



STATE OF NEW MEXICO

ENERGY, MINERALS AND NATURAL RESOURCES DEPARTMENT

GARY JOHNSON
GOVERNOR

OIL CONSERVATION DIVISION
ARTESIA DISTRICT OFFICE

JENNIFER SALISBURY
CABINET SECRETARY

April 10, 1995

Rand Carroll
Oil Conservation Division
2040 South Pacheco St.
Santa Fe, NM 87505

Re: Well plugging H.W. Pace, Pat State #1 Ut P-30-10S-27E

Dear Rand,

We recommend the above captioned well be plugged to protect fresh waters of the state of New Mexico, the environment and correlative rights in the area.

Sincerely,

Ray Smith
Field Rep II

BEFORE EXAMINER STOGNER	
OIL CONSERVATION DIVISION	
<u>OC</u>	EXHIBIT NO. <u>1</u>
CASE NO.	<u>11500</u>

COMPANY H.W. Pace	PROPERTY NAME Pat State	WELL NO. 1
-----------------------------	-----------------------------------	----------------------

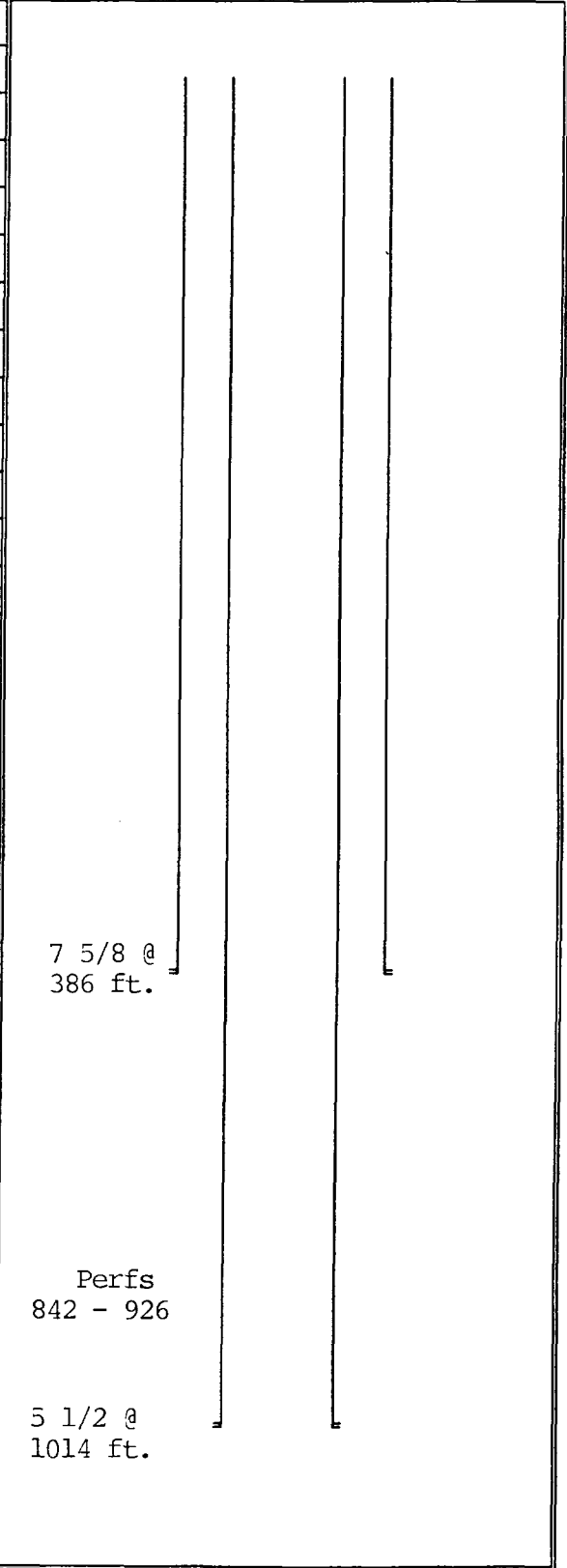
DATE 3/20/95	LOCATION (ULSTR) P-30-10S-27E	FOOTAGE 330 FSL & 660 FEEL
------------------------	---	--------------------------------------

API NO. 30-005-60590	POOL Rabbit Flats Queen
--------------------------------	-----------------------------------

Run in hole and set CIBP at 785' and cap with
 35' of cement. POOH to 435' and spot 25 Sx across
 casing shoe of 8 5/8. Spot 10 Sx surface plug.
 Mud between plugs.

