

District I
1625 N. French Dr., Hobbs, NM 88240
District II
811 South First, Artesia, NM 88210
District III
1000 Rio Brazos Road, Aztec, NM 87410
District IV
2040 South Pacheco, Santa Fe, NM 87505

State of New Mexico
Energy Minerals and Natural Resou.

Form C-104A

Submit to appropriate District Office

Oil Conservation Division
~~2040 South Pacheco~~
Santa Fe, NM 87505

Change of Operator

Previous Operator Information:

OGRID: 145295
Name: Pendragon Energy Partners, Inc.
Address: 621 17th Street, Suite 750
Address: _____
City, State, Zip: Denver, CO 80293

New Operator Information:

Effective Date: March 1, 2001
New Ogrid: 149538
New Name: Asher Enterprises Ltd. Co.
Address: P.O. Box 423
Address: _____
City, State, Zip: Artesia, NM 88210

I hereby certify that the rules of the Oil Conservation Division have been complied with and that the information given to the new operator on this form and the attached list of wells is true and complete to the best of my knowledge and belief.

Signature: 

Printed name: Kevin P. Jones

Title: Partner

Date: 4-20-01 Phone: (505) 748-1424



Previous operator complete below:

Previous Operator: Pendragon Energy Partners, Inc.

Previous OGRID: 145295

Signature: 

Printed Name: Alan B. Nicol, President

NMOCD Approval

Signature: 

Printed Name: SUPERVISOR, DISTRICT II

District: _____

Date:  26 2001

28530

CMD : ONGARD 04/20/98 10:30:03
OG6C101 C101-APPLICATION FOR PERMIT TO DRILL OGO CR -TPOV

OGRID Idn : 145295 API Well No: 30 15 4355 APD Status(A/C/P): A
Opr Name, Addr: PENDRAGON ENERGY PARTNERS INC. Aprvl/Cncl Date : 11-01-1995
 415 W. WALL
 STE 1000
 MIDLAND,TX 79701

Prop Idn: 18104 GRAYBURG JACKSON UNIT Well No: 2

U/L Sec Township Range Lot Idn North/South East/West

Surface Locn : G 27 17S 30E FTG 1980 F N FTG 1980 F E
OCD U/L : G API County : 15

Work typ(N/E/D/P/A) : N Well typ(O/G/M/I/S/W/C): O Cable/Rotary (C/R) : R
Lease typ(F/S/P/N/J/U/I): F Ground Level Elevation : 99999

State Lease No: Multiple Comp (Y/N) : S
Prpsd Depth : Prpsd Frmtn :

E0009: Enter data to modify record

PF01 HELP PF02 PF03 EXIT PF04 GoTo PF05 PF06 CONFIRM
PF07 PF08 PF09 PRINT PF10 C102 PF11 HISTORY PF12

Distnd I
PO Box 1940, Hobbs, NM 88241-1940

Dist. not U

PO Drawer DD, Artesia, NM 88211-0719

Dist. no. 18

1000 Rio Bruzos Rd., Aztec, NM 87410

Display IV

PO Box 20008, Santa Fe, NM 87504-2000

State of New Mexico
Energy, Minerals & Natural Resources Department

OIL CONSERVATION DIVISION
PO Box 2088
Santa Fe, NM 87504-2088

Revised Estimate: 100

INSTRUCTIONS TO THE USER

Submit to Appropriate District Office

☐ AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

Operator Name and Address PENDRAGON ENERGY PARTNERS, INC. 621 17 TH ST., #750 DENVER, CO 80293		OGRID Number 145295	
Reason for Filing Code CH 11-1-95			
API Number 30-015 04355	Pool Name GRAYBURG JACKSON SR-Q-G-SA	Pool Code 28509	
Property Code 18104 00576 00577	Property Name GRAYBURG JACKSON Unit	Well Number 6-2	

II. ¹⁰ Surface Location

U1 or lot no.	Section	Township	Range	Lot Ida	Feet from the	North/South Line	Feet from the	East/West line	County
G	27	17S	35E		1980	N 21/4	1980	EAST	END

¹¹ Bottom Hole Location

U.L. or lot no.	Section	Township	Range	Lot Ida	Feet from the	North/South line	Feet from the	East/West line	County
-----------------	---------	----------	-------	---------	---------------	------------------	---------------	----------------	--------

" Lee Code	" Producing Method Code TA	" Gas Connection Date	" C-129 Permit Number	" C-129 Effective Date	" C-129 Expiration Date
------------	-------------------------------	-----------------------	-----------------------	------------------------	-------------------------

III. Oil and Gas Transporters

[illegible]

IV. Produced Water

POD 1165550	K2317SR30E	POD ULSTR Location and Description	OIL CON. DIST. DIST. 2
----------------	------------	------------------------------------	---------------------------

V. Well Completion Data

" Sped Date	" Ready Date	" TD	" PBTD	" Performance
" Hole Size	" Casing & Tubing Size	" Depth Set	" Safety Critical	
			Post ID-3	
			12-29-95	
			chg op	

VI. Well Test Data

" Date New Oil	" Gas Delivery Date	" Test Date	" Test Length	" Tbg. Pressure	" Csg. Pressure
" Choke Size	" Oil	" Water	" Gas	" AOF	" Test Method

"I hereby certify that the rules of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief

ಸತ್ಯವಾದಿಗಳು

2nd level 347K

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Date 10/18/95

If this is a change of operator fill in the OGRID number and name of the previous operator

LBO NEW MEXICO INC.

