

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

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

DISTRICT III  
1000 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  
RECEIVED  
JUL 01 1991  
O. C. D.  
ARTESIA OFFICE  
File

REQUEST FOR ALLOWABLE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS

Operator RB Operating Company ✓		Well API No.
Address 2412 N. Grandview, Suite 201, Odessa, Texas 79761		
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"/> Effective July 1, 1991	
Recompletion <input type="checkbox"/>	Oil <input checked="" type="checkbox"/> Dry Gas <input type="checkbox"/>	
Change in Operator <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	
If change of operator give name and address of previous operator		

II. DESCRIPTION OF WELL AND LEASE				
Lease Name South Culebra Bluff	Well No. 3	Pool Name, Including Formation E. Loving (Delaware)	Kind of Lease State, Federal or Fee	Lease No.
Location Unit Letter G : 2050 Feet From The North Line and 1950 Feet From The East Line Section 23 Township 23S Range 28E , 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"/>		Address (Give address to which approved copy of this form is to be sent)				
Amoco Production Company		P.O. Box 591, Tulsa, OK 74102				
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)				
El Paso Natural Gas Company		P.O. Box 1492, El Paso, Texas 79978				
If well produces oil or liquids, give location of tanks.	Unit G	Sec. 23	Twp. 23S	Rge. 28E	Is gas actually connected? Yes	When? 4/11/90
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 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
Testing Method (puot, 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 F. D. Schoch	Area Manager
Printed Name 6/27/91	Title (915) 362-6302
Date	Telephone No.

OIL CONSERVATION DIVISION JUL 01 1991	
Date Approved	
By	ORIGINAL SIGNED BY MIKE WILLIAMS SUPERVISOR, DISTRICT II
Title	

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 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.

Artesia, New Mexico

DATE: Sept. 4, 1990

R + B Oper. Co.  
2412 N. Grandview, Ste 201  
Odessa, Tx 79761

Re: Wells placed in pool

Gentlemen:

As the result of Division Order D-9241 the following described well (s) ~~has~~ have) been placed in the pool ~~(s)~~ shown below. This change in nomenclature has been made in our files. Please change your records to reflect the proper pool name. All subsequent reports must show this nomenclature until further notice.

East Loving - Delaware Pool

South Culebra Bluff #3	G-23-23-28✓
South Culebra Bluff #4	A-23-23-28
Carrasco 14 #2	B-14-23-28
South Culebra Bluff #11	B-23-23-28

Transporters are advised, by copy of this letter, to change their records to reflect the pool name as established by this order, effective August 1, 1990.

Sincerely,

*Darrell Moore*

Darrell Moore  
Geologist

cc: Each transporter Permian El Paso  
Mae  
PI  
Well file  
Joe Chism  
SANTA FE

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-116  
Revised 1/1/89

**OIL CONSERVATION DIVISION**

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

RECEIVED

JUN 20 '90

Submit 2 copies to Appropriate  
District Office.

DISTRICT I

P.O. Box 1980, Hobbs, NM 88240

DISTRICT II

P.O. Drawer DD, Artesia, NM 88210

DISTRICT III

1000 Rio Brazos Rd., Aztec, NM 87410

**GAS - OIL RATIO TEST**

Operator RB Operating Company		Pool E. Loving (Delaware)		County Eddy		OFFICE									
Address 2412 N. Grandveiw, Suite 201, Odessa, Texas 79761		TYPE OF TEST - (X)		Scheduled <input type="checkbox"/>		Completion <input checked="" type="checkbox"/> Special <input type="checkbox"/>									
LEASE NAME	WELL NO.	LOCATION			DATE OF TEST	CHOKE SIZE	TBG. PRESS.	DAILY ALLOW-ABLE	LENGTH OF TEST HOURS	PROD. DURING TEST			GAS - OIL RATIO CU FT/BBL		
		U	S	T						R	WATER BBLs.	GRAV. OIL		OIL BBLs.	GAS MCF.
South Culebra Bluff	3	G	23	23	28	6/7/90	F	12/64"	550	24	50	45	110	95	864

**Instructions:**

During gas-oil ratio test, each well shall be produced at a rate not exceeding the top unit allowable for the pool in which well is located by more than 25 percent. Operator is encouraged to take advantage of this 25 percent tolerance in order that well can be assigned increased allowables when authorized by the Division.

Gas volumes must be reported in MCF measured at a pressure base of 15.025 psia and a temperature of 60° F. Specific gravity base will be 0.60.

Report casing pressure in lieu of tubing pressure for any well producing through casing.

(See Rule 301, Rule 1116 & appropriate pool rules.)

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

Signature

F. D. Schoch, Area Manager

Printed name and title

6/18/90

(915) 362-6302

Date

Telephone No.

Submit to Appropriate  
District Office  
State Lease - 6 copies  
Fee Lease - 5 copies  
DISTRICT I  
P.O. Box 1980, Hobbs, NM 88240

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

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

State of New Mexico  
Energy, Minerals and Natural Resources Department

**OIL CONSERVATION DIVISION**

P.O. Box 208890  
Santa Fe, New Mexico 87504-2088

Form C-105  
Revised 1-1-89

RECEIVED

C. C. D.  
ARTESIA, OFFICE

WELL API NO.

30-015-22700

5. Indicate Type of Lease

STATE ☐

FEE ☒

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name

South Culebra Bluff Unit

8. Well No.

3

9. Pool name or Wildcat

East Loving (Delaware)

**WELL COMPLETION OR RECOMPLETION REPORT AND LOG**

1a. Type of Well:

OIL WELL ☒ GAS WELL ☐ DRY ☐ OTHER ☐

b. Type of Completion:

NEW WELL ☐ WORK OVER ☐ DEEPEN ☐ PLUG BACK ☒ DIFF. RESVR ☐ OTHER ☐

2. Name of Operator

RB Operating Company

3. Address of Operator

2412 N. Grandview, Suite 201, Odessa, Texas 79761

4. Well Location

Unit Letter G : 2050 Feet From The North Line and 1950 Feet From The East Line

Section 23 Township 23S Range 28E NMPM Eddy County

10. Date Spudded

1-21-79

11. Date T.D. Reached

2-19-79

12. Date Compl. (Ready to Prod.)

4/11/90

13. Elevations (DF & RKB, RT, GR, etc.)

3016 KB

14. Elev. Casinghead

3000

15. Total Depth

8000

16. Plug Back T.D.

6300

17. If Multiple Compl. How Many Zones?

-

18. Intervals Drilled By

Rotary Tools

0-8000

Cable Tools

--

19. Producing Interval(s), of this completion - Top, Bottom, Name  
6190-6226'

20. Was Directional Survey Made  
No

21. Type Electric and Other Logs Run  
Recompletion

22. Was Well Cored  
No

**CASING RECORD (Report all strings set in well)**

CASING SIZE	WEIGHT LB/FT.	DEPTH SET	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
13-3/8	48	485	17-1/2	625 sx	
7-5/8	26.4#	6345	11	2690 TLW+200 sx	

**24. LINER RECORD**

SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN

**25. TUBING RECORD**

SIZE	DEPTH SET	PACKER SET
2-7/8"	6122	6122

26. Perforation record (interval, size, and number)

6190-6202' )  
6214-6226' ) 48 holes .41" holes

27. ACID, SHOT, FRACTURE, CEMENT, SQUEEZE, ETC.

DEPTH INTERVAL	AMOUNT AND KIND MATERIAL USED
6190-6226	Acidized w/ 1000 gals 10% HCL
	& fraced w/ 18000 gals &
	51000# Sand

**28. PRODUCTION**

Date First Production 4/10/90	Production Method (Flowing, gas lift, pumping - Size and type pump) Flowing					Well Status (Prod. or Shut-in) Producing	
Date of Test 4/11/90	Hours Tested 24	Choke Size 12/64	Prod'n For Test Period	Oil - Bbl. 92	Gas - MCF 178	Water - Bbl. 52	Gas - Oil Ratio 1935
Flow Tubing Press. 650	Casing Pressure 0	Calculated 24-Hour Rate	Oil - Bbl. 92	Gas - MCF 178	Water - Bbl. 52	Oil Gravity - API - (Corr.) 45	

29. Disposition of Gas (Sold, used for fuel, vented, etc.)  
Sold

Test Witnessed By

30. List Attachments

None - recompletion

31. I hereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief

*David H. ...*

Printed ...

OIL CONSERVATION DIVISION

Drawer DD Artesia, N.M.

DISTRICT OFFICE II

January thru July 1990

NO. 2125 N

**SUPPLEMENT TO THE OIL PRORATION SCHEDULE**

DATE May 31, 1990

PURPOSE ALLOWABLE ASSIGNMENT - NEW OIL

Effective May 1, 1990 an allowable for a marginal (4) well is hereby assigned to RB Operating Co., South Culebra Bluff #3-C-23-23-29 in the East Loving Delaware Pool.

L - P

JP - P

MM/rr

RL Co. Co.

END

LJN

OIL CONSERVATION DIVISION

  
DISTRICT SUPERVISOR



clerk  
bT  
bT  
DP

OIL CONSERVATION DIVISION

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS

Operator RB Operating Company		Well API No.
Address 2412 N. Grandview, Suite 201, Odessa, Texas 79761		
Reason(s) for Filing (Check proper box) New Well <input type="checkbox"/> Change in Transporter of: Recompletion <input checked="" type="checkbox"/> Oil <input checked="" type="checkbox"/> Dry Gas <input type="checkbox"/> Change in Operator <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>		
If change of operator give name and address of previous operator		

I. DESCRIPTION OF WELL AND LEASE

Lease Name South Culebra Bluff	Well No. 3	Pool Name, including Formation E. Loving (Delaware)	Kind of Lease State, Federal or Fee	Lease No.
Location Unit Letter G : 2050 Feet From The North Line and 1950 Feet From The East Line Section 23 Township 23S Range 28E, NMPM, Eddy 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"/> The Permian Corporation	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1183 Houston, Texas 77001						
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> El Paso Natural Gas Company	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1492 El Paso, Texas 79978						
If well produces oil or liquids, give location of tanks.	Unit G	Sec. 23	Twp. 23S	Rge. 28E	Is gas actually connected? Yes	When? 4/11/90	RECEIVED
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 <input checked="" type="checkbox"/>	Gas Well <input type="checkbox"/>	New Well <input type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input checked="" type="checkbox"/>	Same Res'v <input type="checkbox"/>	Diff Res'v <input type="checkbox"/>
Date Spudded	Date Compl. Ready to Prod. 4/11/90		Total Depth 8000'		P.B.T.D. 6300'		ARTESIA OFFICE	
Elevations (DF, RKB, RT, GR, etc.) 3016. RKB	Name of Producing Formation Delaware		Top Oil/Gas Pay 6190'		Tubing Depth 6122'			
Perforations 6190 - 6202 & 6214 - 26					Depth Casing Shoe			

TUBING, CASING AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17-1/2	13-3/8	485	625
11	7-5/8	6345	3890
	2-7/8	6122	

VI. 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 Tank 4/11/90	Date of Test 5/8/90	Producing Method (Flow, pump, gas lift, etc.) Flow	
Length of Test 24	Tubing Pressure 650	Casing Pressure 0	Choke Size 12/64
Actual Prod. During Test 92	Oil - Bbls. 92	Water - Bbls. 52	Gas- MCF 178

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (prior, 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  
F.D. Schoch Area Manager  
Printed Name Title  
5/24/90 (915) 362-6302  
Date Telephone No.

OIL CONSERVATION DIVISION

Date Approved MAY 31 1990  
By ORIGINAL SIGNED BY  
MIKE WILLIAMS  
Title SUPERVISOR, DISTRICT II

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.

All sections of this form must be filled out for allowable on new and recompleted wells.

Submit 3 Copies  
to Appropriate  
District Office

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-103  
Revised 1-1-89

DISTRICT I  
P.O. Box 1980, Hobbs, NM 88240

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

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

OIL CONSERVATION DIVISION

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

MAY 31 1990

C. C. D.  
ARTESIA, OFFICE

WELL API NO.

5. Indicate Type of Lease

STATE ☐

FEE ☒

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name

South Culebra Bluff

8. Well No.

3

9. Pool name or Wildcat

E. Loving (Delaware)

1. Type of Well:

OIL  
WELL ☒

GAS  
WELL ☐

OTHER

2. Name of Operator

RB Operating Company

3. Address of Operator

2412 N. Grandview, Suite 201, Odessa, Tx. 79761

4. Well Location

Unit Letter G : 2050 Feet From The North Line and 1950 Feet From The East Line

Section 23

Township 23S

Range 28E

NMPM

Eddy

County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)

3000.6 GR

11.