CASING RECORD:

7 5/8" casing at 386' c
 5 1/2" casing @ 1014 c
 Perfs 842 - 926



H. W. Pace
P. O. Box 7435
Midland, TX 79703

\$5,000 One-Well Plugg-
ing BOND

American Manufacturer's
Mutual Ins.Co., Surety
BOND No. 9SE064857

Approved: Sept.13, 1979: 330/S 660/E Sec.30, T10S, R27E
Chaves Co., Depth: 5,000'

App.7-21-80 Bond No. OSE 067-173 1980/S 660/E 16-8-26
#OSE 067 173^{4950'} Cancellation Approved: April 29, 1982

WELL PLUGGING COMPANIES

LB Oilfield Services Inc.
P.O. Box 122
Midland, TX 79701
Ph: 915-520-4103

United Oil Services Inc.
2420 West I-20
Odessa, TX 79763
PH: 915-580-0244

Pride Petroleum Service
P.O. Box 909
Lovington, NM 88260
Ph: 505-396-2851

Baber-Gibson Well Services
P.O. Drawer 310
Hobbs, NM 88240

Royalty Well Service
P.O. Box 394
Grandfalls, TX 79742
Ph: 915-547-2926

Mayo Marrs Casing Pullers
P.O. Box 863
Kermit, TX 79745
Ph: 915-586-3076

D A & S Oilfield Services
P.O. Box 2545
Hobbs, NM 88240
Ph: 505-392-6591

Sierra Well Service Inc.
P.O. Box 10460
Midland, TX 79701
PH: 915-688-0160

Odessa, TX
PH: 915-530-0430
Mr. Tex Neatherlin

OIL CONSERVATION DIVISION

Drawer DD Artesia, NM

DISTRICT OFFICE #2

Sept. thru Dec., 1980

NO. 2216 X

SUPPLEMENT TO THE OIL PRORATION SCHEDULE

DATE Dec. 22, 1980

PURPOSE Allowable Cancellation

Effective December 1, 1980, the allowable to the H. W. Pace
Pat State #1-P-30-10-27 in the Rabbit Flats Queen Pool is
hereby cancelled for failure to file C-115 for the month of
October, 1980.

*has 1 BOPD
in current schedule*

OIL CONSERVATION DIVISION

WAG:ar

H W Pace

NCO

W. B. [Signature]
DISTRICT SUPERVISOR

OIL CONSERVATION DIVISION

Artesia, New Mexico

October 30, 1980

H. W. Pace
Post Office Box 7435
Midland, Texas 79703

Re: Wells Placed In Pools

Gentlemen:

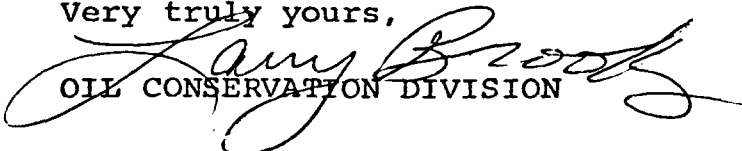
As the result of Division Order R-6499 the following described well (~~is~~) (~~has-been~~) been placed in the pool (~~is~~) shown below. This change in nomenclature has been made in our files. Please change your records to reflect the proper pool name. All subsequent reports must show this nomenclature until further notice.

RABBIT FLATS QUEEN

Pat State #1-P-30-10-27

Transporters are advised, by copy of this letter, to change their records to reflect the pool name as established by this order.

Very truly yours,


OIL CONSERVATION DIVISION

Distribution:

Original - Operator

XC: Santa Fe OCD

Each Transporter NCO

OIL CONSERVATION DIVISION

Drawer 00 Artesia, NM

DISTRICT OFFICE #2

Jan. thru April, 1980

NO. 2163 N

SUPPLEMENT TO THE OIL PRORATION SCHEDULE

DATE 4/18/80

PURPOSE ALLOWABLE ASSIGNMENT FOR A NEW WELL (N-S)

Effective 4/1/80, an allowable of 4 barrels of oil per day or a total of 120 barrels for the month is hereby assigned to the H. W. Pace, Pat State #1-P, 30-10-27, Undes. Queen Pool.

L - S

MP - P

WAG:jw

H. W. Pace

NCO

P--None

OIL CONSERVATION DIVISION



DISTRICT SUPERVISOR

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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

Operator H. W. Pace APR 15 1980

Address P. O. Box 7435 Midland, Texas 79703 O. C. D.
ARTESIA OFFICE

Reason(s) for filing (Check proper box) Other (Please explain)

New Well Change in Transporter of: Oil Dry Gas

Recompletion Oil Casinghead Gas Condensate

Change in Ownership Casinghead Gas

Change of ownership give name and address of previous owner _____

6-1-80
IS OBTAINED

DESCRIPTION OF WELL AND LEASE *R-6499 10-22-80*

Lease Name <u>Pat State</u>	Well No. <u>1</u>	Pool Name, Including Formation <u>-UND ON- Rabbit Flats Queen</u>	Kind of Lease State, Federal or Fee <u>State</u>	Lease No. <u>LG-0160</u>
--------------------------------	----------------------	--	--	-----------------------------

Location
Unit Letter P ; 330' Feet From The South Line and 660' Feet From The East

Line of Section 30 Township 10 Range 27 , NMPM, Chaves County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> <u>Navajo Crude Oil Purchasing Co.</u>	Address (Give address to which approved copy of this form is to be sent) <u>North Freeman Avenue Artesia, New Mex 88210</u>
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>P</u>	Sec. <u>30</u>	Twp. <u>10</u>	Rge. <u>27</u>	Is gas actually connected?	When
--	------------------	-------------------	-------------------	-------------------	----------------------------	------