OGRID# 013185

Previous Operator Signature

Private & never

1. *Journal of the American Medical Association*, 1997; 277: 1033-1038.

Due

Raymond A. Diaz, pre 11-1-95

Submit 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-104
Revised 1-1-89
See Instructions
at Bottom of Page

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

MAR 23 1992

O. C. D.
ARTESIA OFFICE

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator LBO New Mexico, Inc.	Well API No. N/A
Address 28202 Cabot Rd., Ste. 250, Laguna Niguel, CA 92677	
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)	
New Well <input type="checkbox"/>	Change in Transporter of <input type="checkbox"/>
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Operator <input checked="" type="checkbox"/>	Casehead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
If change of operator give name and address of previous operator Xeric Oil & Gas Corp., Midland, TX	

II. DESCRIPTION OF WELL AND LEASE

Lease Name G-J Unit Tract 6	Well No. 2	Pool Name, including Formation Grayburg-Jackson-SR-Q-G-S	Kind of Lease State, Federal or Fee	Lease No. LC028992
Location Unit Letter G : 1980 Feet From The North Line and 1980 Feet From The East Line Section 27 Township 17-S Range 30-E NMPM, Eddy County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Navajo Refining Co.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 159, Artesia, NM 88210
Name of Authorized Transporter of Casehead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Phillips Petroleum GPM Gas Corp.	Address (Give address to which approved copy of this form is to be sent) 4044 E. Penbrook, Odessa, TX 79762
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually condensed? When?
N/A	22 17S 30E Yes 1945
If this production is commingled with that from any other lease or pool, give commingling order number N/A	

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Drift Re.
Date Spudded	Date Compl. Ready to Prod.		Total Depth			P.B.T.D.		
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay			Tubing Depth		
Perforations						Depth Casing Shoe		

TUBING, CASING AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

Date First New Oil Run To Tank	Date of Test	Producing Method (Flow pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size posted ID-3 4-3-92
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF 6 mg op

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
Sealing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. OPERATOR CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Signature **Raymond A. Diaz, President**
Dated Name **3/17/92** Title **(714) 365-0100**
Telephone No.

OIL CONSERVATION DIVISION

Date Approved **MAR 30 1992**

By **ORIGINAL SIGNED BY MIKE WILLIAMS**
Title **SUPERVISOR, DISTRICT II**

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104
Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
Sections of this form must be filled out for allowable on new and recompleted wells.
Only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
Form C-104 must be filed for each pool in multiply completed wells.

Submit 5 Copies
Appropriate District Office
DISTRICT I
O. Box 1980, Hobbs, NM 88240

DISTRICT II
O. Drawer DD, Artesia, NM 88210

DISTRICT III
XX Rio Brazos Rd., Aztec, NM 87410

State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

Form C-104
Revised 1-1-89
See Instructions
at Bottom of Page

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MAY 20 1991

MAY 30 1991

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

O. C. D.
ARTESIA, OFFICE

O. C. D.
ARTESIA, OFFICE

Operator Xeric Oil & Gas Company	Well API No.
Address P.O. Box 51311, Midland, TX 79710	
Reason(s) for Filing (Check proper box) <input type="checkbox"/> New Well <input type="checkbox"/> Change in Transporter of <input type="checkbox"/> Recompletion <input type="checkbox"/> Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> <input checked="" type="checkbox"/> Change in Operator <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/> <input type="checkbox"/> Other (Please explain)	
Change of operator give name and address of previous operator <u>General Operating Company P.O. Box 877 Wichita Falls TX 76307</u>	

I. DESCRIPTION OF WELL AND LEASE

Lease Name G-J Unit Tract 6	Well No. 2	Pool Name, including Formation Grayburg-Jackson-SR-Q-G-S	Kind of Lease State, Federal or Fee	Lease No. LC028992b
Location Unit Letter <u>G</u> : 1980 Feet From The <u>North</u> Line and 1980 Feet From The <u>East</u> Line Section <u>27</u> Township <u>17-S</u> Range <u>30-E</u> NMPM, <u>Eddy</u> County				

II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Navajo Refining Company	Address (Give address to which approved copy of this form is to be sent) P.O. Box 159, Artesia, NM 88210					
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	Sec	Twp	Rge	Is gas actually connected?	When?

If this production is commingled with that from any other lease or pool, give commingling order number.

V. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
Perforations					Depth Casing Shoe			

TUBING, CASING AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
			100 - 50
			5 - 7-91
			015 - 01p

TEST DATA AND REQUEST FOR ALLOWABLE

OIL WELL (Test must be after recovery of total volume of load on and must be equal to or exceed top allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Producing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

I. OPERATOR CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Signature Gary S. Barker Operations Mgr.
Printed Name
Date May 13, 1991 Title
Telephone No. 915-683-3171

OIL CONSERVATION DIVISION

Date Approved JUN - 3 1991

By ORIGINAL SIGNED BY
MIKE WILLIAMS

Title SUPERVISOR, DISTRICT II

INSTRUCTIONS: This form is to be filed in compliance with Rule 116.