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐

PLUG AND ABANDON ☐

TEMPORARILY ABANDON ☐

CHANGE PLANS ☐

PULL OR ALTER CASING ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐

ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐

PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

OTHER: Recompletion ☒

12. 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.

4/3/90 Set CIBP @ 6320' w/2 sxs cement on top, perforate 6190-6202 & 6214-26.

4/7/90 Acidized w/1000 gals. 10% acid & fraced w/18,000 gals. 30# gel & 51,000# 16/30 sand

4/10/90 Cleaned out to 6300' with coiled tubing.

4/11/90 Flow testing.

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

SIGNATURE

TITLE Area Manager

DATE 5/24/90

(915)

TYPE OR PRINT NAME F.D. Schoch

TELEPHONE NO. 362-6302

(This space for State Use)

ORIGINAL SIGNED BY

MIKE WILLIAMS

SUPERVISOR, DISTRICT II

APPROVED BY

TITLE

DATE

MAY 31 1990

CONDITIONS OF APPROVAL, IF ANY:



Submit to Appropriate  
District Office  
State Lease - 6 copies  
Fee Lease - 5 copies

State of New Mexico  
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

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

RECEIVED

Form C-101  
Revised 1-1-89

MAY - 2 90

DISTRICT I  
P.O. Box 1980, Hobbs, NM 88240

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

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

API NO. (assigned by OCD on New Wells)
5. Indicate Type of Lease <input checked="" type="checkbox"/> OFFICE
STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK					
1a. Type of Work: DRILL <input type="checkbox"/> RE-ENTER <input type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input checked="" type="checkbox"/>			7. Lease Name or Unit Agreement Name South Culebra Bluff Unit		
b. Type of Well: OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>			8. Well No. 3		
2. Name of Operator RB Operating Company			9. Pool name or Wildcat South Culebra Bluff (Delaware)		
3. Address of Operator 2412 N. Grandview, Suite 201, Odessa, Texas 79761					
4. Well Location Unit Letter G : 2050 Feet From The North Line and 1950 Feet From The East Line Section 23 Township 23S Range 28E NMPM Eddy County					
10. Proposed Depth 6320		11. Formation Delaware		12. Rotary or C.T.	
13. Elevations (Show whether DF, RT, GR, etc.) 3000.6		14. Kind & Status Plug. Bond Blanket		15. Drilling Contractor	
16. Approx. Date Work will start					
17. PROPOSED CASING AND CEMENT PROGRAM					
SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
17 1/2	13 3/8		485	625	Surface
11	7 5/8		6345	3890	

1. Set CIBP at 6220' and dump 2 sacks cement on top.
2. Perforate at 6190'-6202' and 6214'-6226'.
3. Swab test and evaluate.
4. Acidize and frac as needed.

APPROVAL VALID FOR 180 DAYS  
PERMIT EXPIRES 4/16/90  
UNLESS DRILLING UNDERWAY

IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM: IF PROPOSAL IS TO DEEPEN OR PLUG BACK, GIVE DATA ON PRESENT PRODUCTIVE ZONE AND PROPOSED NEW PRODUCTIVE ZONE. GIVE BLOWOUT PREVENTER PROGRAM, IF ANY.

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

SIGNATURE F.D. Schoch TITLE Area Manager DATE 4/24/90  
(915)  
TYPE OR PRINT NAME F.D. Schoch TELEPHONE NO 362-6302

(This space for State Use)

ORIGINAL SIGNED BY  
MIKE WILLIAMS  
SUPERVISOR, DISTRICT II

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE MAY 16 1990

CONDITIONS OF APPROVAL, IF ANY:

RECEIVED

NEW MEXICO OIL CONSERVATION COMMISSION  
WELL LOCATION AND ACREAGE DEDICATION PLAT

Form C-102  
Superseded by C-128  
EFFECTIVE 1-1-65  
MAY 2 1990

All distances must be from the outer boundaries of the Section

Operator RB Operating Company			Lease South Culebra Bluff Unit		Well O.C.D. ARIZONA OFFICE
Unit Letter S	Section 23	Township 23 South	Range 28 East	County Eddy	
Actual Footage Location of Well: 2050 feet from the North line and 1950 feet from the East line					
Ground Level Elev. 3000.6	Producing Formation		Pool Delaware	Dedicated Acreage: 40 Acres	

1. Outline the acreage dedicated to the subject well by colored pencil or hachure 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 working 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 \_\_\_\_\_

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, forced-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 contained herein is true and complete to the best of my knowledge and belief.