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 <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
------------------------------------	--	----------	--	----------	--------	-----------	-------------	--------------

Date Spudded <u>9-10-79</u>	Date Compl. Ready to Prod. <u>12-20-79</u>	Total Depth <u>1016'</u>	P.B.T.D. <u>1012</u>
Elevations (DF, RKB, RT, GR, etc.) <u>GR 3726'</u>	Name of Producing Formation <u>Queens</u>	Top Oil/Gas Pay <u>842</u>	Tubing Depth
Perforations <u>842 - (2), 869(2), 881(2), 892(2), 895(2), 910(2), 916(2)</u>	Depth Casing Shoe <u>1016'</u>		

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
<u>10 3/4"</u>	<u>7 5/8" J-55 26#</u>	<u>386'</u>	<u>140 sx class C (cir)</u>
<u>7" 8 1/4"</u>	<u>5 1/2" J-55 17.5#</u>	<u>1014'</u>	<u>110 cu ft. poz mix (cir)</u>
	<u>2"</u>	<u>975'</u>	

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 <u>2-4-80</u>	Date of Test <u>2-13-80</u>	Producing Method (Flow, pump, gas lift, etc.) <u>pump</u>
Length of Test <u>24 hrs.</u>	Tubing Pressure <u>75#</u>	Casing Pressure <u>75#</u>
Actual Prod. During Test <u>5.80 bbls</u>	Oil-Bbls. <u>4 bbls</u>	Water-Bbls. <u>1.80</u>
		Gas-MCF <u>TSTM</u>

Post to Post Box 4-18-80

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

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.

H. W. Pace
(Signature)
Owner-Operator
April 10, 1980
(Date)

OIL CONSERVATION COMMISSION

APPROVED APR 18 1980, 19 _____

BY W. A. Gressett

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 production 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.

OIL CONSERVATION DIVISION

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

Form C-103
Revised 10-1-78

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DISTRIBUTION	
SANTA FE	1/1
FILE	1/1
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LAND OFFICE	
OPERATOR	1/1

3a. Indicate Type of Lease
State For

5. State Oil & Gas Lease No.
LG-0160

RECEIVED

SUNDRY NOTICES AND REPORTS ON WELLS

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

1. OIL WELL GAS WELL OTHER APR 15 1980

2. Name of Operator
H. W. Pace

3. Address of Operator
Box 7435 Midland, Texas 79703

4. Location of Well
UNIT LETTER P 330' FEET FROM THE South LINE AN' 660' FEET FROM
THE East LINE, SECTION 30 TOWNSHIP 10 RANGE 27 N.M.P.M.

7. Unit Agreement Name

8. Farm or Lease Name
Pat State

9. Well No.
1

10. Field and Pool, or Wildcat
Und. Queen

15. Elevation (Show whether DF, RT, GR, etc.)
G.L. 3726

12. County
Chaves

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

SUBSEQUENT REPORT OF:

REMEDIAL WORK

COMMENCE DRILLING OF/IS.

CASING TEST AND CEMENT JOB

OTHER

ALTERING CASING

PLUG AND ABANDONMENT

17. Describe the Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

Date spudd 9-10-79, surf. casg. set 10-10-79 @ 386', hole size 10 3/4", csg. 7 5/8" J-55 26#, cement w/140 sx Class C & 3 sx Cal Chl, circulated cement, WOC 18hrs.

10-23-79 Bail tested 860' 5 gal/hr.

11-03-79 Run Schlumberger logs DIL, SNP-GR-CFP

11-04-79 TD 1016', Set 5 1/2" J-55, 17.5# 8rd to depth 1014' in ~~8 1/4"~~ hole, cmt. w/110 cuft. Pozmix/cmt & 2% HOWCO Gel & 5#/sk Bulk salt, circulated to surf WOC 9 days

11-13-79 Perf interval 842'-926' 8 zones 2 sht/zone, 842, 869, 881, 892, 895, 910, 916

11-14-79 1500 gals, 15% acid & balls (16) non-emulsifying acid & 6 gals 14N, 2 1/2 gals CLA-STAL0, 1 1/2 gal. HAI-50, 1000 gals KCL wtr.

11-15-79 Swab back acid and load hole w/25 bbls. salt water

11-16-79 Run pump and rods

12-20-79 Install pump jack - pump back salt water & acid - sl. oil cut-pumped off.