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals

SUBMIT IN TRIPLICATE

RECEIVED

JAN 31 1991

O. C. D.
ARTESIA OFFICE

5. Lease Designation and Serial No.

8910085020

6. If Indian, Allottee or Tribe Name

LC-028992-B

7. If Unit or CA, Agreement Designation

Grayburg-Jackson

8. Well Name and No.

Grayburg-Jackson 6-2

9. API Well No.

N/A

10. Field and Pool, or Exploratory Area

Grayburg-Jackson

11. County or Parish, State

Eddy County, New Mexico

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator

General Operating Company

3. Address and Telephone No.

P.O. Box 877, Wichita Falls, Texas 76307-0877,;(817)767-4801

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

SWNE, Sec. 27, T.17N., R.30E.

Tract 6, No. 2 1980' from North line 1980' from East line

12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

- ☒ Notice of Intent
☐ Subsequent Report
☐ Final Abandonment Notice

TYPE OF ACTION

- ☐ Abandonment
☐ Recompletion
☐ Plugging Back
☐ Casing Repair
☐ Altering Casing
☒ Other Test Casing
☐ Change of Plans
☐ New Construction
☐ Non-Routine Fracturing
☐ Water Shut-Off
☐ Conversion to Injection
☐ Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Will preform casing pressure test. If test passes well will be activated or temporarily abandoned. If test fails, well will be permanently plugged.

RECEIVED
JAN 28 11 05 AM '91
OIL
AREA

14. I hereby certify that the foregoing is true and correct

Signed

Thomas E. Lane

Title

Superintendent

Date

1-24-91

(This space for Federal or State office use)

Approved by

Conditions of approval, if any:

Title

Date

1/30/91

NO. OF COPIES RECEIVED		
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SANTA FE		✓
FILE		✓
U.S.G.S.		
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 BY

AUG 29 1986

O. C. D.

ARTESIA, OFFICE

I. Operator
GENERAL OPERATING COMPANY ✓
Address
Suite 303, First National Bank Bldg., Artesia, NM 88210
Reason(s) for filing (Check proper box)
New Well ☐ Change in Transporter of:
Recompletion ☐ Oil ☒ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐
Other (Please explain)

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name G-J Unit Tract 6	Well No. 2	Pool Name, Including Formation Grayburg-Jackson - SR-G-G-SA	Kind of Lease State, Federal or Fee Federal	Lease No. LC028992b
Location Unit Letter <u>G</u> : <u>1980</u> Feet From The <u>North</u> Line and <u>1980</u> Feet From The <u>East</u> Line of Section <u>27</u> Township <u>17</u> Range <u>30</u> , NMPM, <u>Eddy</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Navajo Refining Company	Address (Give address to which approved copy of this form is to be sent) P.O. Drawer 159, Artesia, NM 88210					
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 P	Sec. 22	Twp. 17	Rge. 30	Is gas actually connected? no	When

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
Perforations					Depth Casing Shoe			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
					Post ID-3			
					9-5-86			
					cky LITIM			

V. 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	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

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

VI. 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.

Sammy Klein
(Signature)

H & S OIL COMPANY - AGENT
(Title)

August 28, 1986
(Date)

OIL CONSERVATION COMMISSION

APPROVED SEP 10 1986, 19
Original Signed By
BY Lee A. Clements
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 deviation 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.

NO. OF COPIES RECEIVED	3
DISTRIBUTION	
SANTA FE	
FILE	/
U.S.G.S.	/
LAND OFFICE	
OPERATOR	/

RECEIVED

NEW MEXICO OIL CONSERVATION COMMISSION
MAR 7 - 1979

O. C. C.
ARTESIA, OFFICE

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

5a. Indicate Type of Lease	State <input type="checkbox"/> Federal <input type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.	

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"/> SI GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name Grayburg Jackson Unit
2. Name of Operator General Operating Company	8. Farm or Lease Name Tr. 6
3. Address of Operator Suite 1007, Ridglea Bank Bldg. - Fort Worth, Texas 76116	9. Well No. Tr. 6 - 2
4. Location of Well UNIT LETTER G, 1980 FEET FROM THE N LINE AND 1980 FEET FROM THE E LINE, SECTION 27 TOWNSHIP 17 S RANGE 30 E NMPM.	10. Field and Pool, or Wildcat Grayburg Jackson (SR. Q. G. SA)
15. Elevation (Show whether DF, RT, GR, etc.)	12. County Eddy

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>

SUBSEQUENT REPORT OF:

REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER Casing Leak Survey <input checked="" 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.

Installed valves and 2" pipe to surface as per instructions.

