

District I
1625 N. French Dr., Hobbs, NM 88240
Phone: (575) 393-6161 Fax: (575) 393-0720
District II
811 S. First St., Artesia, NM 88210
Phone: (575) 748-1283 Fax: (575) 748-9720
District III
1000 Rio Brazos Road, Aztec, NM 87410
Phone: (505) 334-6178 Fax: (505) 334-6170
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505
Phone: (505) 476-3460 Fax: (505) 476-3462

State of New Mexico
Energy, Minerals & Natural Resources Department
OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

Form C-102
Revised August 1, 2011
Submit one copy to appropriate
District Office

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

¹ API Number 30-015-20971	² Pool Code 74160	³ Pool Name Carlsbad; Wolfcamp East (Gas)
⁴ Property Code 18292	⁵ Property Name SAIK	⁶ Well Number #001
⁷ OGRID No. 372991	⁸ Operator Name American Energy Resources LLC	⁹ Elevation 3122' GR

¹⁰ Surface Location

UL or lot no. B	Section 17	Township 22S	Range 27E	Lot Idn	Feet from the 990	North/South line N	Feet from the 1980	East/West line E	County EDDY
--------------------	---------------	-----------------	--------------	---------	----------------------	-----------------------	-----------------------	---------------------	----------------

¹¹ Bottom Hole Location If Different From Surface

UL or lot no. B	Section 17	Township 22S	Range 27E	Lot Idn	Feet from the 990	North/South line N	Feet from the 1980	East/West line E	County EDDY
--------------------	---------------	-----------------	--------------	---------	----------------------	-----------------------	-----------------------	---------------------	----------------

¹² Dedicated Acres 320	¹³ Joint or Infill	¹⁴ Consolidation Code	¹⁵ Order No.
--------------------------------------	-------------------------------	----------------------------------	-------------------------

No allowable will be assigned to this completion until all interests have been consolidated or a non-standard unit has been approved by the division.

	<p>¹⁷ OPERATOR CERTIFICATION I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief, and that this organization either owns a working interest or unleased mineral interest in the land including the proposed bottom hole location or has a right to drill this well at this location pursuant to a contract with an owner of such a mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling order heretofore entered with the division.</p> <p>Signature: _____ Date: _____ Jonathan Samaniego Printed Name E-mail Address: _____</p>
	<p>¹⁸ SURVEYOR CERTIFICATION I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief.</p> <p>Date of Survey: _____ Signature and Seal of Professional Surveyor: _____ Certificate Number: _____</p>

Well: Saik No. 1

Location: 990' FNL & 1980' FEL

Sec 17, T22S, R27E

Spud: 12/7/73

Completed: 7/1/74

Well History Attached

Elev: 3135' KB

Zero: 13' AGL

CH: 0' AGL

TOC Surface

1100 psi

17½" hole to 365 ft

13¾", 48 ppf, H-40, set @ 358 ft

Cmtd w/380 sx CI C + 2% CaCl₂

TOC 1100 ft

Delaware Sd 1830 ft

2½" tubing
Wt, Gr & Conn Unkown

Bone Springs 5225 ft

12¼" hole to 5360 ft

9½", 36 & 40 ppf, J-55 set @ 5360 ft

Lead – 850 sx Lite cmt + 3lbs/sk Gilsonite
+ ¼ lb/sk Flocele

Tail - 300 sx CI C neat

TOC 1100 ft by temp survey

TOC 7300 ft

Wolfcamp 8630 ft

Baker Model D @ 9090'
EOT ≈ 9111'

Lower Wolfcamp (WC C/Canyon) 9410 ft

Lower Wolfcamp Perfs:

3/96 2 SPF 9667'-9713' 932 total perfs

4/96 4 SPF 90° 9434'-9444' & 9667'-9713'

Strawn Perfs:

Initial Compl: 2 SPF 10,308'-10,326' 12 total perfs

2 SPF 10,141'-10,162' 16 total perfs

11/78 Sqzd 10,308'-10,326'

Perf 2 SPF 10,116'-10,443' 18 total perfs

F Nipple w/1.87" plug on
1 ft 2½" cutoff above &
6 ft 2½" pup below

7" CIBP @ 10,100'

w/35' cmt

Strawn 10,114 ft

7" CIBP @ 10,375'

w/35' cmt

TOL 10,382 ft

Atoka 10,430 ft

Morrow Perfs:

Initial Compl: 2 SPF 11,112'-11,611' 26 total perfs

11/78 Perf 11,031'-11,607' (no. of perfs unknown)

