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LAND OFFICE	
TRANSPORTER	OIL
	GAS
PRODUCTION OFFICE	
OPERATOR	

# NEW MEXICO OIL CONSERVATION COMMISSION

(Form C-104)  
Revised 7/1/57

Santa Fe, New Mexico

## REQUEST FOR (OIL) - (GAS) ALLOWABLE

New Well  
Recompletion

This form shall be submitted by the operator before an initial allowable will be assigned to any completed Oil or Gas well. Form C-104 is to be submitted in QUADRUPLICATE to the same District Office to which Form C-101 was sent. The allowable will be assigned effective 7:00 A.M. on date of completion or recompletion, provided this form is filed during calendar month of completion or recompletion. The completion date shall be that date in the case of an oil well when new oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

Midland, Texas

June 23, 1964

(Place)

(Date)

WE ARE HEREBY REQUESTING AN ALLOWABLE FOR A WELL KNOWN AS:

Robert A. Dean

Bogle

Well No. 1, in NW 1/4 SE 1/4,

(Company or Operator)

(Lease)

J  
Unit Letter

Sec. 12

T. 16

R. 31

NMPM.

Undesignated

66C

Pool

Eddy

County. Date Spudded

Date Drilling Completed June 18, 1964

Please indicate location:

Elevation 4374 Total Depth 4103 PBD 3400

Top Oil/Gas Pay 3298 Name of Prod. Form. Queen

PRODUCING INTERVAL -

Perforations 3314-20

Open Hole Depth 3400 Casing Shoe 3400 Depth 3327 Tubing

OIL WELL TEST -

Natural Prod. Test: bbls, oil, bbls water in hrs, min. Size Choke

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of Choke load oil used): bbls, oil, bbls water in hrs, min. Size

GAS WELL TEST -

Natural Prod. Test: MCF/Day; Hours flowed Choke Size

Method of Testing (pitot, back pressure, etc.):

Test After Acid or Fracture Treatment: 1,250,000 MCF/Day; Hours flowed 72

Choke Size open Method of Testing: Prover

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): 250921 CMA

Casing Press. 1000 Tubing Press. 900 Date first new oil run to tanks RECEIVED

Oil Transporter

Gas Transporter Phillips JUL 6 1964

Remarks:

O. C. C.  
ARTESIA, OFFICE

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

Approved JUL 6 1964, 19

Robert A. Dean

(Company or Operator)

By: Robert A. Dean

(Signature)

OIL CONSERVATION COMMISSION

By: M. L. Armstrong

OIL AND GAS INSPECTOR

Title

Title Owner

Send Communications regarding well to:

Name Robert A. Dean

Address 2007 Wilco Bldg., Midland, Texas



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TRANSPORTER	
OIL	
GAS	<b>1</b>
PRODUCTION OFFICE	
OPERATOR	<b>2</b>

NEW MEXICO OIL CONSERVATION COMMISSION  
SANTA FE, NEW MEXICO  
**CERTIFICATE OF COMPLIANCE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS**

**FORM C-110**  
(Rev. 7-60)

FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE

Company or Operator <b>Robert A. Dean</b> ✓				Lease <b>Bogle</b>		Well No. <b>1</b>	
Unit Letter <b>J</b>	Section <b>12</b>	Township <b>16S</b>	Range <b>31E</b>	County <b>Eddy</b>			
Pool <b>Undesignated WC</b>				Kind of Lease (State, Fed, Fee) <b>Fee</b>			
If well produces oil or condensate give location of tanks			Unit Letter	Section	Township	Range	
Authorized transporter of oil <input type="checkbox"/> or condensate <input type="checkbox"/>  <b>None</b>				Address (give address to which approved copy of this form is to be sent)			
Is Gas Actually Connected? Yes _____ No _____							
Authorized transporter of casing head gas <input type="checkbox"/> or dry gas <input checked="" type="checkbox"/>			Date Connected <b>waiting on connections.</b>	Address (give address to which approved copy of this form is to be sent) <b>Bartlesville, Oklahoma</b>			
<b>Phillips Petroleum Corp.</b>							

If gas is not being sold, give reasons and also explain its present disposition:

**REASON(S) FOR FILING** (please check proper box)

New Well ..... ☐  
Change in Transporter (check one)  
Oil ..... ☐ Dry Gas ..... ☐  
Casing head gas . ☐ Condensate .. ☐

Change in Ownership ..... ☐  
Other (explain below)


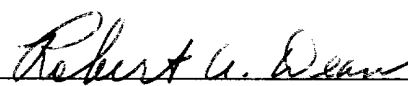
**Reentry of McCoy & Stephens well that was drilled and plugged in December, 1962.**

**RECEIVED**

Remarks	JUL 6 1964  O. C. C. ARTEBIA, OFFICE
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The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.

