY OIL & GAS INSPECTOR, DIST. #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 completed wells.



STATE OF NEW MEXICO  
ENERGY, MINERALS and NATURAL RESOURCES DEPARTMENT  
OIL CONSERVATION DIVISION  
AZTEC DISTRICT OFFICE

1000 RIO BRAZOS ROAD  
AZTEC, NEW MEXICO 87410  
(505) 334-6178

April 22, 1992

Mr. Patrick Woosley  
APA Development Inc.  
P.O. Box 215  
Cortez, CO 82321

*Santa Fe Leggs #1  
0-11-21-10*

RE: Santa Fe Leggs Lease

Dear Mr. Woosley:

A field inspection conducted by personnel from this office on 4-20-92 revealed that the referenced lease is in a deplorable condition. Specifically the central tank battery has run over, the fire wall is half full of oil and sludge and the tanks are covered with oil. The #1 well has a 20'x 30' unfenced pit which is full of oil and produced water, there is no well sign and the entire location is oil stained and junky. The #2 well has puddles of oil and junk on location.

You are in violation of the following rules and regulations. Rule 116 unreported oil spill at tank battery. Rule 310-B - No sign on tank battery. Rule 103 - No well sign on well #1. Migratory bird order R-8952 all pits are to be netted in accordance with the order.

You are hereby directed to immediately file a spill report and initiate clean up activity. We will reinspect the lease within the next 2 weeks. If progress has not been made toward cleanup, I will recommend that the lease be shut in until cleanup is completed.

Yours truly,

Charles Gholson  
Deputy Oil & Gas Inspector

CG/dj

xc: Bob Stoval  
Operator File



*Entrada*

STATE OF NEW MEXICO  
ENERGY, MINERALS AND NATURAL RESOURCES DEPARTMENT  
OIL CONSERVATION DIVISION

*Santa Fe logs #1*

GARREY CARRUTHERS  
GOVERNOR

September 21, 1990

POST OFFICE BOX 2088  
STATE LAND OFFICE BUILDING  
SANTA FE, NEW MEXICO 87504  
(505) 827-5800

A.P.A. Development Inc.  
P. O. Box 215  
Cortez, Co. 81321

Attention: Patrick B. Woosley

Re: \$7,500 One-Well Plugging Bond  
A.P.A. Development, Inc., Operator  
2310' FWL and 990' FSL of Sec. 11,  
T-21-N, R-10-W, San Juan County  
Bond No. OCD-246

Dear Mr. Woosley:

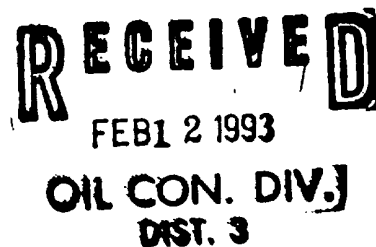
The Oil Conservation Division hereby approves the above-captioned one-well plugging bond effective this date.

Sincerely,

*William J. Lemay*  
WILLIAM J. LEMAY,  
Director

dr/

cc: Oil Conservation Division  
Aztec, New Mexico







**NEW MEXICO ENERGY, MINERALS  
& NATURAL RESOURCES DEPARTMENT**

OIL CONSERVATION DIVISION  
AZTEC DISTRICT OFFICE  
AZTEC NM 87410  
(505) 334-6170 FAX: (505) 334-6170  
<http://www.nm.gov/ocd/District/NM3district.htm>

**GARY E. JOHNSON**  
GOVERNOR

**Jennifer A. Salisbury**  
CABINET SECRETARY

November 24, 1997

Rand Carroll  
EMNRD General Counsel  
2040 S Pacheco  
Santa Fe NM 87505

RE: APA Development Corp  
Santa Fe Leggs #1, O-11-21N-10W, 30-045-22633  
Santa Fe Leggs #2, N-11-21N-10W, 30-045-23027

Dear Rand:

I have enclosed a copy of the inactive well letter dated June 5, 1997, requiring the operator to submit a plan to bring the wells into compliance within 30 days. To this date, I have received no plans for these wells nor have my phone calls been returned. Please docket a case for hearing to show cause why the referenced well should not be plugged and abandoned according to a Division-approved plugging program using the OCD 246 plugging bond (\$7500 per well).

Sincerely,

Johnny Robinson  
Deputy O&G Inspector

JR/sh

enc.

cc: Well files

TA file

APA Dev Corp  
PO Box 215  
Cortez CO 81321



**NEW MEXICO ENERGY, MINERALS  
& NATURAL RESOURCES DEPARTMENT**

OIL CONSERVATION DIVISION  
AZTEC DISTRICT OFFICE  
1000 RIO BRAZOS ROAD  
AZTEC, NEW MEXICO 87410  
(808) 334-6170 Fax (808) 334-6170

**GARY E. JOHNSON**  
GOVERNOR

**JENNIFER A. SALISBURY**  
CABINET SECRETARY

June 5, 1997

APA Development Corp  
PO Box 215  
Cortez CO 81321

RE: Inactive Wells

To Whom It May Concern:

Our records indicate that the wells on the attached list are inactive and not in compliance with Rule #201.B.

Please submit plans to bring these wells into compliance within 30 days. Review Rules #202 and #203 for the necessary filing requirements to plug and abandon or temporarily abandon these wells.

Contact this office if you have any questions.

Sincerely,

Johnny Robinson  
Deputy O&G Inspector

JR/sh

attachment

XC: TA File JDR File Well Files

**APA DEVELOPMENT CORP**

<b><u>API#</u></b>	<b><u>PROPERTY NAME</u></b>	<b><u>NUMBER</u></b>	<b><u>LOCATION</u></b>
30-045-22633	Santa Fe Leggs	1	O-11-21N-10W
30-045-23027	Santa Fe Leggs	2	N-11-21N-10W