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

SIGNED Robert R. Spencer TITLE Agent DATE March 7, 1979

APPROVED BY Mike Wilkman TITLE OIL AND GAS INSPECTOR DATE MAR 13 1979

CONDITIONS OF APPROVAL, IF ANY:

NEW MEXICO
OIL CONSERVATION COMMISSION

P. O. DRAWER DD
ARTESIA, NEW MEXICO

Jan. thru April, 1974

No. 2010 C

SUPPLEMENT TO THE OIL PRORATION SCHEDULE

DATE 1/11/74

PURPOSE: ALLOWABLE ASSIGNMENT (Old Well)

Effective 1/1/74, an allowable of 9 barrels of oil per day is hereby assigned to the General Operating Company, G-J Unit Tr.6 #2-G, 27-17-30, Grayburg Jackson Pool.


Jan. total, 279 bbls
Feb. " , 252 "
Mar. " , 279 "
Apr. " , 270 "

WAG:jw

General Operating Co.

TMM

OIL CONSERVATION COMMISSION


Supervisor, District No. 2

EXTRA COPY

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPL
(Other instructions
reverse side)E*
re-Form approved.
Budget Bureau No. 42-R1424.5. LEASE DESIGNATION AND SERIAL NO.
IC-028092(5)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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—" for such proposals.)

RECEIVED

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	JAN 11 1974	7. UNIT AGREEMENT NAME Grayburg Jackson Unit
2. NAME OF OPERATOR General Operating Company ✓	O. C. C.	8. FARM OR LEASE NAME Tract 6
3. ADDRESS OF OPERATOR P.O. Box 377, Ichita Falls, Texas 76037	ARTESIA, OFFICE	9. WELL NO. 2
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1/2 Sec. 27, T. 17N, R. 13E, Section 27-117N-130E		10. FIELD AND POOL, OR WILDCAT Grayburg Jackson
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Section 27-117N-130E
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3000'	12. COUNTY OR PARISH Gray
		13. STATE New Mexico

16.

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

PULL OR ALTER CASING

FRACTURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

ABANDON*

REPAIR WELL

CHANGE PLANS

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

REPAIRING WELL

FRACTURE TREATMENT

ALTERING CASING

SHOOTING OR ACIDIZING

ABANDONMENT*

(Other) Re-activating

(NOTE: Report results of multiple completion on Well
Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

The refractured well is to be re-activated by re-completing well in a water floor area effective 1-1-74.

A recent test indicated that the well was capable of producing 5 barrels of oil and 5 barrels of water per day. On December 31, 1973, the well was re-completed as a producing well in a water floor area, and it is in production at this time.

RECEIVED

JAN - 7 1974

U. S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO

18. I hereby certify that the foregoing is true and correct

SIGNED

C. W. Samboff

TITLE

Engineer

DATE December 31, 1973

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

APPROVED

JAN 10 1974

R. L. BEEKMAN

ACTING DISTRICT ENGINEER

*See Instructions on Reverse Side

Instructions

General: This form is designed for submitting proposals to perform certain well operations, and reports of such operations when completed, as indicated, on Federal and Indian lands pursuant to applicable Federal law and regulations, and, if approved or accepted by any State, on all lands in such State, pursuant to applicable State law and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State office.

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FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL <input type="checkbox"/>
	GAS <input type="checkbox"/>
OPERATOR	
PRODUCTION OFFICE	

AND
 AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS
RECEIVED

FEB 26 1973

TA

Operator O. C. C. General Operating Company ✓ ARTESIA, OFFICE	
Address P. O. Box 877, Wichita Falls, Texas 76307	
Reason(s) for filing (Check proper box)	
New Well <input type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input checked="" type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Other (Please explain) Change of Unit Operator from Anadarko Production Company to General Operating Company effective February 1, 1973.	

If change of ownership give name and address of previous owner: Grayburg Jackson Unit Working Interest Owners with Anadarko Production Company, 2 Greenway Plaza East, Suite 410, Houston, Texas 77046 Unit Operator.

II. DESCRIPTION OF WELL AND LEASE

Lease Name Grayburg Jackson Unit Tract 6	Well No. 2	Pool Name, including Formation Grayburg Jackson Q-G-SA	Kind of Lease State, Federal or Fee Federal	Lease No. LC-028992
Location Unit Letter <u>G</u> ; <u>1980</u> Feet From The <u>North</u> Line and <u>1980</u> Feet From The <u>East</u> Line of Section <u>27</u> Township <u>17 South</u> Range <u>30 East</u> , NMPM, <u>Eddy</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Texas-New Mexico Pipe Line Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1510, Midland, Texas 79701
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. <u>Lact</u>	Unit <u>P</u> Sec. <u>22</u> Twp. <u>17S</u> Rge. <u>30E</u>
Is gas actually connected? <u>No</u>	When

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
Perforations					Depth Casing Shoe			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			

V. 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	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

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

VI. 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.

C. W. Stumbhoffer

(Signature)

Partner

(Title)

February 16, 1973

(Date)

OIL CONSERVATION COMMISSION

APPROVED FEB 27 1973, 19
 BY W. A. Grissett
 TITLE OIL AND GAS INSPECTOR

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 deviation 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.

N. M. O. C. C. COPY
UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TR
(Other instructi
verse side)

CATE*
on re-

Form approved.
Budget Bureau No. 42-B1424.

5. LEASE DESIGNATION AND SERIAL NO.
LC 028992-B

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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—" for such proposals.)

