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	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
MAY 8 1984
O. C. D.
ARTESIA, OFFICE

I. Operator KAISER-FRANCIS OIL COMPANY

Address P.O. BOX 21468 TULSA, OKLAHOMA 74121-1468

Reason(s) for filing (Check proper box)

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

Other (Please explain)

CHANGE OF OWNERSHIP 4-1-84
CHANGE OF OPERATOR 7-1-84

If change of ownership give name and address of previous owner AMINOIL INC., 8000 E. MAPLEWOOD, STE. 333, ENGLEWOOD, CO 80111

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
VASQUEZ COM	1	MALAGA ATOKA	State, Federal or Fee FEE	
Location				
Unit Letter	2310	Feet From The	NORTH	Line and 1925
Line of Section	3	Township	24 SOUTH	Range 28 EAST
				EDDY
				County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil	or Condensate	Address (Give address to which approved copy of this form is to be sent)
Name of Authorized Transporter of Casinghead Gas	or Dry Gas	Address (Give address to which approved copy of this form is to be sent)
EL PASO NATURAL GAS COMPANY		P.O. BOX 1384, JAL, NEW MEXICO 88252
If well produces oil or liquids, give location of tanks.	Unit	Sec.
	Twp.	Rge.
	YES	When 12-19-80

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'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 - 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.

Charlotte Van Valkenburg
(Signature)
PRODUCTION ADMINISTRATOR
(Title)
5-3-84
(Date)

OIL CONSERVATION COMMISSION
MAY 10 1984

APPROVED _____, 19____

BY Mike Williams
OIL AND GAS INSPECTOR

TITLE _____

This form is to be filed in compliance with RULE 1104.
If this is a request for allowable for a newly drilled or deeper 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 all able on new and recompleted wells.
Fill out only Sections I, II, III and VI for changes of owner name or number, or transporter, or other such change of condition.
Separate Forms C-104 must be filed for each pool in multi-layered wells.

OIL CONSERVATION DIVISION

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-132
Revised 7-15-80APPLICATION FOR WELLHEAD
PRICE CEILING CATEGORY DETERMINATION

1. FOR DIVISION USE ONLY:	
DATE COMPLETE APPLICATION FILED	
DATE DETERMINATION MADE	
WAS APPLICATION CONTESTED?	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
NAME(S) OF INTERVENOR(S), IF ANY:	

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JAN 26 1981

O. C. D.
ARTERIA, OFFICE

5A. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.
7. Unit Agreement Name
8. Farm or Lease Name Vasquez Comm.
9. Well No. 1
10. Field and Pool or Wildcat Undesignated Malaga Monterey
12. County Eddy

2. Name of Operator Aminoil USA, Inc.
3. Address of Operator P. O. Box 10525, Midland, Texas 79702
4. Location of Well UNIT LETTER <u>F</u> LOCATED <u>2310</u> FEET FROM THE <u>North</u> LINE AND <u>1925</u> FEET FROM THE <u>West</u> LINE OF SEC. <u>3</u> TWP. <u>24S</u> RGE. <u>28E</u>
11. Name and Address of Purchaser(s) El Paso Natural Gas Company, P. O. Box 1492, El Paso, Texas 79978

WELL CATEGORY INFORMATION

Check appropriate box for category sought and information submitted.

- Category(ies) Sought (By NGPA Section No.) 103
- All Applications must contain:
 - ☒ a. C-101 APPLICATION FOR PERMIT TO DRILL, DEEPEN OR PLUG BACK
 - ☒ b. C-105 WELL COMPLETION OR RECOMPLETION REPORT
 - ☒ c. DIRECTIONAL DRILLING SURVEY, IF REQUIRED UNDER RULE 111
 - ☒ d. AFFIDAVITS OF MAILING OR DELIVERY
- In addition to the above, all applications must contain the items required by the applicable rule of the Division's "Special Rules for Applications For Wellhead Price Ceiling Category Determinations" as follows:
 - A. NEW NATURAL GAS UNDER SEC. 102(c)(1)(B) (using 2.5 Mile or 1000 Feet Deeper Test)
 - ☐ All items required by Rule 14(1) and/or Rule 14(2)
 - B. NEW NATURAL GAS UNDER SEC. 102(c)(1)(C) (new onshore reservoir)
 - ☐ All items required by Rule 15
 - C. NEW ONSHORE PRODUCTION WELL
 - ☒ All items required by Rule 16A or Rule 16B
 - D. DEEP, HIGH-COST NATURAL GAS and TIGHT FORMATION NATURAL GAS
 - ☐ All items required by Rule 17(1) or Rule 17(2)
 - E. STRIPPER WELL NATURAL GAS
 - ☐ All items required by Rule 18

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Oil Conservation

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

Aminoil USA, Inc.