01-25-80 Frac down 2 7/8" tubing w/20,000 gals. gelled 2% KCL wtr. carrying 17,000 lbs of 20/40 sand & 6000 lbs of 10/20 sand using 8 RCN ball seals

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

Signed H. W. Pace TITLE Owner-Operator DATE 4-10-80

APPROVED BY W. A. Gessett TITLE SUPERVISOR, DISTRICT II DATE APR 18 1980

CONDITIONS OF APPROVAL, IF ANY:

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RECEIVED
 U.S. CONSERVATION DIVISION
 P. O. BOX 2088
 SANTA FE, NEW MEXICO 87501
 JAN 22 1980

Form C-103
Revised 10-1-70

O. C. D.
 ARTESIA OFFICE
RECEIVED

5a. Indicate Type of Lease
State <input checked="" type="checkbox"/> For <input type="checkbox"/>
5. State Oil & Gas Lease No.
LG-0160

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"/> APR 15 1980	7. Unit Agreement Name
2. Name of Operator H.W. PACE	8. Farm or Lease Name PAT STATE
3. Address of Operator BOX 7435 MIDLAND, TEXAS 79703	9. Well No. NO. 1
4. Location of Well UNIT LETTER <u>P</u> <u>330'</u> FEET FROM THE <u>SOUTH</u> LINE AND <u>660'</u> FEET FROM THE <u>EAST</u> LINE, SECTION <u>30</u> TOWNSHIP <u>10</u> RANGE <u>27</u> NMPM.	10. Field and Pool, or Wildcat Rabbit Flats Queen UNDESIGNATED ON

15. Elevation (Show whether DF, RT, GR, etc.) G.L. 3726'	12. County CHAVES
---	----------------------

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

NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> OTHER <u>COMPLETION</u> <input checked="" type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> REMEDIAL WORK <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> CASING TEST AND CEMENT JOB <input type="checkbox"/> OTHER <input type="checkbox"/>

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.

11-13-79 PERF DEPTH CONTROL GR 16shots, 842 (2), 869 (2), 881 (2), 892 (2), 895 (2), 910 (2), 916 (2), 926 (2).
 11-14-79 1500 gals 15% acid & balls (16), nonemulsifying acid and 6 gals 14N, 2-1/2 gals CLA-STA 10, 1-1/2ga 1sHAI-50, 1000 gal s KCL WATR
 11-15-79 swab back acid & load hole with 25 bbls salt wtr
 11-16-79 run down hole pump & rods
 12-20-79 INSTALL PUMP JACK & PUMP SALT WTR & ACID SL OIL CUT -PUMPED OFF
 1-22-80 INTENT TO FRAC W/20,000 gals gelled 2% KCL WTR CARRING 17,000 lbs of 20/40 sand & 6,000 lbs of 10/20 sand, using 8 RCN BALLSEALERS, TREATMENT DOWN 2-3/8" tubing at 15 BPM WITH ANTICIPATED WELLHEAD PRESS OF 1800psi

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

SIGNED H.W. PACE *H.W. Pace* TITLE OWNER-OPERATOR DATE 1-19-80
 APPROVED BY W.A. Gressett TITLE SUPERVISOR, DISTRICT II DATE APR 18 1980
 CONDITIONS OF APPROVAL, IF ANY:

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	1
FILE	1 ✓
U.S.G.S.	2
LAND OFFICE	1
OPERATOR	1

Form O-105
Revised 10-78

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

APR 15 1980

5a. Indicate Type of Lease
State Fee

5. State Oil & Gas Lease No.
LG-0160

1a. TYPE OF WELL
OIL WELL GAS WELL DRY OTHER O. C. D.

b. TYPE OF COMPLETION
NEW WELL WORK OVER DEEPEN PLUG BACK DIFF. RESVR. OTHER ARTESIA, OFFICE

7. Unit Agreement Name

8. Farm or Lease Name
Pat State

9. Well No.
1

2. Name of Operator
H. W. Pace

3. Address of Operator
Box 7435 Midland, Texas 79703

10. Field and Pool, or Wildcat
Robert Flats
Und. Queen Queen

4. Location of Well
UNIT LETTER P LOCATED 330' FEET FROM THE South LINE AND 660' FEET FROM THE East LINE OF SEC. 30 TWP. 10 RGE. 27

12. County
Chaves

15. Date Spudded 9-10-79
16. Date T.D. Reached 11-3-79
17. Date Compl. (Ready to Prod.) 12-20-79
18. Elevations (DF, RKB, RT, GR, etc.) GR 3726
19. Elev. Casinghead 3727

20. Total Depth 1016
21. Plug Back T.D. 1012
22. If Multiple Compl., How Many Many
23. Intervals Drilled By
Rotary Tools
Cable Tools X

24. Producing Interval(s), of this completion - Top, Bottom, Name
842 - 916 Queens
25. Was Directional Survey Made NO

26. Type Electric and Other Logs Run
DIL, SNP-GR, CFD
27. Was Well Cored

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

CASING SIZE	WEIGHT LB./FT.	DEPTH SET	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
7 5/8"	26	386	10 3/4	140 sx class C (circ)	
5 1/2"	17.5	1014	7 8 1/4	110 cu ft. Pozmix (circ)	

29. LINER RECORD

SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN

30. TUBING RECORD

SIZE	DEPTH SET	PACKER SET

31. Perforation Record (Interval, size and number)

842 - 4" - 2	910 - 4" - 2
869 - 4" - 2	916 - 4" - 2
881 - 4" - 2	
892 - 4" - 2	
895 - 4" - 2	

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

DEPTH INTERVAL	AMOUNT AND KIND MATERIAL USED
842 - 916	1500 gals 15% non-emuls. 16 balls, 6 gals 14N, 2 1/2 gals CIA-STAL0, 1 1/2 gal HAI-50, 1000 gals KCL wtr.