Name

F.D. Schoch

Position

Area Manager

Company

RB Operating Company

Date

4/24/90

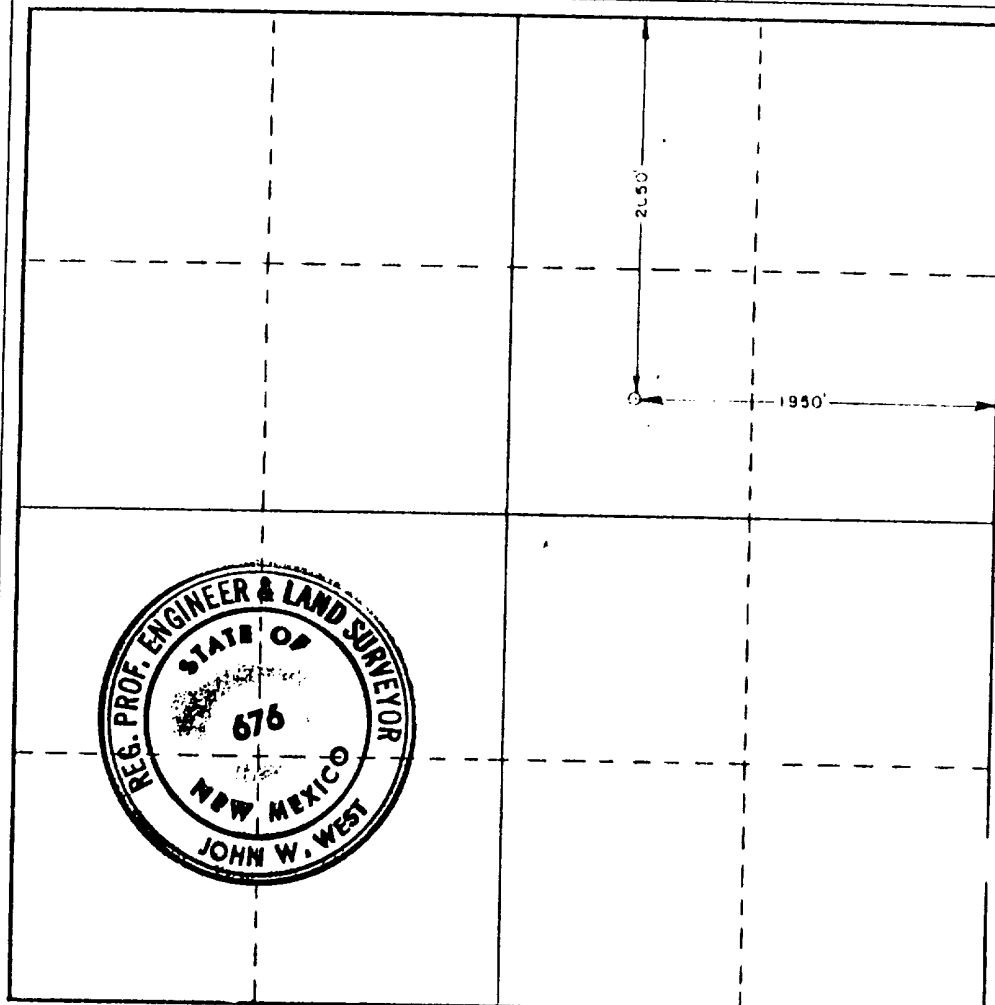
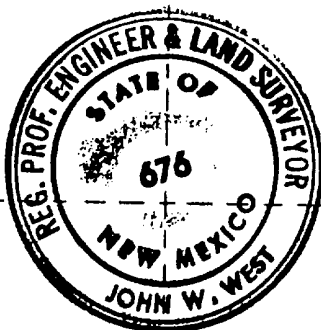
I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my knowledge and belief.

April 18, 1990

Registered Professional Engineer  
and/or Land Surveyor

*John W. West*  
Certificate No. John W. West 676

Ronald J. Eidson 3239



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

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P.O. Drawer DD, Artesia, NM 88210

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

RECEIVED

State of New Mexico  
Energy, Minerals and Natural Resources Department

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

OIL CONSERVATION DIVISION

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

Santa Fe			
File			
Transporter	Oil		
Operator	Gas		

REQUEST FOR ALLOWABLE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS

I. Operator RB Operating Company Well API No. \_\_\_\_\_

Address 2412 N. Grandview, Suite 201, Odessa, Texas 79761

Reason(s) for Filing (Check proper box) ☐ Other (Please explain)

New Well ☐ Change in Transporter of: ☐ Dry Gas ☐

Recompletion ☐ Oil ☐ Effective June 1, 1989

Change in Operator ☒ Casinghead Gas ☐ Condensate ☐

If change of operator give name and address of previous operator Reading & Bates Petroleum Co., 2412 N. Grandview, Suite 201, Odessa, Tx. 79761

II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>South Culebra Bluff Unit</u>	Well No. <u>3</u>	Pool Name, including Formation <u>South Culebra Bluff Spring</u>	Bone	Kind of Lease State, Federal or Fee	Lease No.
Location					
Unit Letter <u>G</u> : <u>2050</u> Feet From The <u>North</u> Line and <u>1950</u> Feet From The <u>East</u> Line					
Section <u>23</u> Township <u>23S</u> Range <u>28E</u> , <u>NMPM</u> , <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"/>	Address (Give address to which approved copy of this form is to be sent)					
<u>The Permian Corporation</u>	<u>P.O. Box 1183, Houston, Texas 77001</u>					
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)					
<u>El Paso Natural Gas Co.</u>	<u>P.O. Box 1492, El Paso, Texas 79978</u>					
If well produces oil or liquids, give location of tanks.	Unit <u>G</u>	Sec. <u>23</u>	Twp. <u>23</u>	Rge. <u>28</u>	Is gas actually connected? <u>Yes</u>	When? <u>8/22/79</u>

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 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
Testing 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 Larry Rampey Vice President  
Printed Name Larry Rampey Title  
Date June 21, 1989 Telephone No. (918) 492-0447

OIL CONSERVATION DIVISION

Date Approved OCT 20 1989

By ORIGINAL SIGNED BY  
MIKE WILLIAMS  
Title SUPERVISOR, DISTRICT II

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 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.

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

NO. OF COPIES DESIRED		
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FILE		<input checked="" type="checkbox"/>
U.S.G.S.		<input checked="" type="checkbox"/>
LAND OFFICE		<input checked="" type="checkbox"/>
TRANSPORTER	OIL <input checked="" type="checkbox"/>	
	GAS <input checked="" type="checkbox"/>	
OPERATOR		<input checked="" type="checkbox"/>
PRODUCTION OFFICE		<input checked="" type="checkbox"/>

RECEIVED BY

AUG 20 1985

O. C. D.  
ARTESIA, OFFICE

OIL CONSERVATION DIVISION  
P. O. BOX 2086  
SANTA FE, NEW MEXICO 87501

Form C-104  
Revised 10-01-76  
Format 06-01-83  
Page 1

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator  
Reading & Bates Petroleum Co.

Address  
2412 N. Grandview, Suite 201, Odessa, Texas 79761

Reason(s) for filing (Check proper box)

<input type="checkbox"/> New Well	Change in Transporter of:	Other (Please explain) Effective July 1, 1985
<input type="checkbox"/> 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	

If change of ownership give name and address of previous owner DeltaUS Corporation, 3100 C. North "A" Street, Midland, Texas 79705

II. DESCRIPTION OF WELL AND LEASE

Lease Name South Culebra Bluff Unit	Well No. 3	Pool Name, including Formation South Culebra Bluff Spring	Bone	Kind of Lease State, Federal or Fee	Fee	Lease No.
Location Unit Letter <u>G</u> : <u>2050</u> Feet From The <u>North</u> Line and <u>1950</u> Feet From The <u>East</u>						
Line of Section <u>23</u> Township <u>23S</u> Range <u>28E</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"/>	The Permian Corporation	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1183, Houston, Texas 77001
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	El Paso Natural Gas Co.	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1492, El Paso, Texas 79978
If well produces oil or liquids, give location of tanks.	Unit <u>G</u> Sec. <u>23</u> Twp. <u>23</u> Rge. <u>28</u>	Is gas actually connected? <u>Yes</u> When <u>August 22, 1979</u>

If this production is commingled with that from any other lease or pool, give commingling order number: Last IP-3  
8-30-85  
CHJ OP

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. 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 is true and complete to the best of my knowledge and belief.