7. UNIT AGREEMENT NAME

Grayburg Jackson Unit

8. FARM OR LEASE NAME

Tract No. 6

9. WELL NO.

2

10. FIELD AND POOL, OR WILDCAT

Grayburg Jackson

11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA

27-17-30

12. COUNTY OR PARISH

Eddy

13. STATE

New Mexico

1. OIL ☒ GAS ☐
WELL WELL OTHER

2. NAME OF OPERATOR

Anadarko Production Company

3. ADDRESS OF OPERATOR

Box 67 Loco Hills, New Mexico 88255

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface

1980' FM & EL

Sec. 27, T 17 S, R 30 E

Eddy County, New Mexico ~~88X~~

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

3625 GL

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

Temporary Abandonment

(NOTE: Report results of multiple completion on Well
Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

This well is temporarily abandoned effective ~~XXXXX~~ 1-1-70.

18. I hereby certify that the foregoing is true and correct

SIGNED

D. R. Layton

TITLE **District Superintendent**

DATE **2-23-71**

(This space for Federal or State office use)

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:

TITLE

RECEIVED
DATE

MAR 2 1971

*See Instructions on Reverse Side

D. C. C.
ARTESIA, OFFICE

Instructions

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OIL CONSERVATION COMMISSION

STATE OF NEW MEXICO
P. O. DRAWER DD - ARTESIA
88210

January 22, 1971

GOVERNOR
BRUCE KING
CHAIRMAN
LAND COMMISSIONER
ALEX J. ARMIJO
MEMBER
STATE GEOLOGIST
A. L. PORTER, JR.
SECRETARY - DIRECTOR

Anadarko Production Company
Box 116
Loco Hills, New Mexico

Re: Shut-in wells

Gentlemen:

We note from recent production reports that the subject wells have not been producing. Therefore, unless notified otherwise by Form C-127, the wells involved will receive no allowable beginning March, 1971.

Grayburg Jackson

G-J Unit Tract No.6 #2,5-G, 27-17S-30E

Very truly yours,

OIL CONSERVATION COMMISSION

R. L. Stamets

RLS:jw

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TWO COPIES
(Other instructions on reverse side)Form approved.
Budget Bureau No. 42-R1424.5. LEASE DESIGNATION AND SERIAL NO.
LC 028992-B

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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—" for such proposals.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		7. UNIT AGREEMENT NAME Grayburg Jackson Unit
2. NAME OF OPERATOR Anadarko Production Company		8. FARM OR LEASE NAME Tract No. 6
3. ADDRESS OF OPERATOR Box 116 Loco Hills, New Mexico 88255		9. WELL NO. 2
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 1980' FN & RL Sec. 27, T 17 S, R 30 E Eddy County, New Mexico		10. FIELD AND POOL, OR WILDCAT Grayburg Jackson
14. PERMIT NO.		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 27-17-30
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3625 GL		12. COUNTY OR PARISH Eddy
		13. STATE New Mexico

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Fracture treated well with 20,000 gals. fresh water and 30,000# 20-40 sand in three equal stages separated by 500# rock salt and 500# moth balls. Max. pressure first stage 1600 psi, 2nd stage 2050 psi, 3rd stage 2300 psi. IDHP 1500 psi. Avg. treating rate 21 BPM. Washed well out and put back on pump 12-31-67.

RECEIVED

AUG 27 1968

D. C. C.
ARTESIA. OFFICERECEIVED
AUG 27 1968
U. S. G. S.
ARTESIA. OFFICE

18. I hereby certify that the foregoing is true and correct

SIGNED

D. H. LortonTITLE **District Superintendent**

DATE

(This space for Federal or State office use)

TITLE

DATE

APPROVED
AUG 26 1968**R. L. BLUMMAN**

ACTING DISTRICT ENGINEER

*See Instructions on Reverse Side

Instructions

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UNITED STATES
DEPARTMENT OF THE INTERIOR
Geological Survey
P. O. Drawer U
Artesia, New Mexico 88210

Rec'd.
1 copy

April 17, 1968
Re: Oil and Gas Lease
LC 028992(b)

Anadarko Production company
Post Office Box 116
Loco Hills, New Mexico 88255

Gentlemen:

We have not yet received the reports checked below pertaining to
your well No. 2-Grayburg-Jackson Unit Tr. 6 located in SW 1/4 NE 1/4
sec. 27, T. 17 S., R. 30 E., Elk County, New Mexico:

Form 9-331, "Notice of Intention to _____"
(5 copies) _____

Form 9-331, "Subsequent Report of Fracture Treatment"
(5 copies) XXXX

Form 9-331, "Subsequent Report of _____"
(5 copies) _____

Form 9-330, "Log of Oil or Gas Well" covering all
drilling operations. (4 copies) _____

Geologic logs (30 CFR 221.59 requires that duplicate
copies of all electrical logs, sample logs, drilling
time logs, temperature, deviation, and other well
surveys must be filed.) (2 copies) _____

Please submit these delinquent reports to this office at your
earliest convenience.

RECEIVED

Sincerely yours,

APR 22 1968

D. C. C.
ARTESIA, OFFICE

James A. Knauf
District Engineer

This work has not been commenced and is still pending. It is expected
that it will be done within the next 60 days.

