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NEW MEXICO OIL CONSERVATION COMMISSION

FEB 17 1970

**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"/>	Fee <input checked="" 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"/> GAS WELL <input type="checkbox"/> OTHER- <input type="checkbox"/>	7. Unit Agreement Name <b>Atoka San Andres Unit</b>
2. Name of Operator <b>Kewanee Oil Company</b>	8. Farm or Lease Name <b>Tract 8</b>
3. Address of Operator <b>P. O. Box 3786, Odessa, Texas 79760</b>	9. Well No. <b>1</b>
4. Location of Well UNIT LETTER <b>D</b> , <b>990</b> FEET FROM THE <b>North</b> LINE AND <b>330</b> FEET FROM THE <b>West</b> LINE, SECTION <b>12</b> TOWNSHIP <b>18S</b> RANGE <b>26E</b> NMPM.	10. Field and Pool, or Wildcat <b>Atoka San Andres</b>
15. Elevation (Show whether DF, RT, GR, etc.) <b>3298' GR</b>	12. County <b>Eddy</b>

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"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input type="checkbox"/>	OTHER <b>Converting to Water Injection Well</b> <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.

Pulled rods and tubing. Cleaned out to 1747' GR. Dumped 500 gallons diesel down casing followed by 250 gallons 15% regular acid. Ran 5-1/2" tension packer on 2-3/8" tubing coated internally with plastic. Loaded annulus with inhibited water and set packer at 1662.54' GR. Started water injection 1-31-70. Well accepting 214 barrels water per day at 50 psi.

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

SIGNED <u>E. F. Stuckman</u>	TITLE <b>Division Superintendent</b>	DATE <b>2-12-70</b>
APPROVED BY <u>J. P. Starnes</u>	TITLE <b>OIL AND GAS INSPECTOR</b>	DATE <b>FEB 17 1970</b>
CONDITIONS OF APPROVAL, IF ANY:		

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NEW MEXICO OIL CONSERVATION COMMISSION

O. O. O.  
ARTEBIA, OFFICE

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

5a. Indicate Type of Lease	
State <input type="checkbox"/>	Fee <input checked="" 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"/> GAS WELL <input type="checkbox"/> OTHER- <input type="checkbox"/>	7. Unit Agreement Name <b>Atoka San Andres Unit</b>
2. Name of Operator <b>Kewanee Oil Company</b> ✓	8. Farm or Lease Name <b>Tract 8</b>
3. Address of Operator <b>P. O. Box 3786, Odessa, Texas 79760</b>	9. Well No. <b>1</b>
4. Location of Well UNIT LETTER <b>D</b> , <b>990</b> FEET FROM THE <b>North</b> LINE AND <b>330</b> FEET FROM THE <b>West</b> LINE, SECTION <b>12</b> TOWNSHIP <b>18S</b> RANGE <b>26E</b> NMPM.	10. Field and Pool, or Wildcat <b>Atoka San Andres</b>
15. Elevation (Show whether DF, RT, GR, etc.) <b>3298' GR</b>	12. County <b>Eddy</b>

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 <b>Convert to Water Injection Well</b> <input checked="" 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 JOBS <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.

Pull rods and tubing, clean out to TD of 1750' and wash hole down with 250 gallons acid. Set tension packer at approximately 1650' on 2-3/8" O. D. tubing coated internally with plastic and load annulus with inhibited water. Start fresh water injection down tubing at rate of about 200 BPD. Injection will commence on or about 1-1-70.

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

SIGNED *E. F. Sturdevant* TITLE Division Superintendent DATE 11-18-69

APPROVED BY *W. A. Gressett* TITLE OIL AND GAS INSPECTOR DATE NOV 21 1969

CONDITIONS OF APPROVAL, IF ANY:

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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

JUN 26 1969

U. C. C.

ARTESIA OFFICE

I. Operator **Kewanee Oil Company**

Address **P. O. Box 2239, Tulsa, Oklahoma 74101**

Reason(s) for filing (Check proper box)

New Well	<input type="checkbox"/>	Change in Transporter of:	
Recompletion	<input type="checkbox"/>	Oil	<input checked="" type="checkbox"/>
Change in Ownership	<input type="checkbox"/>	Casinghead Gas	<input type="checkbox"/>
		Dry Gas	<input type="checkbox"/>
		Condensate	<input type="checkbox"/>

Other (Please explain)

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
<b>Atoka San Andres Unit Tr.8</b>	<b>1</b>	<b>Atoka (SA)</b>	State, Federal or Fee <b>Fee</b>	
Location				
Unit Letter <b>D</b>	<b>330</b>	Feet From The <b>West</b> Line and <b>990</b>	Feet From The <b>North</b>	
Line of Section <b>12</b>	Township <b>18S</b>	Range <b>26E</b>	NMPM, <b>Eddy</b>	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"/>	Address (Give address to which approved copy of this form is to be sent)	
<b>Navajo Refining Company, Pipe Line Division</b>	<b>North Freeman Avenue, Artesia, New Mexico 88210</b>	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
<b>Phillips Petroleum Company</b>	<b>P. O. Box 6666, Odessa, Texas 79760</b>	
If well produces oil or liquids, give location of tanks.	Unit <b>K</b>	Sec. <b>12</b>
	Twp. <b>18S</b>	Rge. <b>26E</b>
	Is gas actually connected? <b>Yes</b>	When <b>11-25-59</b>

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.



M. M. Tharp

Chief Clerk

June 24, 1969

(Date)

OIL CONSERVATION COMMISSION

APPROVED **JUN 27 1969**, 19  
BY **W. A. Gressett**  
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.