Form 9-330
(Rev. 5-63)

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE* (See other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R355.5.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG*

5. LEASE DESIGNATION AND SERIAL NO.: Contract #362

6. IF INDIAN, ALLOTTEE OR TRIBE NAME: Jicarilla Apache

7. UNIT AGREEMENT NAME:

8. FARM OR LEASE NAME:

9. WELL NO.: #23 Martin-Whittaker

10. FIELD AND POOL, OR WILDCAT: S. Lindrith Gallup-Dakota Ext

11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA: NW¼ Sec. 7/T23N/R4W

12. COUNTY OR PARISH: Rio Arriba

13. STATE: NM

1a. TYPE OF WELL: OIL WELL [XX] GAS WELL [ ] DRY [ ] Other Co-mingled

b. TYPE OF COMPLETION: NEW WELL [X] WORK OVER [ ] DEEP-EN [ ] PLUG BACK [ ] DIFF. RESVR. [ ] Other

RECEIVED
OCT 09 1984
OIL CON. DIV.
DIST. 3

2. NAME OF OPERATOR: W.B. Martin & Asscciates, Inc.

3. ADDRESS OF OPERATOR: 709 North Butler, Farmington, NM 87401

RECEIVED
OCT -1 1984
BUREAU OF LAND MANAGEMENT
FARMINGTON, NEW MEXICO

4. LOCATION OF WELL (*Report location clearly and in accordance with any State requirements.*)
At surface: 1745' FNL and 1190' FWL
At top prod. interval reported below
At total depth

14. PERMIT NO.: BUREAU OF LAND MANAGEMENT FARMINGTON, NEW MEXICO
DATE ISSUED: 1/10/84

15. DATE SPUDDED	16. DATE T.D. REACHED	17. DATE COMPL. (*Ready to prod.*)	18. ELEVATIONS (DF, RKB, RT, GR, ETC.)*	19. ELEV. CASINGHEAD
2/22/84	3/5/84	9/20/84	6854'GR	6854' GR

20. TOTAL DEPTH, MD & TVD	21. PLUG, BACK T.D., MD & TVD	22. IF MULTIPLE COMPL., HOW MANY*	23. INTERVALS DRILLED BY	ROTARY TOOLS	CABLE TOOLS
6570'KB	6568'KB	N/A	→	X	N/A

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*
Tocito-Semilla 6348'-6426'KB
Gallup 5695'-5835'KB

25. WAS DIRECTIONAL SURVEY MADE: Yes

26. TYPE ELECTRIC AND OTHER LOGS RUN
Dual Induction, CP,CL, FDC

27. WAS WELL CORED

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

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
9 5/8"	32#	269'	12¼"	206½ft³ ~~175sxs~~ Class B 2%CaCl2	N/A
7"	23#	4802'KB	8 3/4"	789.70ft³ Class B A-10	N/A
4½"	11.6#	6563'KB	6¼"	266.5ft³ 10-1 Thix.	N/A

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)
4½"	4672'KB	6568'KB	266.5ft³ 10-1 Thixset	

30. TUBING RECORD

SIZE	DEPTH SET (MD)	PACKER SET (MD)
2 3/8"	6375'KB	N/A

31. PERFORATION RECORD (*Interval, size and number*)
Tocito-Semilla 6348'-6426'KB 52 holes .41 size
Gallup-5695'-5835'KB 60 holes .41 size

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
6348-6426'KB	40,000 gal. Oil 33,000# 20/40
5695-5835'KB	95,000 gal. Oil 125,000# 20/40

33.* PRODUCTION

DATE FIRST PRODUCTION	PRODUCTION METHOD (*Flowing, gas lift, pumping—size and type of pump*)	WELL STATUS (*Producing or shut-in*)
9/20/84	Pumping	Producing

DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD →	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
9/20/84	24hrs	3/4"	→	13bbls	30mcf	1	433-1

FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE →	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)
50#	50#	→	13bbls	30mcf		40.5API

34. DISPOSITION OF GAS (*Sold, used for fuel, vented, etc.*)
Vented-Waiting on Contract

TEST WITNESSED BY: Mr. John Jimerfield

35. LIST OF ATTACHMENTS
Deviation Affadavit

ACCEPTED FOR RECORD

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records

SIGNED W.B. Martin Jr. TITLE Operator DATE 09/20/84 1984

*(See Instructions and Spaces for Additional Data on Reverse Side)

FARMINGTON RESOURCE AREA
BY Smm

NMOCC

INSTRUCTIONS

General: This form is designed for submitting a complete and correct well completion report and log on all types of lands and leases to either a Federal agency or a State agency, or both, pursuant to applicable Federal and/or State laws and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State office. See instructions on items 22 and 24, and 33 below regarding separate reports for separate completions.
If not filed prior to the time this summary record is submitted, copies of all currently available logs (drillers, geologists, sample and core analysis, all types electric, etc.), formation and pressure tests, and directional surveys, should be attached hereto, to the extent required by applicable Federal and/or State laws and regulations. All attachments should be listed on this form, see item 35.
Item 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.
Item 18: Indicate which elevation is used as reference (where not otherwise shown) for depth measurements given in other spaces on this form and in any attachments.
Items 22 and 24: If this well is completed for separate production from more than one interval zone (multiple completion), so state in item 22, and in item 24 show the producing interval, or intervals, top(s), bottom(s) and name(s) (if any) for only the interval reported in item 33. Submit a separate report (page) on this form, adequately identified, for each additional interval to be separately produced, showing the additional data pertinent to such interval.
Item 29: *"Sacks Cement":* Attached supplemental records for this well should show the details of any multiple stage cementing and the location of the cementing tool.
Item 33: Submit a separate completion report on this form for each interval to be separately produced. (See instruction for items 22 and 24 above.)