D. R. Layton
District Superintendent
Anadarko Production Company

ACTING DISTRICT

1co

ny
ti-

54

Instructions

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NEW MEXICO
OIL CONSERVATION COMMISSION

TENTH & DALLAS STREETS
ARTESIA, NEW MEXICO

June, 1966

No. A 12

SUPPLEMENT TO THE OIL PRORATION SCHEDULE

DATE 6/1/66

PURPOSE: ALLOWABLE REVISION (2ND MONTH) (WATERFLOOD)

Effective 6/1/66, the allowable of the following
Anadarko Production Company wells in the pool listed
below are hereby revised as indicated.

Grayburg Jackson Pool

G.J. Unit Tr.6 #2,5-G, 27-17-30, increased to 180 bbls daily
or 5400 bbls for the month.

G.J. Unit Tr.7B #2-I, 27-17-30, increased to 290 bbls daily or
8700 bbls for the month.

G.J. Unit Tr.9 #2-A, 26-17-30, increased to 50 bbls daily or
1500 bbls for the month.

MLA/jw

Anadarko Prod. Co.

TNM

OIL CONSERVATION COMMISSION

M. C. Armstrong
SUPERVISOR, DISTRICT NO. 2

EXTRA COPY

NEW MEXICO
OIL CONSERVATION COMMISSION

TENTH & DALLAS STREETS
ARTESIA, NEW MEXICO

May, 1966

No. A 49

SUPPLEMENT TO THE OIL PRORATION SCHEDULE

DATE 5/31/66

PURPOSE: ALLOWABLE REVISION (WATERFLOOD)

Effective 5/1/66, the allowable of the following

Anadarko Production Company wells in the pool listed

below are hereby revised as indicated.

Grayburg Jackson Pool

G.J. Unit Tr.6 #2.5-G, 27-17-30, increased to 180 bbls daily or 5580 bbls for the month.

G.J. Unit Tr.7B #2-I, 27-17-30, increased to 290 bbls daily or 8990 bbls for the month.

G.J. Unit Tr.9 #2-A, 26-17-30, increased to 50 bbls daily or 1550 bbls for the month.

MLA/jw

Anadarko Prod. Co.,

TMM

OIL CONSERVATION COMMISSION


SUPERVISOR, DISTRICT NO. 2

EXTRA COPY

NUMBER OF COPIES RECEIVED 5	
DISTRIBUTION	
SANTA FE	/
FILE	/
U.S.G.S.	/
LAND OFFICE	/
TRANSPORTER	/
OIL	/
GAS	/
PRODUCTION OFFICE	/
OPERATOR	/

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 ANADARKO PRODUCTION COMPANY ✓		Lease GRAYBURG-JACKSON UNIT (R-2323) TRACT 6		Well No. 2
Unit Letter G	Section 27	Township 17S	Range 30E	County EDDY
Pool GRAYBURG-JACKSON			Kind of Lease (State, Fed, Fee) FEDERAL	
If well produces oil or condensate give location of tanks		Unit Letter B	Section 27	Township 17S
			Range 30E	
Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/> TEXAS-NEW MEXICO PIPE LINE COMPANY		Address (give address to which approved copy of this form is to be sent) Box 1510, MIDLAND, TEXAS		
Is Gas Actually Connected? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>				
Authorized transporter of casing head gas <input checked="" type="checkbox"/> or dry gas <input type="checkbox"/> PHILLIPS PETROLEUM COMPANY		Date Connected	Address (give address to which approved copy of this form is to be sent) BARTLESVILLE, OKLAHOMA	

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 Ownership ☒
 Change in Transporter (check one) Other (explain below)
 Oil ☐ Dry Gas ☐
 Casing head gas . ☐ Condensate.. ☐

RECEIVED

AUG 6 1965

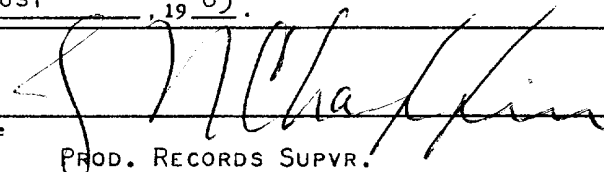
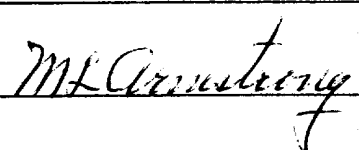
O. C. C.
ARTESIA OFFICE

Remarks

PURCHASED BY ANADARKO; OPERATIONS ASSUMED EFFECTIVE AUGUST 1, 1965.
From Ambassador Oil Corp.

The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.

Executed this the 2ND day of AUGUST, 19 65.

