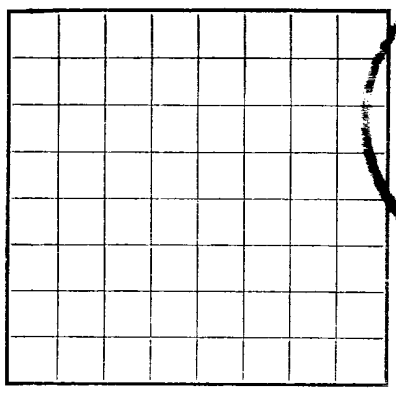
Budget Bureau No. 42-R355.4.
Approval expires 12-31-60.

Form 9-330

U. S. LAND OFFICE Santa Fe
SERIAL NUMBER S.F. 079602
LEASE OR PERMIT TO PROSPECT L. L. McConnell

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY



LOCATE WELL CORRECTLY

LOG OF OIL OR GAS WELL

Company Skelly Oil Company Address P.O. Box 426, Farmington, New Mexico
Lessor or Tract L. L. McConnell Field Undesignated State New Mexico
Well No. 6 Sec. 30 T. 25N R. 3W Meridian N.M.P.M. County Rio Arriba
Location 1570 ft. {N. / S.} of S Line and 1735 ft. {E. / W.} of E Line of Section 30 Elevation 7303'
(Derrick floor relative to sea level)

The information given herewith is a complete and correct record of the well and all work done thereon so far as can be determined from all available records.

Signed P. E. Cooper

Date December 14, 1956 Title District Foreman

The summary on this page is for the condition of the well at above date.

Commenced drilling July 26, 1956 Finished drilling August 16, 1956

OIL OR GAS SANDS OR ZONES

(*Denote gas by G*)

No. 1, from G-3659 to 3743 No. 4, from ____ to ____
No. 2, from ____ to ____ No. 5, from ____ to ____
No. 3, from ____ to ____ No. 6, from ____ to ____

IMPORTANT WATER SANDS

No. 1, from None to ____ No. 3, from ____ to ____
No. 2, from ____ to ____ No. 4, from ____ to ____

CASING RECORD

Size casing	Weight per foot	Threads per inch	Make	Amount	Kind of shoe	Cut and pulled from	Perforated From—	Perforated To—	Purpose
10-3/4	32.75#	8r	H-40	154'	Cement Guide				
5-1/2	14#	8r	J-55	3774'	Cmt. Float & Guide		3690'	3742'	Production

MUDDING AND CEMENTING RECORD

Size casing	Where set	Number sacks of cement	Method used	Mud gravity	Amount of mud used
10-3/4	167'	200	Circulated		
5-1/2	3774	150	Halliburton		

PLUGS AND ADAPTERS

Heaving plug—Material ____ Length ____ Depth set ____
Adapters—Material ____ Size ____

SHOOTING RECORD

Sand-Water Fraced

Size	Shell used	Explosive used	Quantity	Date	Depth shot	Depth cleaned out
Fraced through perforations w/44,300 gals. & 50,000# B.D. 2,000# - Average treating pressure 1700# - Injection Rate 55.4 BPM						

TOOLS USED

Rotary tools were used from 0 feet to 3780' feet, and from ____ feet to ____ feet
Cable tools were used from ____ feet to ____ feet, and from ____ feet to ____ feet

DATES

August 16, 1956 Put to producing ____, 19____

The production for the first 24 hours was ____ barrels of fluid of which ____% was oil; ____% emulsion; ____% water; and ____% sediment. Gravity, °Bé. ____

If gas well, cu. ft. per 24 hours 510 MCF Gallons gasoline per 1,000 cu. ft. of gas ____

~~Rock~~ pressure, lbs. per sq. in. SITP 910# - SICP 925#

EMPLOYEES

Empire Drilling Company, Driller ____, Driller
____, Driller ____, Driller

FORMATION RECORD

FROM—	TO—	TOTAL FEET	FORMATION
0'	3394'	3394'	Sand & Shale
3394'	3659'	265'	Kirtland
3659'	3743'	84'	Pictured Cliffs
3743'	3780'	37'	Lewis
3780'	Total Depth		
3770'	Plug Back Total Depth		

[OVER]

16—43094-4

FORMATION RECORD—Continued

FROM—	TO—	TOTAL FEET	FORMATION

HISTORY OF OIL OR GAS WELL

It is of the greatest importance to have a complete history of the well. Please state in detail the dates of redrilling, together with the reasons for the work and its results. If there were any changes made in the casing, state fully, and if any casing was "sidetracked" or left in the well, give its size and location. If the well has been dynamited, give date, size, position, and number of shots. If plugs or bridges were put in to test for water, state kind of material used, position, and results of pumping or bailing.

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	GAS	
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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-1
Effective 1-1-65

I.

Operator
Texaco Inc., Operator for Texaco Producing Inc. (TPI)

Address
4601 DTC Blvd., Denver, Colorado 80237

Reason(s) for filing (Check proper box)
New well ☐
Recompletion ☐
Change in Ownership ☐
Change in Transporter of: Oil ☐ Dry Gas ☐ Casinghead Gas ☐ Condensate ☒

Other (Please explain)
Change of Operator from Getty Oil Company to Texaco Inc. (Operator for TPI)

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.
McConnell, L.L.	6	South Blanco PC	State, Federal or Fee Federal	07960

Location
Unit Letter J ; 1570 Feet From The South Line and 1735 Feet From The East

Line of Section 30 Township 25N Range 3W, NMPM, Rio Arriba County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☒
Permian Corporation
Address (Give address to which approved copy of this form is to be sent)
P.O. Box 1528 Denver, Colorado 80201

Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☒
El Paso Natural Gas Co.
Address (Give address to which approved copy of this form is to be sent)
P.O. Box 990 Farmington, NM 87499

If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	J	30	25N	3W	Yes	

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

(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.)	
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.

(Signature)
District Manager/Farmington
(Title)
1/28/85
(Date)

OIL CONSERVATION COMMISSION

APPROVED JAN 31 1985

BY _____

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.