Executed this the **29th** day of **June**, 19 **64**.

OIL CONSERVATION COMMISSION		By	
Approved by			<b>Robert A. Dean</b>
Title		<b>Owner</b>	
<b>OIL AND GAS INSPECTOR</b>		Company	<b>Robert A. Dean</b>
Date	<b>JUL 6 1964</b>	Address	<b>2007 Wilco Bldg., Midland, Texas</b>



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LAND OFFICE	
TRANSPORTER	OIL
	GAS
PRODUCTION OFFICE	
OPERATOR	<b>2</b>

# NEW MEXICO OIL CONSERVATION COMMISSION

FORM C-103  
(Rev 3-55)

## MISCELLANEOUS REPORTS ON WELLS

(Submit to appropriate District Office as per Commission Rule 1106)

Name of Company <b>Robert A. Dean</b>				Address <b>2007 Wilco Bldg., Midland, Texas</b>			
Lease <b>Bogle</b>	Well No. <b>1</b>	Unit Letter <b>J</b>	Section <b>12</b>	Township <b>16S</b>	Range <b>31E</b>		
Date Work Performed <b>June 18, 1964</b>	Pool <b>Undesignated WC</b>			County <b>Eddy</b>			

THIS IS A REPORT OF: (Check appropriate block)

- ☐ Beginning Drilling Operations   
 ☐ Casing Test and Cement Job   
 ☒ Other (Explain):  
☐ Plugging   
 ☐ Remedial Work   
 **Reentry**

Detailed account of work done, nature and quantity of materials used, and results obtained.

**Set 3400 ft. 4½" casing 9.5#, cemented with 100 sacks. Tested 1000 pounds.**

**No drop in pressure.**

RECEIVED

JUL 6 1964

O. C. C.  
ARTESIA, OFFICE

Witnessed by <b>Robert A. Dean</b>	Position <b>Owner</b>	Company <b>Robert A. Dean</b>
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FILL IN BELOW FOR REMEDIAL WORK REPORTS ONLY

### ORIGINAL WELL DATA

D F Elev. <b>4381</b>	T D <b>4103</b>	P B T D <b>3400</b>	Producing Interval <b>Queen</b>	Completion Date <b>June 21, 1964</b>
Tubing Diameter <b>2-3/8"</b>	Tubing Depth <b>3327'</b>	Oil String Diameter <b>4½"</b>	Oil String Depth <b>3400'</b>	

Perforated Interval(s)  
**3314-3320**

Open Hole Interval    Producing Formation(s)  
**Queen sand**

### RESULTS OF WORKOVER

Test	Date of Test	Oil Production BPD	Gas Production MCFPD	Water Production BPD	GOR Cubic feet/Bbl	Gas Well Potential MCFPD
Before Workover						
After Workover						

OIL CONSERVATION COMMISSION

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

Approved by <i>M. L. Armstrong</i>	Name <i>Robert A. Dean</i> <b>Robert A. Dean</b>
Title <b>OIL AND GAS INSPECTOR</b>	Position <b>Owner</b>
Date <b>JUL 6 1964</b>	Company <b>Robert A. Dean</b>



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OPERATOR	

**NEW MEXICO OIL CONSERVATION COMMISSION**  
**WELL LOCATION AND ACREAGE DEDICATION**  
 SEE INSTRUCTIONS FOR COMPLETING THIS FORM ON THE REVERSE SIDE