NAME OF APPLICANT (Type or Print)

SIGNATURE OF APPLICANT

Title District Accountant

Date 11-26-80

FOR DIVISION USE ONLY

- ☐ Approved
- ☐ Disapproved

The information contained herein includes all
of the information required to be filed by the
applicant under Subpart 8 of Part 274 of the
FERC regulations.

EXAMINER

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FILE	1
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LAND OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION
WELL COMPLETION OR RECOMPLETION REPORT AND LOG
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DEC 22 1980

Form O-105
Revised 11-78

1. Indicate Type of Lease	State <input type="checkbox"/> Fee <input checked="" type="checkbox"/>
2. State if a Gas Lease (a)	

10. TYPE OF WELL	
OIL WELL <input type="checkbox"/>	GAS WELL <input checked="" type="checkbox"/> DRY <input type="checkbox"/> OTHER <input type="checkbox"/>
11. TYPE OF COMPLETION	
NEW WELL <input checked="" type="checkbox"/> WORK OVER <input type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input type="checkbox"/> REFR. <input type="checkbox"/> OTHER <input type="checkbox"/>	

12. Name of Operator	AMINOIL USA, INC.
13. Address of Operator	601 N. Loraine St., Midland, Texas 79702
14. Location of Well	

UNIT LETTER	F	LOCATED	2310	FEET FROM THE	North	LINE AND	1925	FEET FROM
THE	West	LINE OF SEC.	3	TWP.	24S	RGE.	28E	NMPV

15. Date Spudded	16. Date TD, Reached	17. Date Compl. (Ready to Prod.)	18. Elevations (DF, RKB, RT, GR, etc.)	19. Elev. Casingshead
5-31-80	9-23-80	11-22-80	3018.6' GR	
20. Total Depth	21. Plug Into T.D.	22. Is Multiple Compl. How Many	23. Intervals Drilled By	24. Intervals Drilled By
12,746'	11,743'			

24. Producing Interval(s), of this completion - Top, bottom, Name	25. Was Directional Survey Made
11,617' - 11,632' Atoka	Yes

26. Type Electric and Other Logs Run	27. Was Well Cased
DLL & MSFL, GR, CML & FDC, Casing Profile Log	No

28. CASING RECORD (Report all strings set in well)					
CASING SIZE	WEIGHT LB. FT.	DEPTH SET	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
20"		430'	26"	875 sx.	
13-3/8"	54.50 & 61#	2,509'	17-1/2"	2440 sx.	
9-5/8"	47,43.50,40#	9,860'	12-1/4"	2960 sx.	
			8-1/2"		

29. LINER RECORD				30. TUBING RECORD			
SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN	SIZE	DEPTH SET	PACKER SET
7-5/8"	9,565	12,008	550 sx.		2-7/8"	11,515	11,515
4-1/2"	11,756	12,744	120 sx.				

31. Perforation Record (Interval, size and number)	32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.
11,617; 11,622-32	
24-.33" Diameter holes	
	DEPTH INTERVAL
	11,117-11,632
	7500 gal. 20% HCL w/1000 SCF N ₂ /bbl

33. PRODUCTION							
Date First Production		Production Method (Flowing, gas lift, pumping - Size and type pump)				Well Status (Prod. or Shut-in)	
		Flowing				Shut-in	
Date of Test	Hours Tested	Choke Size	Prod'n. Per Test Period	Oil - PRL	Gas - MCF	Water - PRL	Grav - Oil Ratio
11/22/80	24	24/64		0	5600	0	N/A
Flow Tubing Press.	Casing Pressure	1 1/2" In. 1 1/4" In. 1 1/8" In. 1" In.	Oil - PRL	Gas - MCF	Water - PRL	Oil Gravity - K/L (Corr.)	
1450	0		0	5600	0	N/A	

