

CONFIDENTIAL

UNITED STATES SUBMIT
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN ~~DUPLICATE~~•

(See other instructions on reverse side)

FORM APPROVED
OMB NO. 1004-0137
Expires: February 28, 1995

5. LEASE DESIGNATION AND SERIAL NO.

NIM 03010

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

Jr. UNIT AGREEMENT NAME

18. FARM OR LEASE NAME, WELL NO.

Blue Mesa #1

9. API WELL NO.

30-039 --25339

10 FIELD AND POOL, OR WILDCAT

Wildcat Pictured Cliffs

14. SEC. T., R., M., OR BLOCK AND SURVEY
OR AREA

Sec. 11, T24N, R7W

12. COUNTY OR
PARISH

13. STATE

Rio Arriba

NM

Form 3160-4
(July 1992)

UNITED STATES

DEPARTMENT OF THE INTERIOR

BUREAU OF LAND MANAGEMENT

20-0001

FORM APPROVED
OMB NO. 1004-0137
Expires: February 28, 1995

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RECEIVED
BLM

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL:

OIL WELL ☐

GAS WELL ☒

DRY ☐

Other ☐

1b. TYPE OF COMPLETION:

NEW WELL ☒

WORK OVER ☐

DEEP-EN ☐

PLUG BACK ☐

DIFF. RESVR. ☐

Other ☐

2. NAME OF OPERATOR

Robert L. Bayless

3. ADDRESS AND TELEPHONE NO.

P.O. Box 168 Farmington, NM 87499

505-326-2659

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

At surface

2100' FSL & 490' FEL

At top prod. Interval reported below

At total depth

Same

14. PERMIT NO.

DATE ISSUED

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

Sec. 11, T24N, R7W

12. COUNTY OR PARISH

Rio Arriba

13. STATE

NM

15. DATE SPUDDED

11/26/93

16. DATE T.D. REACHED

11/29/93

17. DATE COMPL. (Ready to prod.)

1/4/94

18. ELEVATIONS (DF, RKB, RT, CR, ETC.)*

6903'

19. ELEV. CASINGHEAD

20. TOTAL DEPTH, MD & TVD

2600 ft.

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

2565 ft.

22. IF MULTIPLE COMPL., HOW MANY*

23. INTERVALS DRILLED BY

ROTARY TOOLS

X

CABLE TOOLS

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

2416-2436' Pictured Cliffs

25. WAS DIRECTIONAL SURVEY MADE

NO

26. TYPE ELECTRIC AND OTHER LOGS RUN

Gamma Ray/Neutron

27. WAS WELL CORED

NO

28. CASING RECORD (Report all strings set in well)

CASING SIZE/GRADE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	TOP OF CEMENT, CEMENTING RECORD	AMOUNT PULLED
7"	23#/ft.	140 ft. 135	12 1/4"	59' ft. (50 sx) Class B w/2% CaCl	29.5' ft. (25 sx)
4 1/2"	10.5#/ft.	2562 ft.	6 1/4" 235	Class B neat, 313.5 ft. (150 sx)	Class B w/2%
			423 8	Thriftylite, 78.6 ft. (60 sx) 50-2% gel, 10% salt.	50-50 Pozmix

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)

30. TUBING RECORD

SIZE	DEPTH SET (MD)	PACKER SET (MD)
2 3/8"	2423 ft.	

31. PERFORATION RECORD (Interval, size & number)

2416-2436 ft.
40 holes
2 JSPF
.34" diameter

ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
2416-2436	59,075 gal. of 70 quality foam with 83,000 lbs. of 20/40 sand.

33.* PRODUCTION

DATE FIRST PRODUCTION	PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)	WELL STATUS (Producing or shut-in)

DATE OF TEST

1/14/94

HOURS TESTED

3 hours

CHOKE SIZE

3/4"

PROD'N. FOR TEST PERIOD

OIL—BBL.

-0-

GAS—MCF.

485.25

WATER—BBL.

-0-

GAS-OIL RATIO

LOW. TUBING PRESS.

235

CASING PRESSURE

430

CALCULATED 24-HOUR RATE

OIL—BBL.

-0-

GAS—MCF.

3882

WATER—BBL.

-0-

OIL GRAVITY-API (CORR.)

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

vented

5. LIST OF ATTACHMENTS

6. I hereby certify that the foregoing and attached information is complete and correct as determined from

FARMINGTON DISTRICT OFFICE

SIGNED

[Signature]

TITLE

Engineer

BY

Smm

DATE

1/17/94

TEST WITNESSED BY

Harvey Rader

JAN 19 1994

FILED FOR RECORD

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

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

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37. SUMMARY OF POROUS ZONES: (Show all important zones of porosity and contents thereof; cored intervals; and all drill-stem, tests, including depth interval tested, cushion used, time tool open, flowing and shut-in pressures, and recoveries):

38.

