

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 2088
Santa Fe, New Mexico 87504-2088

Form C-105
Revised 1-1-89

C/Sr
Bum
B/H

WELL API NO.

30-015-26130

5. Indicate Type of Lease

STATE ☐

FEE ☒

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name

COQUINA

8. Well No.

1

9. Pool name or Wildcat

UND. HERRADURA BEND CHERRY CANYON

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

JUL 12 '89

2. Name of Operator

NEFF Oil and Gas

O. C. D.

ARTESIA, OFFICE

3. Address of Operator

150 Washington Ave. Suite 202 Santa Fe, New Mexico 87501

4. Well Location

Unit Letter C : 990 Feet From The North Line and 1980 Feet From The West Line

Section 29

Township 22S

Range 28E

NMPM

Rddy

County

10. Date Spudded

6-7-89

11. Date T.D. Reached

6-19-89

12. Date Compl. (Ready to Prod.)

6-27-89

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

3044.7 GR

14. Elev. Casinghead

3044.7

15. Total Depth

3438

16. Plug Back T.D.

3388'

17. If Multiple Compl. How Many Zones?

18. Intervals Drilled By

Rotary Tools

0-3438

Cable Tools

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

CHERRY CANYON DELAWARE

20. Was Directional Survey Made

YES

21. Type Electric and Other Logs Run

BHC-SONIC-GR, Dual Laterolog

22. Was Well Cored

NO

23.

CASING RECORD (Report all strings set in well)

CASING SIZE	WEIGHT LB/FT.	DEPTH SET	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
8 5/8	24#	400'	12 1/4"	250sx "C" + 2% CaCl ₂	NONE
4 1/2	10.50#	3438'	7 7/8	550sx "C" + 1 1/2% CaCl ₂ + 320 sx Lite + 5# Salt + 1/2# Celloseal + 140sx "C" + 2% CaCl ₂ in Two Stages.	NONE

24.

LINER RECORD

SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN

25.

TUBING RECORD

SIZE	DEPTH SET	PACKER SET
2 3/8	3235'	3230

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

3360'-3368' .38 16Shots
3292 -3297' .38 12Shots
3300 -3312' .38 24Shots

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

DEPTH INTERVAL

AMOUNT AND KIND MATERIAL USED

3292-3312

1000 gal. 7 1/2% Nefe

Post FO-2

7-21-89

P x H

28.

PRODUCTION

Date First Production

6-27-89

Production Method (Flowing, gas lift, pumping - Size and type pump)

SWAB

Well Status (Prod. or Shut-in)

Plugged

Date of Test

6-27-89

Hours Tested

16

Choke Size

Prod'n For Test Period

Oil - Bbl.

Gas - MCF

Water - Bbl.

Gas - Oil Ratio

Flow Tubing Press.

Casing Pressure

Calculated 24-Hour Rate

Oil - Bbl.

Gas - MCF

Water - Bbl.

Oil Gravity - API - (Corr.)

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

Test Witnessed By

30. List Attachments

E-Logs, DEVIATION SURVEYS

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

Gene Lee

Printed

Gene Lee

Agent

7-5-89

INSTRUCTIONS

This form is to be filed with the appropriate District Office of the Division 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 25 through 29 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

Southeastern New Mexico

T. Anhy _____	T. Canyon _____
T. Salt _____	T. Strawn _____
B. Salt _____ 2150'	T. Atoka _____
T. Yates _____	T. Miss _____
T. 7 Rivers _____	T. Devonian _____
T. Queen _____	T. Silurian _____
T. Grayburg _____	T. Montoya _____
T. San Andres _____	T. Simpson _____
T. Glorieta _____	T. McKee _____
T. Paddock _____	T. Ellenburger _____
T. Blinberry _____	T. Gr. Wash _____
T. Tubb _____	T. Delaware Sand _____ 2515
T. Drinkard _____	T. Bone Springs _____
T. Abo _____	T. _____
T. Wolfcamp _____	T. _____
T. Penn _____	T. _____
T. Cisco (Bough C) _____	T. _____