33. PRODUCTION

Date First Production 2-04-80
Production Method (Flowing, gas lift, pumping - Size and type pump) pumping
Well Status (Prod. or Shut-in) prod.

Date of Test	Hours Tested	Choke Size	Prod'n. For Test Period	Oil - Bbl.	Gas - MCF	Water - Bbl.	Gas - Oil Ratio
2-13-80	24	--	→	4	TSTM	1.8	

Flow Tubing Press.	Casing Pressure	Calculated 24-Hour Rate	Oil - Bbl.	Gas - MCF	Water - Bbl.	Oil Gravity - API (Corr.)
	75#	→	4		1.8	

34. Disposition of Gas (Sold, used for fuel, vented, etc.) None
Test Witnessed by H.W. Pace

35. List of Attachments

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 H.W. Pace TITLE Owner-Operator DATE 4-10-80

INSTRUCTIONS

This form is to be filed with the appropriate District Office of the Commission not later than _____ days after the completion of any newly-drilled 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 for 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" _____ |
| B. Salt _____ | T. Atoka _____ | T. Pictured Cliffs _____ | T. Penn. "D" _____ |
| T. Yates _____ <u>124</u> | T. Miss _____ | T. Cliff House _____ | T. Leadville _____ |
| T. 7 Rivers _____ <u>234</u> | T. Devonian _____ | T. Menefee _____ | T. Madison _____ |
| T. Queen _____ <u>790</u> | 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 <u>842</u> to <u>916</u> | No. 4, from _____ to _____ |
| No. 2, from _____ to _____ | No. 5, from _____ to _____ |
| No. 3, 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 <u>65</u> to <u>70</u> feet | approx. 50' |
| 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
124	234	110	Yates				
234	535	301	7 Rivers				
535	689	154	Bowers				
689	(TD-1016)	325	Queens				



STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT
OIL CONSERVATION DIVISION
ARTESIA DISTRICT OFFICE

BRUCE KING
GOVERNOR

LARRY KEHOE
SECRETARY

P.O. DRAWER DD
ARTESIA, NEW MEXICO 88210
(505) 746-4861

November 16, 1979

Mr. H. W. Pace
Post Office Box 7435
Midland, Texas 79703

Re: Pat State
#1-P-30-10-27
Chaves County, NM

Dear Mr. Pace:

To date this office has not received Form C-103,
reporting the spud date, setting and cementing
surface casing in the subject well.

Please submit same at your earliest convenience.

Sincerely,

A handwritten signature in cursive script that reads "W. A. Gressett".

W. A. Gressett
Supervisor, District II

WAG:ar

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FILE	1 ✓
U.S.G.S.	2
LAND OFFICE	1
OPERATOR	1

NEW MEXICO OIL CONSERVATION COMMISSION
RECEIVED

30-005-60590
Form C-101
Revised 1-1-65

SEP 13 1979

O. C. C.

5A. Indicate Type of Lease
STATE FEE

5. State Oil & Gas Lease No.
LG-0160

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work DRILL <input checked="" type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input type="checkbox"/>		7. Unit Agreement Name
b. Type of Well OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> SINGLE ZONE <input checked="" type="checkbox"/> MULTIPLE ZONE <input type="checkbox"/>		8. Farm or Lease Name
2. Name of Operator H. W. PAGE		9. Well No. PAT STATE
3. Address of Operator BOX 7435, MIDLAND, TEXAS 79703		10. (1) Pool, or Wildcat UNDESIGNATED QUEEN
4. Location of Well UNIT LETTER P LOCATED 330' FEET FROM THE SOUTH LINE AND 660' FEET FROM THE EAST LINE OF SEC. 30 TWP. 10-S RGE. 27-E NMPM		12. County CHAVES
19. Proposed Depth 1,000FT		19A. Formation QUEENS
20. Rotary or C.T. CABLE TOOL		
21. Elevations (Show whether DF, RT, etc.) G.L. 3726'	21A. Kind & Status Plug. Bond 1 WELL - \$5,000	21B. Drilling Contractor P & D DRILLING CO
22. Approx. Date Work will start SEPT 13, 1979		

PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
10"	7-5/8	26#	400	140	CIRC
6-3/4	5-1/2	17#	1000	125	CIRC

APPROVED
FOR 90 DAYS UNLESS
DRILLING COMMENCED,
EXPIRES 12-13-79

IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM; IF PROPOSAL IS TO DEEPEN OR PLUG BACK, GIVE DATA ON PRESENT PRODUCTIVE ZONE AND PROPOSED NEW PRODUCTIVE 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 H. W. Page Title OWNER Date SEPT 13, 1979

(This space for State Use)

