ین میں میں ا						-	_		()
NO, OF COPIES RECEIVED	6				ുളം 77ആം നെ മ			Fotm C - Revised	
DISTRIBUTION			REC	CIV	فيعا حقا		1	5a. Indicate	Type of Lease
SANTA FE		NEW M	EXICO OIL-C	ONSERVAT	ION CO	MMISSION	10100	State	Fee X
FILE	<u> </u>	ELL COMPLE	TION OR RE	COMPLET	19N RE	EPORT A	ND LUG	5, State Oll	& Gas Lease No.
U.S.G.S.	12		•						
LAND OFFICE	-+		Г	و میرید. مطلب وقت در م			1	<i>IIIIII</i>	
OPERATOR			د. ه. ۲۰۲۶	eela, DFF	162 ['] 201				
BUT FALL OF Y	ALLNET							7. Unit Agr	eement Name
Id. TYPE OF WELL	- 01L		п	–					
b. TYPE OF COMPLETI	OIL WELL ON		DRY L	отн	ER		<u> </u>	8. Farm or	Lease Name
NEW INF WORK			DIFF.	отн	ER			Day	ton "FI"
WELL (A.) OVER 2. Namesof Operator	L DEEPEN							9. Well No.	,
Vator Pet	roleum Co	progratio	n.					10 Field a	2 md Pool, or Wildcat
Yates Pet: 3. Address of Operator								1	
207 South				8821	0			Atoka	San Andres
4. Location of Well								()////	
						220			
UNIT LETTER A	LOCATED	990 FEET FR	ом тне <u>NC</u>	NTTD LINE	AND	330	FEET FROM	12. County	·····XHHHHH
	_		•		/////	HXIII	HIII	Eddy	
THE East HLINE OF SE	<u>. 28 т</u> и	rF. 185 RGE eached 17. Date	Compl (Ready)	to Prod. 1	18. Elevo	tions (DF.	RKB, RT, 0		, Elev. Cashinghead
		1				363' GI		•	
9-7-76	9-12-	76 Back T.D.	9-18-76 22. If Mul	ltiple Compl.		23. Interva	ls , Rota	ry Tools	Cable Tools
		776'	Many	•		Drilled	-⇒ ¦ 0-	-1880	
1880' DTD 24. Producing Interval(s),			, Name			<u>1</u>			25. Was Directional Survey Made
24.1.00000003									
	1564-168	8' San An	dres						NO
26. Type Electric and Oi		•						27.	Was Well Cored
	Ga	nma Ray N	eutron						NO
28.		CAS	ING RECORD (Report all st	rings set				AMOUNT PULLED
CASING SIZE	WEIGHT LB.			HOLE SIZE			NTING RE		AMOUNTYOLLED
7"	23#		11'	<u>9½"</u>			sack		
4½ & 5½"	9.5 & 1	5.5 <u>#17</u>	76'	61/4"		1/3	sack	5	
			I			30.		TUBING RE	CORD
29.		INER RECORD	SACKS CEME		EEN	SIZE		EPTH SET	PACKER SET
SIZE	тор	BOTTOM	SACKS CLME			2-3/	8"	1543'	
31. Perforation Record (Interval. size and	l number)	_ <u></u>	32.	AC	ID, SHOT, F	RACTURE	, CEMENT S	SQUEEZE, ETC.
st, i chieranni hocora ji					PTH IN				KIND MATERIAL USED
1564-1688	s' w/25 .	50" shots	5	156	54-16	88'	6000	<u>0g gel</u>	led KCL wtr,
	•						1000		nd, 70000#
				·			20-4	<u>U & 30(</u>	000# 100 mesh.
				PODUCTIC					
33.		action Method (Flo		RODUCTION		ype pump)		Well Sto	itus (Prod. or Shut-in)
Date First Production	Produ			F 2F 2E = 0.				p.	roducing
9-18-76	Hours Tested	<u>F'1</u> Choke Size	owing Prod'n. For	011 — E	bl.	Gas - MC	F W	ater – Bbl.	Gas – Oil Ratio
Date of Test 9-20-76	24		Test Period	1	5.1	7	7.0	14.0	1670/1
Flow Tubing Press.	Casing Pressu	re Calculated 2	4- 011 - Bbl.		us – MCF	- γ	later – Bbl	. (Dil Gravity – AP1 (Corr.)
20#		Hour Rate	▶ 46	.1	77.	0	14.0)	39.3
34. Disposition of Gas (Sold, used for fu	el, vented, etc.)		┈╩┷╧╸╴╶┑╼╍╴┠╶╌╸	لغيني		Т	est Witnesse	
Sol						-	l	Jerry	Pendley
35, List of Attachments						_			
		Dev	iation S	Survey	Encl	osed		adag and he	lief
36. I hereby certify that	the information	shown on both sid	les of this form	is true and a	omplete	to the dest o	η <i>my κ</i> n owi	euge und vei	···· ,·
	/	<i>a</i>] .		· ·			rotar	7	9-28-76
SIGNED	rectine	Janle	UZA-HTLE	Geol	ogic	ar Sec	Letar,	DATE	

INSTRUCTIONS

This form is to be filed 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 filed in quintuplicate 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

