

NEW MEXICO OIL CONSERVATION COMMISSION WELL LOCATION AND ACREAGE DEDICATION PLAT

Form O
Supersedes
Effective

All distances must be from the outer boundaries of the Section

HNG Oil Co.			Lease Woods ⁹ 10 Com. 2		Well No. 2
Tract Letter 8	Section 9	Township 24 South	Range 28 East	County Eddy	
Actual Surface Location of Well: 990 feet from the North line and 1980 feet from the East line					
Ground Level Elev. 2997.1	Producing Formation Morrow	Pool Malaga West (Morrow)		Dedicated Acreage:	

1. Outline the acreage dedicated to the subject well by colored pencil or hatchure marks on the plat below.
2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to well interest and royalty).
3. If more than one lease of different ownership is dedicated to the well, have the interests of all owners been consolidated by communitization, unitization, force-pooling, etc?

☒ Yes ☐ No If answer is "yes," type of consolidation Force-Pooling

If answer is "no," list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if necessary.)

No allowable will be assigned to the well until all interests have been consolidated (by communitization, unitization, force-pooling, or otherwise) or until a non-standard unit, eliminating such interests, has been approved by the Commission.

CERTIFICATION

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

Dan C. Jones Dan C. Jones

Sr. Regulatory Clerk

HNG Oil Company

4/24/78

Date

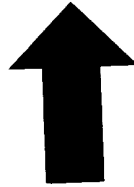
I hereby certify that the well location shown on this plat was plotted from the notes of actual surveys made by me under my supervision, and that the same is true and correct to the best of my knowledge and belief.

4/12/78

Date Surveyed

Registered Professional Engineer and Land Surveyor

Ronald D. E. D.



LTR



Job separation sheet

DISTRIBUTION	
ANTA FE	✓
ILE	✓
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	✓
PRORATION OFFICE	

NEW MEXICO OIL CONSERVATION COM
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-11
Effective 1-1-85

FEB 02 '89

I. Operator
Quinoco Petroleum, Inc. ✓
Address
Stanford Place 3, 4582 South Ulster St Parkway, Ste 1700, Denver, CO 80237
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)
EFFECTIVE 1/1/89
If change of ownership give name and address of previous owner
Enron Oil & Gas Company, Box 2267, Midland, Texas 79702

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, including Formation	Kind of Lease	Lease No.
Woods 9 Com.	2	Malaga West Atoka	State, Federal or Fee	-
Location	Unit Letter	Feet From The	Line and	Feet From The
	B	990	north	1980 east
Line of Section	Township	Range	NMPM,	County
9	24S	28E	Eddy	

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
None						
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
El Paso Natural Gas Company	Box 1492, El Paso, Texas 79978					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
					Yes	10/4/80

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'tv.	Diff. Res'tv.
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-Bble.	Water-Bble.	Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bble. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, 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.

Holly Richardson
(Signature)
Holly Richardson
Production Technician
(Title)

1/23/89

(Date)

OIL CONSERVATION COMMISSION

APPROVED FEB 13 1989
BY Original Signed By
Mike Williams
TITLE

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 deviated 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 multiple



LTR



Job separation sheet

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

NO. 011-6
SUBMIT IN TRIPLICATE
Dittoed, Inducted, or to
Artesia, N. M. 88010

Form approved
Budget Bureau No. 1004-C135
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.

SCR 26

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 ☐ GAS WELL ☒ OTHER

2. NAME OF OPERATOR

Quinoco Petroleum, Inc.

3. ADDRESS OF OPERATOR

P.O. Box 378111, Denver, Colorado 80237

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

990' FNL & 1989' FEL

14. PERMIT NO.

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

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Woods 9 Com

9. WELL NO.

2

10. FIELD AND POOL OR WILDCAT

West Malaga (Atoka)

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

Sec. 9-T24S-R28E

12. COUNTY OR PARISH

Eddy

13. STATE

NM

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 COMPLETION

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.)*

Operator changed from Enron Oil and Gas Company effective 1/1/89.

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

SIGNED

Kelly S. Richardson

TITLE Production Technician

DATE 8/21/89

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

*See Instructions on Reverse Side

Instructions to make to any department or agency of the