37. SUMMARY OF POROUS ZONES:
SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF; CORED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CUSHION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.
Pictured Cliffs	2523'	3009'	
LaVentanna	3009'	3357'	
Chacra	3357'	4034'	
Cliff House	4034'	4115'	
Menefee	4115'	4677'	
Point Lookout	4677'	5695'	
Gallup	5695'	6385'	
Tocito	6385'	6439'	
Juana Lopez	6439'	6491'	
Semilla	6491'	6568'	

38. GEOLOGIC MARKERS

NAME	TOP MEAS. DEPTH	TOP TRUE VERT. DEPTH
Pictured Cliffs	2523'	Same
LaVentanna	3009'	" "
Chacra	3357'	" "
Cliff House	4034'	" "
Menefee	4115'	" "
Point Lookout	4677'	" "
Gallup	5695'	" "
Tocito	6385'	" "
Juana Lopez	6439'	" "
Semilla	6491'	" "

U. S. GOVERNMENT PRINTING OFFICE 943—16—83528a-1

871-233

W. B. MARTIN & ASSOCIATES, INC.

2110 N. Sullivan, Farmington, New Mexico 87401
Phone: (505) 326-1631, 326-1731

HOLE DEVIATION SURVEY

Operator: W.B. Martin & Associates, Inc.

Well Name: #23 Martin-Whittaker

Well Location: 1745' FNL and 1190' FWL
Unit F Section 7 T23N R4W
Rio Arriba County, New Mexico

Gentlemen:

Four Corners Drilling Company ran the following deviation surveys during the drilling of the subject well and obtained the following results:

FROM	TO	DEVIATION
101	120'	½°
120'	592'	3/4°
592'	1097'	¼°
1097'	1588'	3/4°
1588'	2708'	1¼°
2708'	2396'	¼°
2396'	2865'	½°
2865'	3301'	3/4°
3301'	3800'	1½°
3800'	4430'	1°
4430'	4975'	1¼°
4975'	5410'	1½°
5410'	6038'	1½°
6038'	6537'	1¼°

W.B. Martin, Jr.
Operator

Subscribed and Sworn to me this 13th Day of March, 1984.

7-10-84
My Commission Expires

Pamela K. Jones
Notary Public

OFFICIAL SEAL
PAMELA K. JONES
NOTARY PUBLIC - STATE OF NEW MEXICO
My commission expires 7-10-84
date

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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Form C-104
Revised 10-1-78

OIL CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

3044 IN
Dept. Dec 1984

Operator
W.B. Martin & Associates, Inc.

Address
709 North Butler, Farmington, NM 87401

Reason(s) for filing (Check proper box)
- New Well [X]
- Recompletion [ ]
- Change in Ownership [ ]

Change in Transporter of:
- Oil [ ]
- Casinghead Gas [ ]
- Dry Gas [ ]
- Condensate [ ]

Other (Please explain)

If change of ownership give name and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease State, Federal or Fee	Lease No.
Martin-Whittaker	23	S. Lindrith Gallup-Dakota Ext.	Federal	362

Location

Unit Letter F ; 1745 Feet From The North Line and 1190 Feet From The West

Line of Section 7 Township 23N Range 4W , NMPM, Rio Arriba County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil [X] or Condensate [ ]	Address (Give address to which approved copy of this form is to be sent)
Giant Refining Co.	P.O. Box 256, Farmington, NM 87499
Name of Authorized Transporter of Casinghead Gas [X] or Dry Gas [ ]	**Address (Give address to which approved copy of this form is to be sent)**
El Paso Natural Gas Co.	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
	F	7	23N	4W	N/A	Waiting on Contract

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	Same Res'v.	Diff. Res'v.
	X		X					

Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
2/22/84	9/20/84	6570'KE	6568'KB
Elevations (DF, RKB, RT, GR, etc.)	**Name of Producing Formation**	**Top Oil/Gas Pay**	**Tubing Depth**
6854' GR	S. Lindrith Gallup-Dakota Ext.	5695'KB-6426'KB	6375'KB
Perforations			**Depth Casing Shoe**
[illegible]			6568'KB

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
$12\frac{1}{4}$"	9 5/8" 32# I-55	269'	~~175~~sxs Class B 2%$CaCl_2$
8 3/4"	7" I-55 23#	4802'KB	789.70ft^3 Class B A-10
$6\frac{1}{4}$"	$4\frac{1}{2}$" K-55 11.6#	[illegible]	~~266~~.5ft^3 10-1 Thix.
	2 3/8" Tubing 4.70#	6375'KB	N/A

TEST DATA AND REQUEST FOR ALLOWABLE

(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)

OIL WELL

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
9/20/84	9/21/84	Pumping	
Length of Test	**Tubing Pressure**	**Casing Pressure**	**Choke Size**
24hrs	50#	50#	3/4"
Actual Prod. During Test	**Oil - Bbls.**	**Water - Bbls.**	**Gas - MCF**
13bbls	13bbls	N/A	30mcf

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**

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.

David Green
(Signature)

David Green
Operator Rep.
(Title)

9/24/84
(Date)

OIL CONSERVATION DIVISION

APPROVED SEP 25 1984, 19

BY Original Signed by FRANK T. CHAVEZ

TITLE SUPERVISOR DISTRICT # 3

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.