APPROVED BY W. A. Gressitt TITLE SUPERVISOR, DISTRICT II DATE SEP 13 1979

CONDITIONS OF APPROVAL, IF ANY:

NEW MEXICO OIL CONSERVATION COMMISSION
WELL LOCATION AND ACREAGE DEDICATION PLAT

Form C-102
 Supersedes C-128
 Effective 1-1-65

All distances must be from the outer boundaries of the Section

Operator H. W. PACE		Lease PAT STATE			Well No. ONE
Tract Letter "p"	Section 30	Township 10 South	Range 27 East	County Chaves	
Actual Footage Location of Well: 330 feet from the South line and 660 feet from the East line					
Ground Level Elev. 3726	Producing Formation QUEENS		Pool UNDESIGNATED	Dedicated Acreage: 40 Acres	

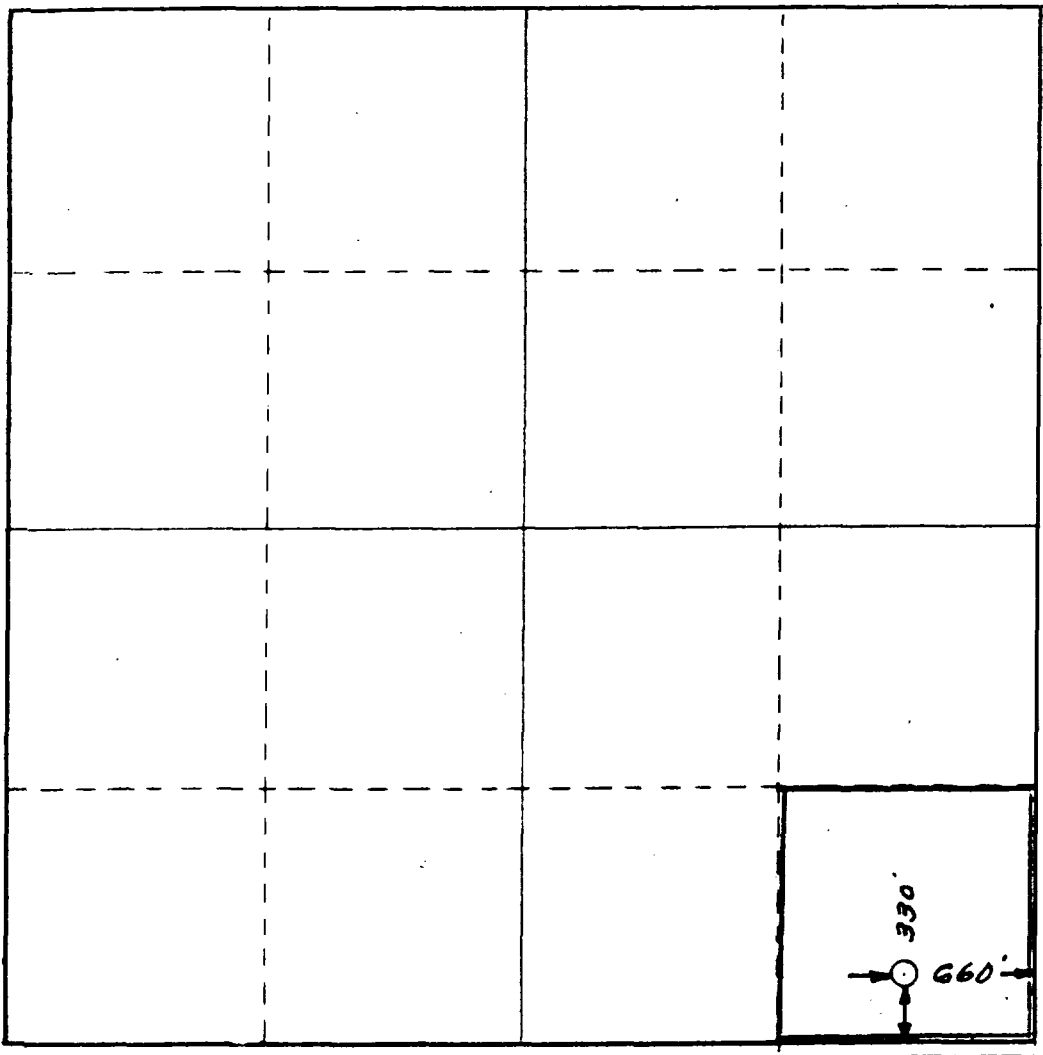
1. Outline the acreage dedicated to the subject well by colored pencil or hachure marks on the plat below.
2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).
3. If more than one lease of different ownership is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

RECEIVED
SEP 13 1979

Yes No If answer is "yes;" type of consolidation **O. C. C.**
ARTESIA, OFFICE

If answer is "no;" list the owners and tract descriptions which have actually been 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.
Harrison W. Pace
HARRISON W. PACE