OIL CONSERVATION COMMISSION		By 
Approved by 	Title PROD. RECORDS SUPVR.	
Title OIL AND GAS INSPECTOR	Company ANADARKO PRODUCTION COMPANY	
Date AUG 11 1965	Address P. O. Box 9338 9317 FORT WORTH, TEXAS 76107	

(File the original and 4 copies with the appropriate district office)

CERTIFICATE OF COMPLIANCE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Grayburg-Jackson Unit (B-2333)

Company or Operator AMBASSADOR OIL CORPORATION Lease Tract 6

Well No. 2 Unit Letter G S 27 T 17S R 30E Pool Grayburg-Jackson

County Eddy Kind of Lease (State, Fed. or Patented) Federal

If well produces oil or condensate, give location of tanks: Unit B S 27 T 17S R 30E

Authorized Transporter of Oil or Condensate Texas - New Mexico Pipe Line Company

Address Box 1510, Midland, Texas
(Give address to which approved copy of this form is to be sent)

Authorized Transporter of Gas Phillips Petroleum Company

Address Bartlesville, Oklahoma
(Give address to which approved copy of this form is to be sent)

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

RECEIVED
MAY 16 1963

O. C. C.
ARTEZIA, OFFICE

Reasons for Filing: (Please check proper box) New Well ()

Change in Transporter of (Check One): Oil () Dry Gas () C'head () Condensate ()

Change in Ownership () Other Unitized (x)

Remarks: (Give explanation below)

Previously reported by Ambassador Oil Corporation as Federal "E", Well #2; committed to Grayburg-Jackson Unit effective March 1, 1963.

The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.

Executed this the 9th day of May 19 63

By [Signature]
Title Prod. Records Supvr.

Approved 19

MAY 16 1963
OIL CONSERVATION COMMISSION

Company AMBASSADOR OIL CORPORATION

By [Signature]

Address Box 9338, Fort Worth, Texas

Title OIL AND GAS INSPECTOR

NEW MEXICO OIL CONSERVATION COMMISSION
SANTA FE, NEW MEXICO

Form C-110
Revised 7/1/55
RECEIVED

(File the original and 4 copies with the appropriate district office)

OCT 31 1960

CERTIFICATE OF COMPLIANCE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

O. C. C.
ARTERIA, OFFICE

Company or Operator AMBASSADOR OIL CORPORATION Lease FEDERAL "E"

Well No. 2 Unit Letter G S 27 T 17 R 30 Pool GRAYBURG JACKSON

County EDDY Kind of Lease (State, Fed. or Patented) FED.

If well produces oil or condensate, give location of tanks: Unit S 27 T 17 R 30

Authorized Transporter of Oil or Condensate TEXAS-NEW MEXICO PIPE LINE CO.

Address P. O. Box 1510 MIDLAND, TEXAS

(Give address to which approved copy of this form is to be sent)

Authorized Transporter of Gas PHILLIPS PETROLEUM CO.

Address BARTLESVILLE, OKLAHOMA

(Give address to which approved copy of this form is to be sent)

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

Reasons for Filing: (Please check proper box) New Well ()

Change in Transporter of (Check One): Oil () Dry Gas () C'head (X) Condensate ()

Change in Ownership () Other ()

Remarks: (Give explanation below)

The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.

Executed this the 27TH day of OCTOBER 1960

By *J. N. Chaffin*
Title PROD. RECORDS SUPVR

Approved OCT 31 1960 19

OIL CONSERVATION COMMISSION

By *M. L. Armstrong*
Title OIL AND GAS INSPECTOR

Company AMBASSADOR OIL CORPORATION
Address 3101 WINTHROP
FT. WORTH, TEXAS

NEW MEXICO OIL CONSERVATION COMMISSION
SANTA FE, NEW MEXICO

Form C-110
Revised 7/1/55

(File the original and 4 copies with the appropriate district office)

CERTIFICATE OF COMPLIANCE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Company or Operator AMBASSADOR OIL CORPORATION Lease FEDERAL "E"

Well No. 2 Unit Letter G S 27 T 17 R 30 Pool GRAYBURG JACKSON

County EDDY Kind of Lease (State, Fed. or Patented) FED.

If well produces oil or condensate, give location of tanks: Unit S 27 T 17 R 30

Authorized Transporter of Oil or Condensate TEXAS NEW MEXICO PIPELINE CO.

Address P. O. Box 1510 MIDLAND, TEXAS
(Give address to which approved copy of this form is to be sent)

Authorized Transporter of Gas _____

Address _____ Date Connected _____
(Give address to which approved copy of this form is to be sent)

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

Reasons for Filing: (Please check proper box) New Well _____ ()

Change in Transporter of (Check One): Oil () Dry Gas () C'head () Condensate ()

Change in Ownership _____ () Other _____ (X)

Remarks: _____ (Give explanation below)

CHANGE IN LEASE NAME AND WELL NUMBER & DESIGNATION, PREVIOUSLY REPORTED AS
ARNOLD B, WELL #4-B

JUL 20 1959

The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.

Executed this the 16 day of JULY 19 59

By _____

Approved JUL 20 1959 19 _____

Title PRODUCTION RECORDS SUPT.

OIL CONSERVATION COMMISSION

Company AMBASSADOR OIL CORP.

By McArmstrong

Address 3101 WINTHROP

Title OIL AND GAS INSPECTOR

FT. WORTH, TEXAS

1
ON CONSERVATION

[illegible]

NEW MEXICO OIL CONSERVATION COMMISSION
SANTA FE, NEW MEXICO

Form C-110
Revised 7/1/55

(File the original and 4 copies with the appropriate district office)

CERTIFICATE OF COMPLIANCE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

JUN 12 1959

Company or Operator Ambassador Oil Corporation Lease Arnold B

Well No. 4-B Unit Letter G S 27 T 17 R 30 Pool Grayburg Jackson

County Eddy Kind of Lease (State, Fed. or Patented) Fed.

