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LAND OFFICE	
OPERATOR	

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

Form C-105
Revised 1-1-65

5a. Indicate Type of Lease	
State ☒	Fee ☐
5. State Oil & Gas Lease No.	

1a. TYPE OF WELL		7. Unit Agreement Name	
OIL WELL ☐ GAS WELL ☐ DRY ☐ OTHER ☐		8. Farm or Lease Name	
b. TYPE OF COMPLETION		9. Well No.	
NEW WELL ☐ WORK OVER ☐ DEEPEN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ OTHER ☐		10. Field and Pool, or Wildcat	
2. Name of Operator		11. County	
3. Address of Operator		12. State	
4. Location of Well		13. Township	
UNIT LETTER ☐ LOCATED ☐ FEET FROM THE ☐ LINE AND ☐ FEET FROM		14. Section	
THE ☐ LINE OF SEC. ☐ TWP. ☐ RGE. ☐ NMPM		15. Date Spudded	
16. Date T.D. Reached		17. Date Compl. (Ready to Prod.)	
18. Elevations (DF, RKB, RT, GR, etc.)		19. Elev. Casinghead	
20. Total Depth		21. Plug Back T.D.	
22. If Multiple Compl., How Many		23. Intervals Drilled By	
24. Producing Interval(s), of this completion - Top, Bottom, Name		25. Was Directional Survey Made	
26. Type Electric and Other Logs Run		27. Was Well Cored	
28. CASING RECORD (Report all strings set in well)			
CASING SIZE	WEIGHT LB./FT.	DEPTH SET	HOLE SIZE
10-5/8"	10.2	222'	10-7/8"
CEMENTING RECORD		AMOUNT PULLED	
100		100	
29. LINER RECORD			
SIZE	TOP	BOTTOM	SACKS CEMENT
30. TUBING RECORD		PACKER SET	
SIZE	DEPTH SET	PACKER SET	
31. Perforation Record (Interval, size and number)		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
DEPTH INTERVAL		AMOUNT AND KIND MATERIAL USED	
33. PRODUCTION			
Date First Production	Production Method (Flowing, gas lift, pumping - Size and type pump)		Well Status (Prod. or Shut-in)
Date of Test	Hours Tested	Choke Size	Prod'n. For Test Period
Flow Tubing Press.	Casing Pressure	Calculated 24-Hour Rate	Oil - Bbl.
34. Disposition of Gas (Sold, used for fuel, vented, etc.)		Test Witnessed By	
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 <i>Charles H. Anderson</i>		TITLE <i>President</i> DATE <i>1/24/71</i>	

This form is to be filled 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 filled in quintuplicate except on state land, where six copies are required. See Rule 1105.

Northwestern New Mexico

Southeastern New Mexico

Northwestern New Mexico

FORMATION RECORD (Attach additional sheets if necessary)	
T. Anhy	T. Ojo Alamo
T. Salt	T. Kirtland-Fruitland
T. Salt	T. Pictured Cliffs
B. Salt	T. Cliff House
T. Yates	T. Menefee
T. 7 Rivers	T. Madison
T. Queen	T. Elbert
T. Grayburg	T. McCracken
T. San Andres	T. Ignacio Qtzite
T. Glorieta	T. Granite
T. McKee	
T. Ellensburg	Base Greenhorn
T. Blainebrary	T. Dakota
T. Tubb	T. Morrison
T. Drinkard	T. Todillo
T. Abo	T. Entrada
T. Wolfcamp	T. Wingate
T. Penn.	T. Chinle
T. Cisco (Bough C)	T. Permian
	T. Penn. "A"