Name **OWNER**

Position **INDIVIDUAL**

Company **SEPT 13, 1979**

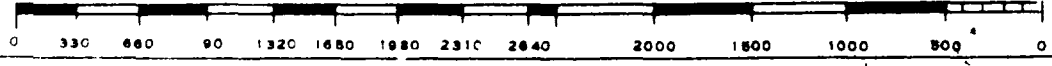
Date

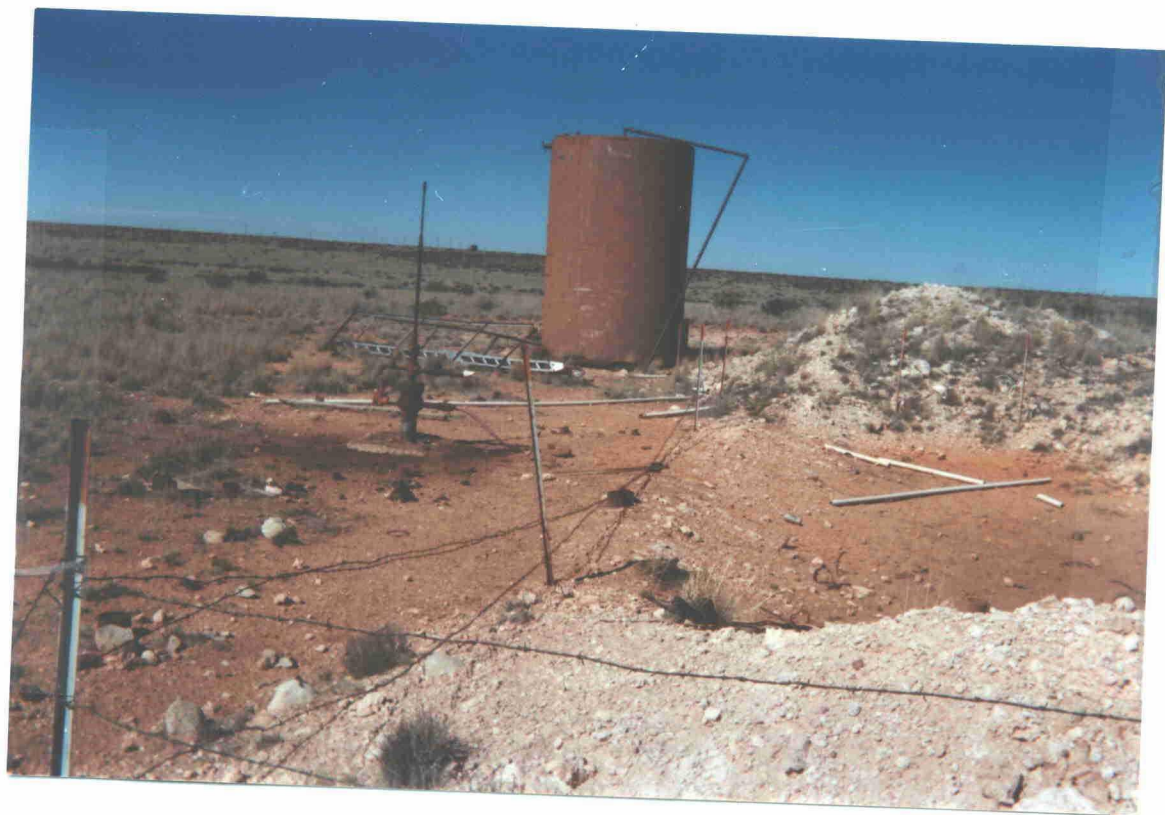
I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my knowledge and belief.

Date Surveyed **September 6,**

Registered Professional Engineer and Land Surveyor **3640**

Harrison W. Pace
HARRISON W. PACE
 CERTIFIED SURVEYOR





30 005 60590
PRINCIPAL: PACE, H. W. 9730

SURETY: American Manufacturer's Mutual Insurance Co.

BOND NO.: 9SE064857

TYPE: \$5,000 one-well 247699

APPROVED: September 13, 1979

CANCELLED:

WELL LOCATION: 330' FSL and 660' FEL of Sec. 30,
T-10-S, R-27-E, Chaves County
Unit P

Bond on file - active
2-27-90

BEFORE EXAMINER STOGNER	
OIL CONSERVATION DIVISION	
OCD	EXHIBIT NO. 2
CASE NO.	11500



STATE OF NEW MEXICO
ENERGY, MINERALS AND NATURAL RESOURCES DEPARTMENT

OIL CONSERVATION DIVISION

2040 S. PACHECO
SANTA FE, NEW MEXICO 87505
(505) 827-7131

March 1, 1996

Certified Mail – Return Receipt Requested

H. W. Pace
P. O. Box 7435
Midland, Texas 79703

American Manufacturers Mutual Insurance Co.
One Kemper Drive
Long Grove, IL 60049

RE: *OCD Case No. 11500*

Application of the New Mexico Oil Conservation Division for a Show Cause Hearing requiring H. W. Pace and American Manufacturer's Mutual Insurance Co. To appear and show cause why the Pat State Well No. 1 located in Unit P of Section 30, T10S, R27E, Chaves County, New Mexico should not be plugged and abandoned

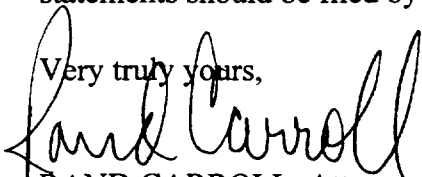
Dear Sir/Madam:

This letter is to advise you that the New Mexico Oil Conservation Division has filed the enclosed application seeking a Show Cause Hearing requiring H. W. Pace and American Manufacturer's Mutual Insurance Co. to appear and show cause why it/they should not be ordered to plug and abandon the above-referenced well.