GEOLOGIC MARKERS

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	TOP	
					MEAS. DEPTH	TRUE VERT. DEPTH
Ojo Alamo	est. - 1775	1925	Sandstone, water	Ojo Alamo	est. - 1775	Same
Kirtland	est. - 1925	2122	Shale and sandstone	Kirtland	est. - 1925	"
Fruitland	2122	2415	Shale, siltstone, sandstone, coal, natural gas, water	Fruitland	2122	"
Pictured Cliffs	2415	TD	Sandstone, natural gas	Pictured Cliffs	2415	"

OIL CONSERVATION DIVISION

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

CONFIDENTIAL

I.

Operator Robert L. Bayless	Well API No. 30-039-25339
Address P.O. Box 168 Farmington, NM 87499	
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)	
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 Operator <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of operator give name
and address of previous operator

RECEIVED
JAN 4 1994

OIL CON. DIV.
DIST. 3

II. DESCRIPTION OF WELL AND LEASE

Lease Name Blue Mesa 13249	Well No. 1	Pool Name, Including Formation Wildcat Pictured Cliffs 71439	Kind of Lease State, Federal or Fee	Lease No. NM03010
Location Unit Letter I : 2100 Feet From The South Line and 490 Feet From The East Line Section 11 Township 24N Range 7W, NMPM, Rio Arriba County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/> Water 2806439	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"/> Robert L. Bayless 2806438	Address (Give address to which approved copy of this form is to be sent) P.O. Box 168 Farmington, NM 87499					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	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
		X	X					
Date Spudded 11/26/93	Date Compl. Ready to Prod. 1/4/94		Total Depth 2600 ft.			P.B.T.D. 2565 ft.		
Elevations (DF, RKB, RT, GR, etc.) 6903'	Name of Producing Formation Pictured Cliffs		Top Oil/Gas Pay 2416'			Tubing Depth 2423'		
Perforations 2416-2436'						Depth Casing Shoe 2562'		

TUBING, CASING AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12 1/4"	7"	140 ft. 135	59 ft. (50 sx) Class B w/2% CaCl, 29.5' f
6 1/4"	4 1/2"	2562 ft.	(25 sx) Class B neat, 313.5' f (150 sx)
			Class B w/2% Thriftylite, 78.6 ft (60sx)
			50-50 Pozmix 2% gel, 10% salt.

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 6200 3882	Length of Test 3	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (puot, back pr.)	Tubing Pressure (Shut-in) 235	Casing Pressure (Shut-in) 430	Choke Size 3/4"

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
Price M. Bayless
Engineer
Printed Name
1/13/94
Date
505-326-2659
Telephone No.

OIL CONSERVATION DIVISION

Date Approved 1-27-94 JAN 27 1994

By [Signature]

Title SUPERVISOR DISTRICT # 3

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 test 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.

Section I must be filed for each pool in multiply completed wells.

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SECRET

3

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

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

DISTRICT III
1000 Rio Brazos Rd, Aztec, NM 87410

State of New Mexico
Energy, Minerals and Natural Resources Department

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

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

CONFIDENTIAL

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

Operator Robert L. Bayless		Well API No. 30-039-25339
Address P.O. Box 168 Farmington, NM 87499		
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)		
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 Operator <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	
If change of operator give name and address of previous operator		

*Implicate -
this was sent
w/ Test data*

II. DESCRIPTION OF WELL AND LEASE

Lease Name Blue Mesa	Well No. 1	Pool Name, Including Formation Wildcat Pictured Cliffs	State, Federal or Private
Location Unit Letter <u>I</u> : <u>2100</u> Feet From The <u>South</u> Line and <u>490</u> Feet From The <u>East</u> Line Section <u>11</u> Township <u>24N</u> Range <u>7W</u> , <u>NMPM</u> , <u>Rio Arriba</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 type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
Robert L. Bayless	P.O. Box 168 Farmington, NM 87499	
If well produces oil or liquids, give location of tanks.	Unit	Sec.
	Twp.	Rge.
		Is gas actually connected? <u>NO</u>
		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
		<u>X</u>	<u>X</u>					
Date Spudded 11/26/93	Date Compl. Ready to Prod. 1/4/94		Total Depth 2600 ft.		P.B.T.D. 2565 ft.			
Elevations (DF, RKB, RT, GR, etc.) 6903'	Name of Producing Formation Pictured Cliffs		Top Oil/Gas Pay 2416'		Tubing Depth 2423'			
Perforations 2416-2436'					Depth Casing Shoe 2562'			

TUBING, CASING AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
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			Class B w/2% Thriftylite, 78.6 ³ ft (60sx)
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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
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.

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JAN 8 1994
OIL CON. DIV
DIST. 3

GAS WELL

Actual Prod. Test - MCF/D 6700 AOF	Length of Test 3 hours	Bbls. Condensate/MMCF - 0 -	Gravity of Condensate N/A
Testing Method (prior, back pr.) Orifice test	Tubing Pressure (Shut-in) 607 psig.	Casing Pressure (Shut-in) 630 psig.	Choke Size 3/4"

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.

Price M. Bayless
Signature
Price M. Bayless
Engineer
Printed Name
1/17/94
Date
505-326-2659
Telephone No.

OIL CONSERVATION DIVISION

Date Approved _____

By _____

Title _____

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