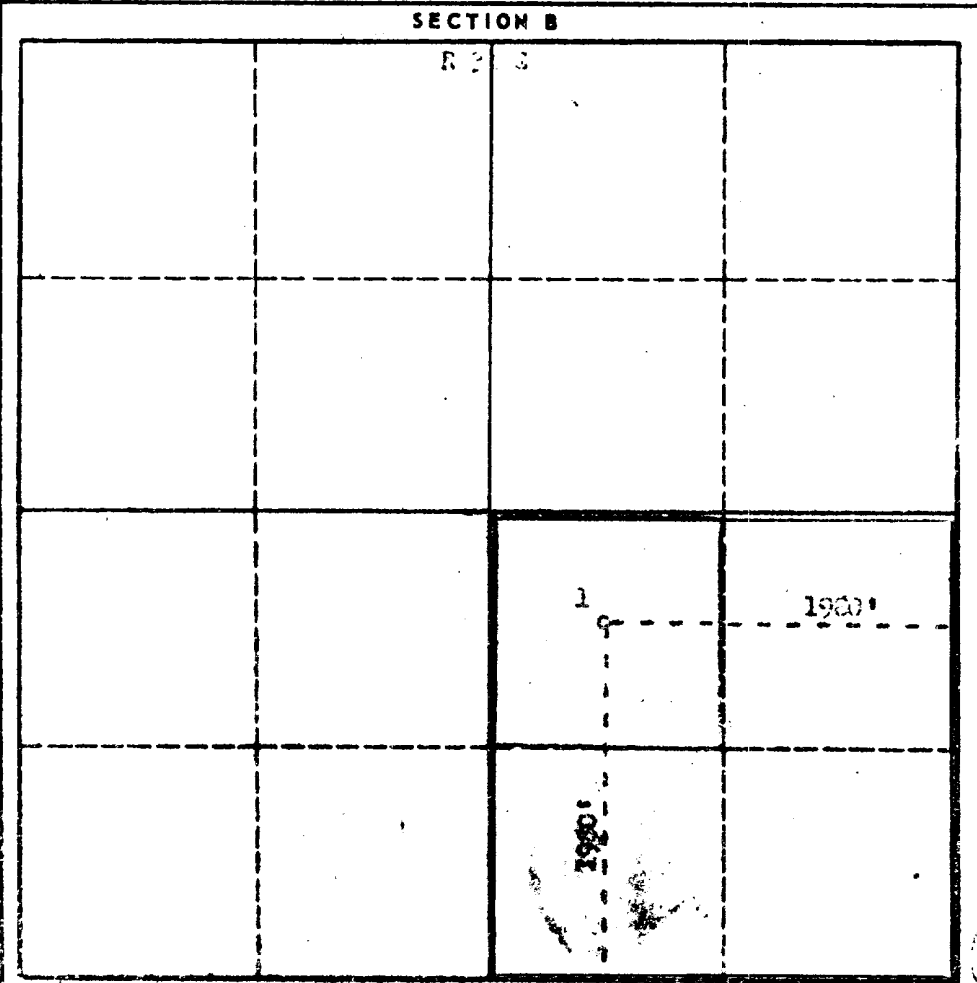
FORM C-128  
 Revised 5/1/57

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**AUG 28 1964**

Operator <b>Robert A. Deen</b>		SECTION A		B. L. No. <b>1</b>	
Lease <b>20, 20-100</b>		ARTESIA OFFICE			
Unit Letter <b>J</b>	Section <b>12</b>	Township <b>16 South</b>	Range <b>31 East</b>	County <b>Soldado</b>	
Actual Footage Location of Well: <b>1980</b> feet from the <b>South</b> line and <b>1980</b> feet from the <b>East</b> line					
Ground Level Elev. <b>4344</b>	Producing Formation <b>Premier Queen</b>	Pool <b>Undesignated</b>	Dedicated Acreage: <b>160</b> Acres		

1. Is the Operator the only owner in the dedicated acreage outlined on the plat below? YES ☒ NO ☐ ("Owner" means the person who has the right to drill into and to produce from any pool and to appropriate the production either for himself or for himself and another. (65-3-29 (e) NMSA 1935 Comp.)
2. If the answer to question one is "no," have the interests of all the owners been consolidated by communitization agreement or otherwise? YES ☐ NO ☐ If answer is "yes," Type of Consolidation \_\_\_\_\_
3. If the answer to question two is "no," list all the owners and their respective interests below:

Owner	Land Description



**CERTIFICATION**

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

Name **W. G. McCoy**

Position **Partner**

Company **McCoy & Stevens**

Date **November 27, 1962**

I hereby certify that the well location shown on the plat in SECTION B 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 \_\_\_\_\_

Registered Professional Engineer and/or Land Surveyor \_\_\_\_\_

License No. \_\_\_\_\_