Northwestern New Mexico

T. Ojo Alamo _____	T. Penn. "B" _____
T. Kirtland-Fruitland _____	T. Penn. "C" _____
T. Pictured Cliffs _____	T. Penn. "D" _____
T. Cliff House _____	T. Leadville _____
T. Menefee _____	T. Madison _____
T. Point Lookout _____	T. Elbert _____
T. Mancos _____	T. McCracken _____
T. Gallup _____	T. Ignacio Otzte _____
Base Greenhorn _____	T. Granite _____
T. Dakota _____	T. _____
T. Morrison _____	T. _____
T. Todilto _____	T. _____
T. Entrada _____	T. _____
T. Wingate _____	T. _____
T. Chinle _____	T. _____
T. Permain _____	T. _____
T. Penn. "A" _____	T. _____

OIL OR GAS SANDS OR ZONES

No. 1, from 3292 to 3312
No. 2, from 3360 to 3368

No. 3, from.....to.....
No. 4, from.....to.....
TER SANDS

IMPORTANT WATER SANDS

IMPORTANT WATER
Include data on rate of water inflow and elevation to which water rose in hole.
No. 1, from.....

No. 1, from.....to.....feet.....
No. 2, from.....to.....feet.....
No. 3, from.....to.....feet.....

LITHOLOGY RECORD (Attached additional sheets)

LITHOLOGY RECORD (Attach additional sheet if necessary)

From	To	Thickness in Feet	Lithology

From	To	Thickness in Feet	Lithology

~~RAILROAD COMMISSION OF TEXAS~~
OIL AND GAS DIVISION

Form W-12
(1-1-71)

INCLINATION REPORT (One Copy Must Be Filed With Each Completion Report.)		RECEIVED JUL 12 '89
1. FIELD NAME (as per RRC Records or Wildcat)		6. RRC District
2. LEASE NAME Coquina		7. RRC Lease Number. (Oil completions only)
3. OPERATOR Neff Oil & Gas, Inc.		8. Well Number 1
4. ADDRESS P.O. Box 9338 Santa Fe, NM 87504		9. RRC Identification Number (Gas completions only)
5. LOCATION (Section, Block, and Survey) Section 29, T22S, R28E		10. County Eddy

RECORD OF INCLINATION

*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)
404	404	1	1.75	7.07	7.07
877	473	1 1/2	2.63	12.44	19.51
1156	279	2 3/4	4.81	13.42	32.93
1300	144	3	5.25	7.56	40.49
1654	354	1 3/4	3.06	10.83	51.32
1962	308	2 1/2	4.38	13.49	64.81
2330	368	1 1/4	2.19	8.06	72.87
2699	369	1	1.75	6.46	79.33
3438	739	1	1.75	12.93	92.26

If additional space is needed, use the reverse side of this form.

17. Is any information shown on the reverse side of this form? ☐ yes ☒ no
18. Accumulative total displacement of well bore at total depth of 3438 feet = 92.26 feet.
- *19. Inclination measurements were made in - ☐ Tubing ☐ Casing ☐ Open hole ☒ Drill Pipe
20. Distance from surface location of well to the nearest lease line _____ feet.
21. Minimum distance to lease line as prescribed by field rules _____ feet.
22. Was the subject well at any time intentionally deviated from the vertical in any manner whatsoever? no
- (If the answer to the above question is "yes", attach written explanation of the circumstances.)

INCLINATION DATA CERTIFICATION

I declare under penalties prescribed in Sec. 91.143, Texas Natural Resources Code, that I am authorized to make this certification, that I have personal knowledge of the inclination data and facts placed on both sides of this form and that such data and facts are true, correct, and complete to the best of my knowledge. This certification covers all data as indicated by asterisks (*) by the item numbers on this form.

James R. Brazeal
Signature of Authorized Representative
James L. Brazeal-President
Name of Person and Title (type or print)
Brazeal, Inc.-d/b/a CapStar Drilling
Name of Company
Telephone: 214 727-8367
Area Code

OPERATOR CERTIFICATION

I declare under penalties prescribed in Sec. 91.143, Texas Natural Resources Code, that I am authorized to make this certification, that I have personal knowledge of all information presented in this report, and that all data presented on both sides of this form are true, correct, and complete to the best of my knowledge. This certification covers all data and information presented herein except inclination data as indicated by asterisks (*) by the item numbers on this form.

E. Richard Neff
Signature of Authorized Representative
E. Richard Neff
Name of Person and Title (type or print)
Neff Oil and Gas, Inc.
Operator
Telephone: 505 982-6199
Area Code

Railroad Commission Use Only:

Approved By: _____ Title: _____ Date: _____

* Designates items certified by company that conducted the inclination surveys.