[Signature]  
(Signature)  
Area Superintendent  
(Title)  
August 14, 1985  
(Date)

OIL CONSERVATION DIVISION

APPROVED AUG 28 1985

BY Original Signed By  
Les A. Clements  
TITLE Supervisor District II

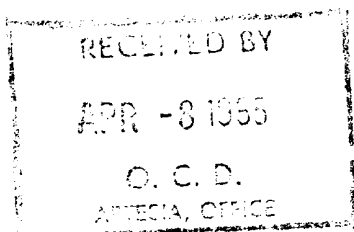
This form is to be filed in compliance with RULE 1104.

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.



OIL CONSERVATION DIVISION  
P. O. DRAWER DD  
ARTESIA, NEW MEXICO 88210

DATE: April 4, 1985

NOTICE OF GAS CONNECTION

This is to notify the Oil Conservation Division that connection for the purchase of  
gas from the US Corp. Delta Drilling Company ✓  
OPERATOR  
South Culeba Bluff #1, #36#4, CPD, Eddy, G 23-23-28  
LEASE & WELL COUNTY UNIT S-T-R  
Atoka S. Culeba Bluff #1, #36#4, CPD, El Paso Natural Gas  
POOL NAME OF PURCHASER  
was made on March 29, 1985, 32547 301  
DATE SITE CODE & SITE WELL NUMBER

EL PASO NATURAL GAS COMPANY  
PURCHASER

  
ROBERT PATTERSON - Representative

Systems Dispatching Production  
Coordinator, Title

c: Oil Conservation Division  
State of New Mexico  
P. O. Box 2088  
Santa Fe, New Mexico 87501

Production Control - M/O  
Gas Purchases - M/O  
Operator  
Earl Smith, Production - Jal  
Charlie Annett - Midland  
Joe Robinson - Jal  
Eunice Field Lines  
Jal Field Lines  
Bill Cranford - Jal  
Carl Frymire - Jal  
File

DISTRIBUTION	
SANTA FE	<input checked="" type="checkbox"/>
FILE	<input checked="" type="checkbox"/>
U.S.G.S.	<input type="checkbox"/>
LAND OFFICE	<input type="checkbox"/>
TRANSPORTER	<input checked="" type="checkbox"/>
OIL	<input checked="" type="checkbox"/>
GAS	<input checked="" type="checkbox"/>
OPERATOR	<input checked="" type="checkbox"/>
PRORATION OFFICE	<input type="checkbox"/>

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-111  
Effective 1-1-65

RECEIVED BY

JUL 19 1984

O. C. D.

ARTESIA, OFFICE

I. Operator DeltaUS Corporation  
Address 3100 C, North "A" Street, Midland, Texas 79705  
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) Name change from Delta Drilling Company only.

If change of ownership give name and address of previous owner Delta Drilling Company, 3100 C, North "A" Street, Midland, Texas 79705

II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>South Culebra Bluff Unit</u>	Well No. <u>X3</u>	Pool Name, including Formation <u>South Culebra Bluff Spring</u>	Kind of Lease State, Federal or Fee <u>Fee</u>	Lease No.
Location Unit Letter <u>G</u> ; <u>2050</u> Feet From The <u>North</u> Line and <u>1950</u> Feet From The <u>East</u> Line of Section <u>23</u> Township <u>23S</u> Range <u>28E</u> , NMPM, <u>Eddy</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/> <u>The Permian Corp.</u>	Address (Give address to which approved copy of this form is to be sent) <u>Box 1492, El Paso, Texas 79705</u>	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> <u>El Paso Natural Co.</u>	Address (Give address to which approved copy of this form is to be sent) <u>Box 1492, El Paso, Texas 79705</u>	
If well produces oil or liquids, give location of tanks.	Unit <u>6</u>	Sec. <u>23</u>
	Twp. <u>23</u>	Rge. <u>28E</u>
	Is gas actually connected? <u>Yes</u> When <u>8-22-79</u>	

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 Restv.	Diff. Restv.
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		
						<u>Post ID</u> <u>3-29-85</u> <u>Chg. 1 p.</u>		

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 (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.

Ron Brown  
(Signature)  
Senior Engineer  
(Title)  
7/16/84  
(Date)

OIL CONSERVATION COMMISSION

APPROVED MAR 22 1985, 19

BY GEOLOGIST SIGNED  
BY LARRY BROOKS  
TITLE GEOLOGIST - NMOC

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.

OIL CONSERVATION DIVISION

Drawer DD Artesia, NM.

DISTRICT OFFICE #2

Sept. thru Dec. 1983  
NO. 2006 R/2

**SUPPLEMENT TO THE OIL PRORATION SCHEDULE**

DATE September 1, 1983

PURPOSE ALLOWABLE REVISION

Effective September 1, 1983 the allowables of the following Delta Drilling Company wells in the South Culebra Bluff-Bone Spring Pool are hereby revised as indicated.

SOUTH CULEBRA BLUFF UNIT #3-G-23-23-28 increase to 36 BOPD ✓

Sept. Total - 1080 bbls.  
Oct. Total - 1116 bbls.  
Nov. Total - 1080 bbls.  
Dec. Total - 1116 bbls.

SOUTH CULEBRA BLUFF UNIT #6-G-24-23-28 increase to 26 BOPD - Unit Letter L


Sept. Total - 780 bbls.  
Oct. Total - 806 bbls.  
Nov. Total - 780 bbls.  
Dec. Total - 806 bbls.

LAC:fc

Delta Drilg. Co.

PER

OIL CONSERVATION DIVISION

  
DISTRICT SUPERVISOR

## OIL CONSERVATION DIVISION

Drawer DD                      Artesia, NM.