34. Disposition of Gas (Sold, used for fuel, vented, etc.)	Test Witnessed By
Flared	

35. List of Attachments

36. 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.		
SIGNED	TITLE	DATE
<i>Larry L. Harpe</i>	Operations Superintendent	11/26/80

INSTRUCTIONS

This form is to be filed with the original report of the formation not later than 30 days after the completion of any newly-dilled or deepened well. It must be accompanied by a copy of all electrical and resistivity logs run in the well and a summary of all special tests conducted, including drill stem tests. All depths reported shall be measured by the bottom of a centrally drilled well; true vertical depths shall also be reported. The number of meters, from 0 to 1000, shall be reported for each case. The form is to be filed in quadrants except on state land where six copies are required. See rule 11.

INDICATE FORMATION TOPS IN CONFORMANCE WITH GEOGRAPHICAL SECTION OF STATE

Southeastern New Mexico

Northwestern New Mexico

T. Anhy 83	T. Canyon	T. Ojo Alamo	T. Penn. "B"
T. Salt 1020	T. Strawn 11,294	T. Kirtland-Fruitland	T. Penn. "C"
T. Salt 2493	T. Atoka 11,541	T. Pictured Cliffs	T. Penn. "D"
T. Yates	T. Miss	T. Cliff House	T. Leadville
T. 7 Rivers	T. Devonian	T. Menefee	T. Madison
T. Queen	T. Sularian	T. Point Lookout	T. Elbert
T. Grayburg	T. Montoya	T. Mancos	T. McCracken
T. San Andres	T. Simpson	T. Gallup	T. Ignacio Quate
T. Glerieta	T. McKee	Base Greenhorn	T. Granite
T. Paddock	T. Ellenburger	T. Dakota	T.
T. Blinberry	T. Gr. Wash	T. Morrison	T.
T. Tubb	T. Gravel	T. Todilto	T.
T. Drinkard	T. Delaware Sand Im. 2556	T. Entrada	T.
T. Abo	T. Bone Springs 6191	T. Wingate	T.
T. Wolfcamp Shale 9402	T. Morrow 12,230	T. Chinle	T.
T. Penn.	T.	T. Pennian	T.
T. Cisco (Bough C)	T.	T. Penn. "A"	T.

OIL OR GAS SANDS OR ZONES

No. 1, from 11,386 to 11,392	No. 4, from 12,401 to 12,412
No. 2, from 11,626 to 11,638	No. 5, from 12,493 to 12,500
No. 3, from 12,384 to 12,396	No. 6, from 12,514 to 12,528
	No. 7, from 12,532 to 12,536
	No. 8, from 12,602 to 12,604

IMPORTANT WATER SANDS

Include data on rate of water inflow and elevation to which water rose in hole.

No. 1, from 18 to 23 feet.	Possible surface sand
No. 2, from _____ to _____ feet.	Questionable water
No. 3, from _____ to _____ feet.	bearing
No. 4, from _____ to _____ feet.	

FORMATION RECORD (Attach additional sheets if necessary)

From	To	Thickness in Feet	Formation	From	To	Thickness in Feet	Formation
0	83	83	Surface Rocks	12730	12734	304	Morrow Sands & shales
83	1020	937	Anhydrite				
1020	2556	1536	Salt & Anhydrite				
2556	2587	31	Delaware limestone & shale				
2587	6191	3604	Delaware sands				
6191	9620	2829	Bone Spr. Lmst. w/ sand streaks				
9620	9402	332	3rd Bone Springs Sand				
9402	11294	1892	Wolfcamp sh. some lmstn.				
11294	11541	247	Strawn lmst. w/ two streaks sand				
11541	11670	129	Atoka sand & shale				
11670	12230	560	Atoka Lmstn. & shale				

