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OPERATOR	

Form C-105
Revised 1-1-65

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		RECEIVED	
OIL WELL ☐	GAS WELL ☐	DRY ☒	OTHER ☐
b. TYPE OF COMPLETION		MAD 1-1-67	
NEW WELL ☐	WORK OVER ☐	DEEPEN ☐	PLUG BACK ☐
		DIFF. RESVR. ☐	OTHER ☐

2. Name of Operator
Roger L. Holmes

3. Address of Operator
P.O. Box 1841 - Roswell, New Mexico

4. Location of Well

UNIT LETTER **B** LOCATED **330** FEET FROM THE **North** LINE AND **2310** FEET FROM

THE **East** LINE OF SEC. **23** TWP. **15S** RGE. **25E** NMPM

15. Date Spudded **11-18-66** 16. Date T.D. Reached **12-3-66** 17. Date Compl. (Ready to Prod.) **12-5-66** 18. Elevations (DF, RKB, RT, GR, etc.) **3427 KB**

20. Total Depth **1120** 21. Plug Back T.D. 22. If Multiple Compl., How Many 23. Intervals Drilled By **All**

24. Producing Interval(s), of this completion - Top, Bottom, Name 25. Was Directional Survey Made

26. Type Electric and Other Logs Run **Gamma Ray Neutron** 27. Was Well Cored **Yes**

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

CASING SIZE	WEIGHT LB./FT.	DEPTH SET	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED

29. LINER RECORD				30. TUBING RECORD		
SIZE	TOP	BOTTOM	SACKS CEMENT	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 Oil - Bbl. Gas - MCF Water - Bbl. Gas - Oil Ratio

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

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 **Roger L. Holmes** TITLE **Operator** DATE **2-17-67**

INSTRUCTIONS

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 quadruplicate 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"
B. 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 Qtzite
T. Glorieta	T. McKee	T. Base Greenhorn	T. Granite
T. Paddock	T. Ellenburger	T. Dakota	T. T.
T. Blinberry	T. Gr. Wash	T. Morrison	T. T.
T. Tubb	T. Granite	T. Todillo	T. T.
T. Drinkard	T. Delaware Sand	T. Entrada	T. T.
T. Abo	T. Bone Springs	T. Wingate	T. T.
T. Wolfcamp	T. T.	T. Chinle	T. T.
T. Penn.	T. T.	T. Permian	T. T.
T. Cisco (Bough C)	T. T.	T. Penn. "A"	T. T.

FORMATION RECORD (Attach additional sheets if necessary)

From	To	Thickness in Feet	Formation	From	To	Thickness in Feet	Formation
165	165	165	Gravel & Congl.				
165	365	200	Sand & Shale				
365	675	290	Anhy & Dolo.				
675	970	295	Dolo., porous, water				
970	1120	150	Dolo., lito, oil shw.				