DISTRICT OFFICE #2

May thru August 1983  
NO. 2158 RSUPPLEMENT TO THE OIL PRORATION SCHEDULEDATE August 11, 1983PURPOSE ALLOWABLE REVISION

Effective August 8, 1983 the allowables of the following Delta Drilling Company wells in the South Culebra Bluff-Bone Spring Pool are revised as indicated.

SOUTH CULEBRA BLUFF UNIT #3-G-23-23-28 increase to 36 BOPD

7 days @ 20 BOPD = 140 bbls.                      August Total - 1004 bbls.  
24 days @ 36 BOPD = 864 bbls.

SOUTH CULEBRA BLUFF UNIT #6-E-24-23-28 increase to 26 BOPD

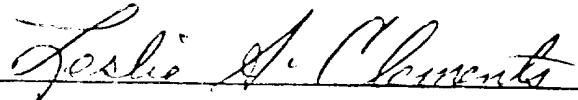
7 days @ 17 BOPD = 119 bbls.                      August Total - 743 bbls.  
24 days @ 26 BOPD = 624 bbls.

LAC:fc

Delta Drlg. Co.

PER

OIL CONSERVATION DIVISION



DISTRICT SUPERVISOR



NEW MEXICO OIL CONSERVATION COMMISSION  
GAS-OIL RATIO TESTS


Called  
Revised 1-1-65  
AUG 08 1983

Operator		Pool		County		Eddy		O.C.D.							
Delta Drilling Company		South Culebra Bluff Bone Spring						ARTESIA OFFICE							
3100-C North "A" Midland, TX 79705		TYPE OF TEST - (X)		Scheduled <input checked="" type="checkbox"/>		Completion <input type="checkbox"/>		Special <input type="checkbox"/>							
LEASE NAME	WELL NO.	LOCATION				DATE OF TEST	CHOKE SIZE	TBG. PRESS.	DAILY ALLOW-ABLE	LENGTH OF TEST HOURS	PROD. DURING TEST				GAS - OIL RATIO CU.FT/BBL
		U	S	T	R						WATER BBL'S.	CRAV. OIL BBL'S.	OIL BBL'S.	GAS M.C.F.	
Amoco Federal	3	H	11	23-5	28-E	7-31-83	1"	25	10	24	10	44.2	11	82	7455 7454
Brantley Comm	1	N	23	23-5	28-E	7-19-83	1"	25	4	24	18	45.0	3	66	22000 ✓
South Culebra Bluff Unit	3	G	23	23-5	28-E	7-28-83	1"	25	(20)	24	5	45.0	36 ✓	72	2000 ✓
South Culebra Bluff Unit	4	A	23	23-5	28-E	7-25-83	1 16/64"	25	18	24	5	45.6	16	46	2875 ✓
South Culebra Bluff Unit	6	E	24	23-5	28-E	7-3-83	1"	25	(17)	24	5	45.7	26 ✓	150	5764 5800 3290
South Culebra Bluff Unit	7	B	14	23-5	28-E	7-28-83	1 16/64"	25	11	24	3	47.4	13	43	3307
Onsuez	1	C	11	23-5	28-E	7-16-83	1"	25	4	24	0	44.5	6	80	13333 ✓

No well will be assigned an allowable greater than the amount of oil produced on the official test.  
During gas-oil ratio test, each well shall be produced at a rate not exceeding the top unit allowable for the pool in which well is located by more than 25 percent. Operator is encouraged to take advantage of this 25 percent tolerance in order that well can be assigned increased allowable when authorized by the Commission.  
Gas volumes must be reported in MCF measured at a pressure base of 15.025 psia and a temperature of 60° F. Specific gravity base will be 0.60.

Report casing pressure in lieu of tubing pressure for any well producing through casing.  
Mail original and one copy of this report to the district office of the New Mexico Oil Conservation Commission in accordance with Rule 301 and appropriate pool rules.

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

  
(Signature)  
Senior Engineer  
(Title)

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SANTA FE	1
FILE	1
U.S.G.S.	
LAND OFFICE	
OPERATOR	1

# NEW MEXICO OIL CONSERVATION COMMISSION

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

DEC 4 - 1979

O. C. C.

ARTESIA OFFICE

5a. Indicate Type of Lease  
State ☐ Fee ☒

5. State Oil & Gas Lease No.

## SUNDRY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO RE-ENTER OR PLUG BACK TO A DIFFERENT RESERVOIR.  
USE "APPLICATION FOR PERMIT TO DRILL" (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 <u>South Culebra Bluff</u>
2. Name of Operator <u>Delta Drilling Company</u>	8. Farm or Lease Name <u>South Culebra Bluff Un</u>
3. Address of Operator <u>P. O. Box 3467 Midland, Texas 79702</u>	9. Well No. <u>3</u>
4. Location of Well UNIT LETTER <u>G</u> <u>2050</u> FEET FROM THE <u>North</u> LINE AND <u>1950</u> FEET FROM THE <u>East</u> LINE, SECTION <u>23</u> TOWNSHIP <u>23S</u> RANGE <u>28E</u> N.M.P.M.	10. Field and Pool, or Wildcat <u>South Culebra Bluff</u> <u>Bone Springs</u>
15. Elevation (Show whether DF, RT, GR, etc.) <u>3000.6 GR</u>	12. County <u>Eddy</u>

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 <u>Change Tubing Setting</u> <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.

Ran 26 additional joints of 2 3/8" J-55 4.7# tubing in well. EOT is now at 7772 ft.  
New seating nipple depth is 7741 ft. Well is on rod pump with a 2" x 1 1/4" insert  
BH pump. A 7 5/8" x 2 3/8" Baker tubing anchor is set at 6344 ft.

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

SIGNED Ron Brown R. Brown TITLE Field Project Mgr. DATE 11-30-79

APPROVED BY W. A. Gressett TITLE SUPERVISOR, DISTRICT 11 DATE DEC 5 - 1979

CONDITIONS OF APPROVAL, IF ANY:

OIL CONSERVATION DIVISION

Artesia, New Mexico

October 18, 1979

Delta Drilling Company  
P. O. Box 3467  
Midland, TX 79702

Re: Well~~s~~ Placed In Pool~~s~~

Gentlemen:

As the result of Division Order R-6139 the following described well (~~s~~) (~~has-been~~) been placed in the pool (~~s~~) shown below. This change in nomenclature has been made in our files. Please change your records to reflect the proper pool name. All subsequent reports must show this nomenclature until further notice.