If well produces oil or condensate, give location of tanks: Unit S 27 T 17 R 30

Authorized Transporter of Oil or Condensate Texas New Mexico Pipeline Co.

Address P. O. Box 1510 Midland, Texas

(Give address to which approved copy of this form is to be sent)

Authorized Transporter of Gas _____

Address _____ Date Connected _____

(Give address to which approved copy of this form is to be sent)

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

Reasons for Filing: (Please check proper box) New Well ()

Change in Transporter of (Check One): Oil () Dry Gas () C'head () Condensate ()

Change in Ownership (x) Other ()

Remarks: (Give explanation below)

Please be advised effective June 1, 1959 that ownership has changed from Roland Rich Weelley to Ambassador Oil Corporation, 3101 Winthrop Ave., Fort Worth 7, Texas (Main Office). Field Office Box 398, Lees Hills, N.M.

The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.

Executed this the _____ day of _____ 19 _____

By J. L. Briscoe
Title Supt.

Approved JUN 11 1959 19 _____

Company Ambassador Oil Corp.

Address Box 398

OIL CONSERVATION COMMISSION
By McLarnstrong
Title OIL AND GAS INSPECTOR

Lees Hills, N.M.

OIL CONSERVATION COMMISSION

ARTESIA DISTRICT OFFICE

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NEW MEXICO OIL CONSERVATION COMMISSION
SANTA FE, NEW MEXICO

(File the original and 4 copies with the appropriate district office)

CERTIFICATE OF COMPLIANCE AND AUTHORIZATION FEB 18 1958
TO TRANSPORT OIL AND NATURAL GAS

Company or Operator Roland Rich Woolley Lease Arnold B

Well No. 4-B Unit Letter G S 27 T 17 R 30 Pool Grayburg Jackson

County Eddy Kind of Lease (State, Fed. or Patented) Fed.

If well produces oil or condensate, give location of tanks: Unit S 27 T 17 R 30

Authorized Transporter of Oil or Condensate Texas, New Mexico Pipe Line Co.

Address P. O. Box 1510 Midland, Texas
(Give address to which approved copy of this form is to be sent)

Authorized Transporter of Gas _____

Address _____
(Give address to which approved copy of this form is to be sent)

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

Reasons for Filing: (Please check proper box) New Well _____ ()

Change in Transporter of (Check One): Oil () Dry Gas () C'head () Condensate ()

Change in Ownership _____ () Other Pool Designation 1 ()

Remarks: _____
(Give explanation below)

Under the Order No. R-1079 the Premier Pool has been changed to the Grayburg Jackson Pool.

The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.

Executed this the _____ day of _____ 19 _____

By J. L. Briscoe
Title Supt.

Approved FEB 18 1958 19 _____

OIL CONSERVATION COMMISSION

By M. L. Armstrong
Title OIL AND GAS INSPECTOR

Company Roland Rich Woolley
Address Box 398 Loco Hills, N.M.

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UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

A blank sheet of graph paper with a grid pattern. The grid consists of 10 columns and 8 rows of squares. The lines are black and the background is white. There is no text or other markings on the page.

LOCATED WELL CORRECTLY

The summary on this page is for the condition of the well at above date.

.....; zahlreich benannt; zahlreich benannt

OIL OR GAS SANDS OR ZONES

Q. And you agree that?

No. 1, from _____ to _____
No. 2, from _____ to _____
No. 3, from _____ to _____
No. 4, from _____ to _____
No. 5, from _____ to _____
No. 6, from _____ to _____

IMPORTANT WATER SANDS

..... 0%

..... 0%

CREATING RECORD

[illegible]

It is of the greatest importance to have a complete history of the well. Please state in detail the dates of redrilling, together with the reasons for the work and its results. If there were any changes made in the casing, state fully, and if any casing was "sidedracked," or left in the well, give its size and location. If the well has been dynamited, give date, size, position, and number of shots. If plugs or bridges were put in to test for water, state kind of material used, position, and results of pumping or bailing.

HISTORY OF OIL OR GAS WELL

U. S. GOVERNMENT PRINTING OFFICE

FROM -		TO -		TOTAL FEET		FORMATION	
3160	3166	3166	3175	9	Oil sand		
3166	3175	3175	3185	10	Oil sand		
3175	3185	3185	3195	10	Gray lime		
3185	3195						
3195							

FORMATION RECORD

FORMATION	THICKNESS	DEPTH	REMARKS
Oil sand	9		
Lime	9		
Oil sand	10		
Gray lime	10		

EMPLOYEES

Driller _____

Driller _____

DATES

Put to producing _____

Produced _____

Produced _____

TOOLS USED

SHOOTING RECORD

DATE	DEPTH	REMARKS

STOPS AND ADAPTERS

ROD AND CEMENTING RECORD

DATE	DEPTH	REMARKS

GENERAL NOTES

ORIGINAL INFORMATION RECORD—Continued