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NEW MEXICO OIL CONSERVATION COMMISSION

Santa Fe, New Mexico

WELL RECORD

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Mail to District Office, Oil Conservation Commission, to which Form C-101 was sent not later than twenty days after completion of well. Follow instructions in Rules and Regulations of the Commission, Submit in QUINTUPLICATE.

If State Land submit 6 Copies

AREA 640 ACRES

| Il No. 4 in Si. 4 of SE 4, of Sec. 20. T. 20N. R. 9. Red Kountain Pool, McKinley Il is. 338 feet from South line and 1865 feet from east section. 20 If State Land the Oil and Gas Lesse No. is. Section. 20 If State Land the Oil and Gas Lesse No. is. Ulting Commenced. 1935. (date. winks.) 19 Drilling was Completed. 1935. (date. winks.) Illing Commenced. 1935. (date. winks.) 19 Drilling was Completed. 1935. (date. winks.) Illing Commenced. 1935. (date. winks.) 19 Drilling was Completed. 1935. (date. winks.) Illing Commenced. 1935. (date. winks.) 19 Drilling was Completed. 1935. (date. winks.) Illing Commenced. 1935. (date. winks.) 19 Drilling was Completed. 1935. (date. winks.) Illing Commenced. 1935. (date. winks.) 19 Drilling was Completed. 1935. (date. winks.) Illing Commenced. 1935. (date. winks.) 19 Drilling was Completed. 1935. (date. winks.) Illing Commenced. 1935. (date. winks.) 19 Drilling was Completed. 1935. (date. winks.) Illing Commenced. 1935. (date. winks.) 19 Drilling was Completed. 1935. (date. winks.) 1935. (date. winks.) 1935. (date. winks.) Illing Commenced. 1935. (date. winks.) 1935. (date. wink | No. 4 in. S. 4 of SE 44, of Sec 20 T. 20N R. 9. NMI Red Mountain Pool, McKinley Cou 338 feet from South line and 1865 feet from east ition 20 If State Land the Oil and Gas Lease No. is. 18 Commenced 1935 (date, unks.) 19 Drilling was Completed 1935 (date, unks.) 19 of Drilling Contractor. Unknown 19 Unks. 19 Ornes of Drilling Contractor. Unknown 19 Unks. 10 OIL SANDS OB SONES 10 A from 10 No. 5, from 10 No. 5, from 10 No. 6, from 10 | | | | TUPLICATE | | | , — | CATE WELL CORRECTLY |
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| RECORD OF PRODUCTION AND STIMULATION | PECORD OF PRODUCTION AND STIMULATION | | | | PECOED OF F | RODUCTION | AND STIMULA | LION | |
| (Board she Breeze and No of Ote or Gale used interval treated or shot.) | (December 1984) No of Ote or Gale used interval treated or shot.) | | | · | | | | | |
| (Record the Process used, No. of Qts. or Gals. used, interval treated or shot.) | | | | | | | | | |
| his is an old well, formerly known as the Walker 7, drilled in 1935. It was comp | s is an old well, formerly known as the Walker 7, drilled in 1995. It was completed | 1th ope | n hole | rom423 to | 435 (TD). A | s iar as 1 | <u>known.we</u> | LI Was not | Stimilated |
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| his is an old well, formerly known as the Walker 7, drilled in 1935. It was comp ith open hole from 423 to 435 (TD). As far as is known, well was not stimulated. | s is an old well, formerly known as the Walker 7, drilled in 1935. It was completed the hopen hole from 423 to 435 (TD). As far as is known, well was not stimulated. | | | | | | | | |
| his is an old well, formerly known as the Walker 7, drilled in 1935. It was comp | s is an old well, formerly known as the Walker 7, drilled in 1935. It was completed to the standard of the sta | | | | | *********** | | | ********************************* |

BECORD OF DRILL-STEM AND SPECIAL TESTS

If drill-stem or other special tests or deviation surveys were made, submit report on separate sheet and attach hereto