SOUTH CULEBRA BLUFF-BONE SPRING  
South Culebra Bluff Unit #3-G, 23-23-28

Transporters are advised, by copy of this letter, to change their records to reflect the pool name as established by this order.

Very truly yours,

OIL CONSERVATION DIVISION

*W. A. Grassie*

Distribution:

Original - Operator

XC: Santa Fe OCD

Each Transporter

PER EPG





NEW MEXICO OIL CONSERVATION COMMISSION  
GAS-OIL RATIO TESTS

Form 1-1-55

Operator Delta Drilling Company Pool Undesignated Lone Spring County Eddy  
 Address P. O. Box 3467, Midland, Texas 79702 Type of Test (X) Scheduled ☐ Completion ☐ Special ☒

LEASE NAME	WELL NO.	LOCATION				DATE OF TEST	TYPE OF TEST	CHOKE SIZE	T.B.G. PRESS.	DAILY ALLOW-ABLE	LENGTH OF TEST HOURS	PROD. DURING TEST				GAS - OIL RATIO CU.FT/BBL.
		U	S	T	R							WATER BBL'S.	GRAV. OIL BBL'S.	OIL BBL'S.	GAS M.C.F.	
South Cullebra Bluff Unit	3	G	23	23	28	9/12/79	P	--	39	52	24	0	45.6	91	125	1373

No well will be assigned an allowable greater than the amount of oil produced on the official test.

During gas-oil ratio test, each well shall be produced at a rate not exceeding the top unit allowable for the pool in which well is located by more than 25 percent. Operator is encouraged to take advantage of this 25 percent tolerance in order that well can be assigned increased allowable when authorized by the Commission.

Gas volumes must be reported in MCF measured at a pressure base of 15.025 psia and a temperature of 60° F. Specific Gravity base will be 0.60.

Report casing pressure in lieu of tubing pressure for any well producing through casing.

Well original and one copy of this report to the district office of the New Mexico Oil Conservation Commission in accordance with Rule 101 and appropriate pool rules.

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

**RECEIVED**  
**SEP 20 1979**  
**O. E. C.**  
**ARTERIAL OFFICE**

J. E. Brunsen (Signature) J. E. Brunsen  
 Operations Manager  
 (Title)

NO. OF COPIES RECEIVED		5
REGISTRATION		
SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	1
	GAS	1
OPERATOR		
PRODUCTION 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-104  
Effective 1-1-65

RECEIVED

SEP 11 1973

1. Operator  
Delta Drilling Company ✓  
Address  
P.O. Box 3467, Midland, Texas 79702  
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)  
Notice of compressor installation and connection.

O. C. C.

ARTESIA, OFFICE

If change of ownership give name and address of previous owner  
P-6139 10-12-79  
S. Culebra Bluff Bone Springs  
2. DESCRIPTION OF WELL AND LEASE  
Lease Name South Culebra Bluff Unit Well No. 3 Pool Name, Including Formation Wildcat (Bone Springs) Kind of Lease State, Federal or Fee Fee  
Location  
Unit Letter G : 2050 Feet From The North Line and 1950 Feet From The East  
Line of Section 23 Township 23S Range 28E, NMPM, Eddy County

3. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS  
Name of Authorized Transporter of Oil ☒ or Condensate ☐  
The Permian Corporation Address (Give address to which approved copy of this form is to be sent)  
P.O. Box 1183, Houston, Texas 77001  
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐  
El Paso Natural Gas Company Address (Give address to which approved copy of this form is to be sent)  
P.O. 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  
G 23 23 28 Yes 8/22/79

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

COMPLETION DATA  
Designate Type of Completion - (X) Oil Well Gas Well New Well Workover Deepen Plug Back Some Restr. Other  
X  
Date Spudded 1/21/79 Date Compl. Ready to Prod. 3/13/79 Total Depth 8,000 P.B.T.D. 8,000  
Elevations (DE, RKB, RT, GR, etc.) 3000.6 Name of Producing Formation Bone Springs Top Oil/Gas Pay 6,345 Tubing Depth 7,720  
Perforations Open hole 6345 - 8000 Depth Casing Shoe 6,345  
TUBING, CASING, AND CEMENTING RECORD  
HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT  
17-1/2 13-3/8 485 625 sx  
11 7-5/8 6345 3890 sx

TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be after recovery of total volume of lead oil and must be equal to or exceed top hole 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.)  
Pumping  
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 Lbls. Condensate/MCF Gravity of Condensate  
Testing Method (puck, back pr.) Tubing Pressure (shut-in) Casing Pressure (shut-in) Choke Size

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.  
J. E. Brusenhan J. E. Brusenhan  
(Signature)  
Operations Manager  
9/10/79  
(Date)  
OIL CONSERVATION COMMISSION  
SEP 12 1973  
APPROVED BY W. D. Gussert  
SUPERVISOR, DISTRICT II  
This form is to be filed in compliance with RULE 1194.  
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the test results taken on the well in accordance with RULE 111.  
All sections of this form must be filled out completely for all applicable sections of the well.  
Fill out only Sections I, II, III, and VI for change of name, well name or number, or transporter, or other such change of ownership.

RECEIVED

DATE September 4 19 79

SEP 10 1979

CORRECTED COPY \*

O. C. C.  
ARTESIA, OFFICE

## ADVICE ON WELLS TIED INTO GAS GATHERING SYSTEMS

Name of Producer	Delta Drilling Company (1752)
Well Name and Number	South Culebra Bluff Unit #3 ✓
Location	2050'N, 1950'E, Sec. 23, T-23-S, R-28-E, Eddy Co., NM
Pool Name	Wildcat
Producing Formation	Bone Springs
Top of Gas Pay	6,345'
Oil or Gas Well	Oil
Gas Unit Allocation	40 Acres (SW 1/4 of NE 1/4)
Date Tied Into Gathering Systems	8/22/79
Date of First Delivery	8/22/79
Gas Gathering System	South Carlsbad G/S
Processed through Gasoline Plant (yes or no)	No
Station Number	68-111-01 *
Remarks:	Site Code: 27449-6-01
	This well will produce thru a compressor set by the operator