This application has been set for hearing before an Examiner of the Oil Conservation Division on March 21, 1996. You are not required to attend this hearing, but as an owner of an interest that may be affected by an order issued in this cause, you may appear and present testimony. Failure to appear at that time and become a party of record will preclude you from challenging the matter at a later date.

Parties appearing in cases have been requested by the Division (Memorandum 2-90--- Enclosed) to file a Prehearing Statement substantially in the form prescribed by the Division. Prehearing statements should be filed by 4:00 o'clock p.m. on the Friday before a scheduled hearing.

Very truly yours,


RAND CARROLL, Attorney

New Mexico Oil Conservation Division

Enclosures

BEFORE EXAMINER STOGNER	
OIL CONSERVATION DIVISION	
OCD	EXHIBIT NO. 3
CASE NO.	11500

ENERGY and MINERALS DEPARTMENT

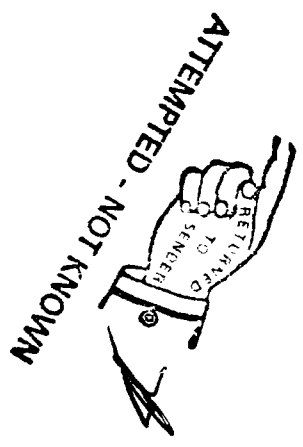
Fold at line over top of envelope to the right of the return address

Oil Conservation Division
Drawer DD
Artesia, New Mexico 88211-7529

CERTIFIED

Z 212 312 919
MAIL

H. W. Pace
P.O. Box 7435
Midland, TX 79703

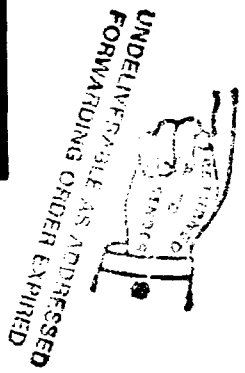


*Returned to CCD
3/9/95*

1st Notice 3-6
2nd Notice _____
Return _____

ENERGY, MINERALS AND NATURAL RESOURCES DEPARTMENT

OIL CONSERVATION DIVISION
2040 S. PACHECO
SANTA FE, NM 87505



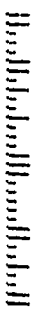
H. W. Pace
P. O. Box 7435
Midland, Texas 79703

3-4

CERTIFIED

Z 765 962 277

MAIL



Thank you for using Return Receipt Service.

6. Signature (Address or Agent) X <i>[Signature]</i>	
5. Received By: (Print Name) <i>[Signature]</i>	
3. Article Addressed to: American Manufacturer's Mutual Insurance Co. One Kemper Drive Long Grove, IL 60049 LEGAL	
4a. Article Number Z 765 962 276	4b. Service Type <input checked="" type="checkbox"/> Registered <input type="checkbox"/> Express Mail <input type="checkbox"/> Insured <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> COD
7. Date of Delivery 3-4-96	
8. Addressee's Address (Only if requested and fee is paid)	
9. Article Addressed to: American Manufacturer's Mutual Insurance Co. One Kemper Drive Long Grove, IL 60049	

SENDER: Complete items 1 and/or 2 for additional services. Complete items 3, 4a, and 4b. Print your name and address on the reverse of this form so that we can return this card to you. Attach this form to the front of the mailpiece, or on the back if space does not permit. Write "Return Receipt Requested" on the mailpiece below the article number. The Return Receipt will show to whom the article was delivered and the date delivered.

- 1. Addressee's Address
 - 2. Restricted Delivery
- I also wish to receive the following services (for an extra fee):

Consult postmaster for fee.



Receipt for Certified Mail
 No Insurance Coverage Provided
 Do not use for International Mail
 (See Reverse)

Z 765 962 276

Sent to	
American Manufacturer's Mutual Insurance Co.	
Street and No. One Kemper Drive	
P.O., State and ZIP Code Long Grove, IL 60049	
Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, and Addressee's Address	
TOTAL Postage & Fees	\$
Postmark or Date	

PS Form 3800, March 1993

Fold at line over top of envelope to the right of the return address



Receipt for Certified Mail
 No Insurance Coverage Provided
 Do not use for International Mail
 (See Reverse)

Z 765 962 277

Sent to	
H. W. Pace	
Street and No. P. O. Box 7435	
P.O., State and ZIP Code Midland, Texas 79703	
Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, and Addressee's Address	
TOTAL Postage & Fees	\$
Postmark or Date	

PS Form 3800, March 1993

is on the reverse side?