TOOLS USED

| Rotary t | ools were | used from | · | ect · | ю ЦЗ5 | feet, a | and from | ••••• | •••••• | feet to | fe |
|----------|-----------|----------------------|---|----------|---|---|---|-------------|----------------|-------------------------------|----------|
| Cable to | ou were | usea irom | I | cet | | | and from | | •••••• | feet to | fe |
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| Put to P | roducing. | 1935 (| date unknown | <u>}</u> | 19 | Chao | 011 | Co. | pu | t to producing 4-26- | .61. |
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| | | | ATTACH SEPA | RA | TE SHEET IF | ADDITIO | NAL SPA | CE | IS NI | EEDED | |
| I he | reby swea | r or affirm | that the information | ı giv | ven herewith is a | complete a | and correc | t rec | ord of | the well and all work done on | it so f |
| | | | ailable records. | _ | | • | | | | | ••• |
| | | | | | | * | *************************************** | ••••• | •••••• | 5-29-61 | ate) |
| mpany | or Opera | torCh | aco Oil Co. | | ••••• | Address | Вох | 82 9 | 4, A | lbuquerque, N. M. | |
| me | 171 | nux | 26/ | | | Position : | m Tiel- | | Co- | owner | |
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NO. OF COPIES RECEIVED DISTRIBUTION 4 NEW MEXICO OIL CONSERVATION COMMISSION Form C -104 SANTA FE Supersedes Old C-104 and C-110 REQUEST FOR ALLOWABLE 1 Effective 1-1-65 FILE AND 1 u.s.g.s. AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS LAND OFFICE OIL 1 TRANSPORTER GAS OPERATOR PRORATION OFFICE Chaco Oil Company P.O. Box 8294 Reason SPHONING PLYIECK proper box Other (Please explain) Recompletion Oil \mathbf{x} Dry Gas Change in Ownership Casinghead Gas Condensate If change of ownership give name and address of previous owner ____ I. DESCRIPTION OF WELL AND LEASE No. Well No. Pool Name, Including Formation State, Federal or Fee Santa Fe Pacific Red Mt. Mesa Verde Location ___Line and _ Feet From The__ Unit Letter , NMPM. 20 Township 20N Range 9 W I. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Address (Give address to which approved copy of this form is to be sent) or Condensate Name of Authorized Transporter of Oil P O Box 108, Farmington, N. M. 87401 Address (Give address to which approved copy of this form is to be sent) Plateau, Inc. ame of Authorized Transporter of Casinghead Gas or Dry Gas [Twp. Is gas actually connected? When Rge. Unit If well produces oil or liquids, give location of tanks. If this production is commingled with that from any other lease or pool, give commingling order number: V. COMPLETION DATA Plug Back Designate Type of Completion - (X) P.B.T.D. Total Depth Date Spudded Date Compl. Ready to Prod. Tubing Depth Top Oil/Gas Pay Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation Depth Casing Shoe Perforations TUBING, CASING, AND CEMENTING RECORD DEPTH SET SACKS CEMENT HOLE SIZE CASING & TUBING SIZE

(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) V. TEST DATA AND REQUEST FOR ALLOWABLE

| OIL WELL | 4010 | jo. titti depiti or oo jor jatt 24 noare, | | |
|---------------------------------|-----------------|---|---------------------|---------------|
| Date First New Oil Run To Tanks | Date of Test | Producing Method (Flow, pur | np, gas lift, etc.) | OFF FIVE |
| Length of Test | Tubing Pressure | Casing Pressure | Choke Siz | KLOFIATO / |
| Actual Prod. During Test | Oil-Bbls. | Water-Bbls. | Gas - MCF | MOA T @ 1303 |
| | | | | OIL CON. COM. |

GAS WELL Gravity of Condensate Actual Prod. Test-MCF/D Bbls. Condensate/MMCF Length of Test Casing Pressure Choke Size Tubing Pressure Testing Method (pitot, back pr.)

I. CERTIFICATE OF COMPLIANCE

11-1-65

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.

| _ |
|--------------------|
| Manday (Signature) |
| (Signature) |
| Co-Owner |
| (Title) |

(Date)

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

BY Original Signed Emery C. Arnold

OIL CONSERVATION COMMISSION

APPROVED NOV 1 6 1965

TITLE Supervisor Dist. # &

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.

Fee

Same Res'v. Diff. Res'v.

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County

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.