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MAR 24 1981

DEVIATION SURVEY
 Vasquez No. 1
 Eddy County, New Mexico

O. C. D.
 ARTESIA, OFFICE

<u>Date</u>	<u>Depth</u>	<u>Deviation</u>
06-03-80	200'	1/2°
06-03-80	430'	1/2°
06-09-80	989'	3/4°
06-13-80	1,797'	2°
06-13-80	1,966'	1-3/4°
06-14-80	2,144'	1-3/4°
06-18-80	2,960'	1-1/4°
06-19-80	3,360'	1-1/2°
06-20-80	3,880'	1°
06-21-80	4,380'	1-1/4°
06-23-80	4,880'	3/4°
06-24-80	5,160'	1°
06-26-80	5,650'	3/4°
06-27-80	6,180'	1°
06-28-80	6,650'	1-3/4°
06-29-80	6,992'	1-3/4°
07-01-80	7,490'	1-3/4°
07-02-80	7,861'	1°
07-04-80	8,060'	1/2°
07-06-80	8,554'	1°
07-08-80	9,050'	1-1/4°
07-10-80	9,580'	1-1/4°
07-13-80	9,850'	1-1/4°
07-22-80	10,400'	1-1/4°
07-25-80	10,560'	1°
07-30-80	10,740'	3/4°
08-24-80	11,408'	3/4° N, 9° W
08-25-80	11,440'	3/4° N, 25° W
08-25-80	11,470'	1-3/4° N, 55° W
08-26-80	11,512'	3-1/4° N, 10° W
08-29-80	11,600'	3-1/4° N, 2° E
09-01-80	11,634'	2-3/4°

<u>Date</u>	<u>Depth</u>	<u>Deviation</u>	
08-31-80	11,770'	3°	RECEIVED MAR 24 1981 O. C. O. ARTESIA, OFFICE
08-30-80	11,706'	3-3/4°	
09-04-80	11,925'	3°	
09-18-80	12,624'	1-1/4°	
09-19-80	12,725'	0°	

Location Unit F, Section 3, T24S, R28E, Eddy County, New Mexico

OPERATOR AMINOIL USA, INC.

The undersigned hereby certifies that he is an authorized representative of the Operator who drilled and operates the above described well and that he has conducted deviation tests and obtained the above results.

Operator AMINOIL USA, INC.

By Jerry L. Harper
Jerry L. Harper
Operations Superintendent

Subscribed and sworn to before me this 23 day of March, 19 81.

Armita Lierro
Notary Public

Midland County, Texas

My Commission Expires:

9/30/84

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OPERATOR		
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NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS
RECEIVED

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

DEC 24 1980

Operator		O. C. D.	
Amincoil USA Inc. /		ARTESIA, OFFICE	
Address			
601 N. Loraine, Midland, Texas 79702			
Reason(s) for filing (Check proper box)		Other (Please explain)	
New Well	<input checked="" type="checkbox"/>	Change in Transporter of:	
Recompletion	<input type="checkbox"/>	Oil	<input type="checkbox"/>
Change in Ownership	<input type="checkbox"/>	Casinghead Gas	<input type="checkbox"/>
		Dry Gas	<input type="checkbox"/>
		Condensate	<input type="checkbox"/>

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.
Vasquez Comm.	1	Malaga, Atoka	State, Federal or Fee Fee	
Location				
Unit Letter	F	2310 Feet From The North Line and 1925 Feet From The West		
Line of Section	3	Township 24S	Range 28E	County 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)					
N/A						
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)					
El Paso Natural Gas						
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	F	3	24S	28E	No Yes	12-19-80

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.
		X						
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
5-18-80	11-22-80	12,746'	11,743'					
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
3018.6' GR	Atoka	11,617'	11,515'					
Perforations		Depth Casing Shoe						
11,617'; 11,622 - 32';		24 - .33" Diameter Holes						
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
26"	20"	430'	865 sx					
17 1/2"	13 3/8"	2509'	2440 sx					
12 1/4"	9 5/8"	9860'	2960 sx					
See Attachment								

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
2,559	3.5 hr.	N/A	N/A
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
Multipoint Bk. Prs.	2060	---	Various

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.

Jerry L. Harper
(Signature)

Operations Superintendent
(Title)

December 19, 1980
(Date)

OIL CONSERVATION COMMISSION

APPROVED DEC 31 1980, 19____
BY Mike Williams
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.
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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.
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