4½" CIBP @ 11,000'

w/35' cmt

Morrow 10,874 ft

Barnett 11,618 ft

PBTD 11,665

TD 11,690 ft

8¾" hole to 10,500 ft

1 jt (32.21') 7", 29 ppf, N-80 LT&C

173 jts (5495.55') 7", 23 ppf, N-80 LT&C

73 jts (2633.85') 7", 26 ppf, N-80 LT&C

71 jts (2332.07') 7", 29 ppf, N-80 LT&C

318 jts 10,493.68'

"Tight spot @ 10,170 ft" – not sure if inside casing
or in holeCmtd w/575 sx CI H + ¾% CFR-2 + 7.5 lbs/sk salt
- ¼ lb/sk Flocele in first 300 sx

No returns during cmtg.

Temp survey – cmt top @ 7300'

P test csg to 2500 psi – good

"Shoe did not hold 2000 psi, would hold 1000 psi"

– not sure PIT or csg test

6" hole to 11,690 ft

4½", 13.5 ppf N-80 liner Shoe @ 11,685 ft

TOL @ 10,382 ft

"Burns Seal-type" lnr hgr

Cmtd w/180 sx CI H + 1¼% CFR-2 + 5 lbs/sk KCl.

Circ'd out 5 bbls cmt

Drl out & test lnr top to 2700 psi - good

SAIK # 1

API-30-015-20971

B-17-22S-27E 990 FNL 1980 FEL

LAT/LONG- 32.3971138,-104.2098923 NAD83

ELEV-3122

1. Move in and rig up well test equipment.
2. Rig up valve greasing unit.
3. Grease valves and perform function test on valves. If ok go to step 4.
4. Check/record tubing annulus pressure.
5. Test casing annulus to 500 psi for 30 minutes. Record same on chart.
6. Move in and rig up wireline unit.
7. Run TDT log to evaluate recompletion in Bone Spring/ Upper Wolfcamp.
8. Shut well in. Evaluate log.
9. Recompletion sundry to follow after log evaluation.

Santa Fe Main Office
Phone: (505) 476-3441 Fax: (55) 476-3462
General Information
Phone: (505) 629-6116

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
Revised July 18, 2013

Online Phone Directory Visit:
<https://www.emnrd.nm.gov/ocd/contact-us/>

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

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. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other		WELL API NO. 30-015-20971 5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/> 6. State Oil & Gas Lease No.
2. Name of Operator AMERICAN ENERGY RESOURCES LLC		7. Lease Name or Unit Agreement Name SAIK
3. Address of Operator P.O.Box 114 Hagerman, NM 88232		8. Well Number #001
4. Well Location Unit Letter <u>B</u> : <u>990</u> feet from the <u>N</u> line and <u>1980</u> feet from the <u>E</u> line Section <u>17</u> Township <u>22S</u> Range <u>27E</u> NMPM County <u>EDDY</u>		9. OGRID Number 372991
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3122 GR		10. Pool name or Wildcat CARLSBAD WOLFCAMP, EAST

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input checked="" type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: <input type="checkbox"/>	

13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

See attached work program and wellbore diagram.

Spud Date:

Rig Release Date:

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

SIGNATURE  TITLE Representative DATE 1/13/2025

Type or print name Jonathan Samaniego E-mail address: energy.jrs@gmail.com PHONE: (575)499-7330

APPROVED BY: _____ TITLE _____ DATE _____

Conditions of Approval (if any):

Sante Fe Main Office
Phone: (505) 476-3441

General Information
Phone: (505) 629-6116

Online Phone Directory
<https://www.emnrd.nm.gov/oed/contact-us>

State of New Mexico
Energy, Minerals and Natural Resources
Oil Conservation Division
1220 S. St Francis Dr.
Santa Fe, NM 87505

CONDITIONS

Action 423058

CONDITIONS

Operator: American Energy Resources LLC P.O. BOX 114 Hagerman, NM 88232	OGRID: 372991
	Action Number: 423058
	Action Type: [C-103] NOI General Sundry (C-103X)

CONDITIONS

Created By	Condition	Condition Date
dmccclure	In the future, submit sundries like this one as a [C-103] NOI Workover (C-103G).	1/24/2025
dmccclure	All conducted logs shall be submitted to the Division as a [UF-WL] EP Well Log Submission (WellLog).	1/24/2025
dmccclure	Approval is granted to evaluate the well, but approval of this sundry does NOT grant approval to conduct recompletion or remedial actions.	1/24/2025