т.	Anhy	T.	Canyon	Т.	Ojo Alamo	T.	Penn. "B"
т.	Salt	Т.	Strawn	Т.	Kirtland-Fruitland	T.	Penn. "C"
В.	Salt	T .	Atoka	T.	Pictured Cliffs	Т.	Penn. "D"
Т.	Yates	Т.	Miss	Т.	Cliff House	T.	Leadville
т.	7 Rivers	Т.	Devonian	T .:	Menefee	T.	Madison
Т.	Queen	Т.	Silurian	Т.	Point Lookout	T.	Elbert
Т.	Grayburg	T.	Montoya	Т.	Mancos	T.	McCracken
Т.	San Andres898	Т.	Simpson	Т.	Gallup	т.	Ignacio Qtzte
т.	Glorieta	т.	McKee	Bas	se Greenhorn	T.	Granite
Т.	Paddock	Τ.	Ellenburger	Т.	Dakota	Т.	
T. .	Blinebry	Т.	Gr. Wash	T.	Morrison	T.	
T.	Tubb	Т.	Granite	Т.	Todilto	T.	
Т.	Drinkard	T.	Delaware Sand	Т.	Entrada	Т.	
т.	Abo	T.	Bone Springs	Т.	Wingate	T.	
					Chinle		
					Permian		
					Penn. "A"		

FORMATION RECORD (Attach additional sheets if necessary)

From	To	Thickness in Feet	Formation	From	To	Thickness in Feet	Formation	
0 87 230 682	87 230 682 950	87 143 452 268	Gravel & Red Bed Red Bed & Shells Red bed & sand				• • • •	
950 1805	1805 ⁻ 1880	855 75						
			÷				e.	
o								. •
							• • • • •	, ,
			u n o					
		C.	o e .					
							· · ·	te de
								2. 2
•		•			<u> </u>			

4 Lin Can J	# 2 , Mar. 1 2000		SAS DIVISION		6. RRC District
		INATION R unt Br Filed With Each Co	EPORT mpletion Report.)		7. RRC Lease Number (Oil completions oil
1. FIELD NAME (as p	er RRC Records or Wildes		SE NAME	·····	8. Well Number
			Dayton "FI" #	‡2	
ALOKA SC 3. OPERATOR	an Andres				9. RRC Identification Number
-	troleum Corpo	ration	R	ECEIVEL	(Gas completions o
	h 4th Street	- Artesia, NI	4 88210	SEP 28 1976	10. County
<u>28–185–</u> 2	26E 990 FNL			<u> </u>	
		RECORD OF	INCLINATION	ARTESIA, OFFICE	
	<u></u>				
*11. Measured Depth (feet)	12. Course Length (Hundreds of feet)	 13. Angle of Inclination (Degrees) 	14. Displacement per Hundred Feet (Sine of Angle X100)	15, Course Displacement (feet)	16. Accumulative Displacement (feet)
500	5,00	1/2	. 87	4.35	4.35
972.	4.72		1.75	8.26	12.61
1211 .	2.39	:=14	1,31	3.13	15.74
1605	3.74	1	1.75	6.89	22.63
1880	2,75	2	3.49	9-59	32.22
<u> </u>					
	•				
. <u></u>					
	-				
	•				
		e reverse side of this for			
17. Is any informat	ion shown on the rever	se side of this form?	🗋 yes 🖾 T	10	
18. Accumulative t	otal displacement of w	ell bore at total depth o	1 <u>/897</u>	_ feet =?	
*19. Inclination mea	asurements were made i	in - [] Tubing	Casing	Open hole	Drill Pipe
20. Distance from	surface location of wel	1 to the nearest lease li	ine		feet
21. Minimum distan	nce to lease line as pre	escribed by field rules _			feet
.22. Was the subject	t well at any time inter	ntionally deviated from	the vertical in any man	ner whatsoever?	
. (If the answer	to the sbove question i	s "yes", attach writter	a explanation of the circ	cumstances.)	
			OPERATOR CERTIN	FICATION	
INCLINATION DAT	enalties prescribed in Att	icle 6036c, R.C.S., that I	am I declare under p	enalties prescribed in Art his certification, that I ha	icle 6036c, R.C.S., that
authorized to make t	his certification, that I he facts placed on both side	ave personal knowledge of a of this form and that auc	the information presented	d in this report and that	all data presented on bot
data and facts are tr	ete to the best of my kno information presented her				
This cartification of			except inclination de on this form.	ata as indicated by asteri	sks (*) by the item numb
This certification consumbers on this form	n/ 11/ -				
This certification co			Signature of Authoriz	zed Representative	
This certification connumbers on this form	4 Cherner	-v			
This certification co		s Sea This.			
This certification consumbers on this form	10. (Litter string) Title (type or print)	is <u>SecTries</u>		Title (type or print)	
This certification consumbers on this form Harris and the form Signature of Authori JATIMES Nome of Person and Barrie (10. Citristic Title (type or print) Deilling Ce	2		Title (type or print)	
This certification consumbers on this form ACTICAL Signature of Authori Nome of Person and Benefic	10. (Littering) Title (type or print) Derilling (e	2	Operator		
This certification consumbers on this form Harris and the form Signature of Authori JATIMES Nome of Person and Barrie (10. (Littering) Title (type or print) Derilling (e	2	Name of Person and Operator		
This certification consumbers on this form aumbers on this form aumbers of Authori Signature of Authori Norme of Person and Beneof Name of Company	10. (Litterstrie Title (type or print) Deilling (c 5 682-5 ode	2	Operator		
This certification consumers on this form	10. (Litterstrie Title (type or print) Deilling (c 5 682-5 ode	-2.75	Operator	Code	