By: Travis R. Elliott, Dispatching



RECEIVED

DATE August 29 19 79

SEP 4 1979

O. G. G.

ARTESIA, OFFICE

## ADVICE ON WELLS TIED INTO GAS GATHERING SYSTEMS

Name of Producer Delta Drilling Company (1752)

Well Name and Number South Culebra Bluff Unit #3

Location 2050'N, 1950'E, Sec. 23, T-23-S, R-28-E, Eddy Co., NM

Pool Name Wildcat

Producing Formation Bone Springs

Top of Gas Pay 6,345'

Oil or Gas Well Oil

Gas Unit Allocation 40 Acres (SW 1/4 of NE 1/4)

Date Tied Into Gathering Systems 8/22/79

Date of First Delivery 8/22/79

Gas Gathering System South Carlsbad Gathering System

Processed through Gasoline Plant (yes or no) No

Station Number 58-183-01

Remarks: Site Code: 27449-6-01

This well will produce thru a compressor set by the operator

By: Frank R. Elliott, Dispatching

DATE August 29 1979

SEP 7 1979

ADVICE ON WELLS TIED INTO GAS GATHERING SYSTEMS

**RECEIVED**

SEP 11 1979

**O. C. C.**  
**ARTESIA, OFFICE**

Name of Producer Delta Drilling Company (1752)  
Well Name and Number South Culebra Bluff Unit #3  
Location 2050'N, 1950'E, Sec. 23, T-23-S, R-28-E, Eddy Co., NM  
Pool Name Wildcat  
Producing Formation Bone Springs  
Top of Gas Pay 6,345'  
Oil or Gas Well Oil  
Gas Unit Allocation 40 Acres (SW 1/4 of NE 1/4)  
Date Tied Into Gathering Systems 8/22/79  
Date of First Delivery 8/22/79  
Gas Gathering System South Carlsbad Gathering System  
Processed through Gasoline Plant (yes or no) No  
Station Number 58-183-01  
Remarks: Site Code: 27449-6-01

This well will produce thru a compressor set by the operator

By: Travis R. Elliott Dispatch Line

NEW MEXICO OIL CONSERVATION DIVISION  
P. O. Box 2088, Santa Fe, New Mexico 87501

APPLICATION FOR WELLHEAD  
PRICE CEILING CATEGORY DETERMINATION

**RECEIVED**

1. FOR DIVISION USE ONLY

DATE OF: APPLICATION \_\_\_\_\_  
DETERMINATION \_\_\_\_\_  
CONTESTED \_\_\_\_\_  
PARTICIPANTS \_\_\_\_\_

**AUG 29 1979**

**O. C. C.  
ARTEBIA, OFFICE**

Kind of Lease	
State, Federal or Fee	Fee
5. State Oil & Gas Lease Fee	
7. Unit Agreement Lease	
8. Term of Lease (Date)	
South Culebra Bluff	
9. Well No.	
3	
10. Field and Pool, or Wellbore	

Delta Drilling Company ✓

P. O. Box 2012, Tyler, Texas 75710

UNIT LETER G 2050 FEET FROM THE North LINE AND 1950 FEET FROM

THE East LINE, SECTION 23 TOWNSHIP 23S RANGE 28E NMPM.

13. Name and Address of Transporter(s)

El Paso Natural Gas, Box 1492, El Pas, TX 79978

12. County  
Eddy

WELL CATEGORY INFORMATION

Check appropriate box for category sought and information submitted.

- ☒ 1. Category(ies) Sought (By NGPA Section No.) 102
2. All Applications must contain:
- ☒ a. C-101 APPLICATION FOR PERMIT TO DRILL, DEEPEN OR PLUG BACK
- ☒ b. C-105 WELL COMPLETION OR RECOMPLETION REPORT AND LOG
- ☐ c. DIRECTIONAL DRILLING SURVEY, IF REQUIRED UNDER RULE 111
- ☒ d. AFFIDAVITS OF MAILING OR DELIVERY
- ☒ 3. NEW NATURAL GAS UNDER SEC. 102(c)(1)(B) (using 2.5 Mile or 1000 Feet Deeper Test)
- ☒ a. Location Plat C-102
- ☒ 4. NEW NATURAL GAS UNDER SEC. 102(c)(1)(C) (new onshore reservoir)
- ☒ a. ~~C-122 Multi-point and one-point back-pressure test~~ C-104 Authorization to Transport Oil & Natural Gas
- ☒ b. All data requested in Rule 14(3) of Commission's Special Rules
- ☐ 5. NEW ONSHORE PRODUCTION WELL
- ☐ a. C-102 WELL LOCATION AND ACREAGE DEDICATION PLAT
- ☐ b. No. of order authorizing infill program \_\_\_\_\_
- ☐ 6. STRIPPER GAS
- ☐ a. C-116 GAS-OIL RATIO TEST
- ☐ b. PRODUCTION CURVE FOR 12-MONTH PERIOD PRECEDING DECEMBER 1, 1978.
- ☐ c. PRODUCTION CURVE FOR THE 90-DAY PERIOD ON WHICH THE APPLICATION IS BASED

I HEREBY CERTIFY THAT THE INFORMATION CONTAINED HEREIN IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF.

NAME: H. J. Magner

SIGNED: *H. J. Magner*

TITLE: Vice President

DATE: August 24, 1979

APPROVED: \_\_\_\_\_, EXAMINER

# DELTA DRILLING COMPANY

Box 2012 TELEPHONE 214 595-1911

TYLER, TEXAS 75710

July 30, 1979

RECEIVED

JUL 31 1979

O. C. C.  
ARTESIA, OFFICE

ADDRESS REPLY TO

P. O. Box 3467  
Midland, Texas 79702

Re: South Culebra Bluff Unit  
Well No. 3

Mr. Bill Gressett  
New Mexico Oil Commission  
Drawer DD  
Artesia, New Mexico 88210

Dear Bill,

Enclosed please find form C-129 applying for exception to the No-Flare Rule 306. We request this exception for 30 days.

The small compressor has been ordered with a tentative delivery date of August 15, 1979. We anticipate the completion of installation and trial run for the new machine to be completed by September 1, 1979.

If you have any questions concerning the well or compressor please call.

Yours truly,



J. E. Brusenhan  
Operations Manager  
Delta Drilling Company

JEB:s1

Enclosure