(SUBMIT IN TRIPLICATE)

UNITED STATES DEPARTMENT OF THE INTERIOR GEOLOGICAL SURVEY

Land Office	3.87L	76
Lease No	078004	
Unit	,	

30

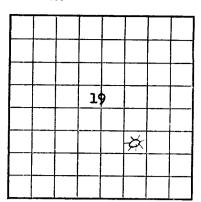
SUNDRY NOTICES AND REPORTS ON WELLS

NOTICE OF INTENTION TO DRILL	SUBSEQUENT REPORT OF WATER SHUT-OFF
NOTICE OF INTENTION TO CHANGE PLANS	SUBSEQUENT REPORT OF SHOOTING OR ACIDIZING.
NOTICE OF INTENTION TO TEST WATER SHUT-OFF	SUBSEQUENT REPORT OF ALTERING CASING.
NOTICE OF INTENTION TO RE-DRILL OR REPAIR WELL	SUBSEQUENT REPORT OF REDRILLING OR REPAIR
NOTICE OF INTENTION TO SHOOT OR ACIDIZE	SUBSEQUENT REPORT OF ABANDONMENT
NOTICE OF INTENTION TO PULL OR ALTER CASING	SUPPLEMENTARY WELL HISTORY
NOTICE OF INTENTION TO ABANDON WELL	
(INDICATE ABOVE BY CHECK MARK	RK NATURE OF REPORT, NOTICE, OR OTHER DATA)
	, 19. 52
Well No. 1 is located 150 ft. fro	from $\begin{Bmatrix} \mathbf{N} \\ \mathbf{S} \end{Bmatrix}$ line and 1650 ft. from $\begin{Bmatrix} \mathbf{E} \\ \mathbf{W} \end{Bmatrix}$ line of sec. 19
6£ 19 27% (¼ Sec. and Sec. No.) (Twp.)	304
	(
(Field) (County	
(2 total)	ty of Subdivision) (State or Territory)
approximately 2000. 3. Drill reduced hole from approximate	g and drill to Pictured Cliffs sandstone at
of Pictured Cliffs samistons at appro-	Minately 2100'.
	(368 0762 3136)
I understand that this plan of work must receive approval in	•
Company THE PRESTIGE REPTRING COMPAN	in writing by the Geological Survey before operations may be commenced.
Company The Part 11. 15 The Carra	
Address 410 Boston Childing	
Address 410 Doston Cailding	By
Address 410 Doston Cailding	By
Address 410 boston building	

• anga)116 6190	TIP	10 湖	ly James		teris.	WO]	Joaco		-	=	The evolu	•9
	. disci			gatero	<i>#7</i> \(\tau\)	07-E	o z	70000 70000	o par	Cladestals anotaba	a allite	her and berustak	•\$

7. Clean out after shot and complete wall rendy for production.

^{6.} Nove off retary tools, tend production string coment plug, drill consact plug, clean out to better and shoet with nittee shot.



OIL SOM.

Budget Bureau No. 42-R355.1. Approval expires 11-30-49.

U. S. LAND OFFICE SANTA FE

SERIAL NUMBER

LEASE OR PERMIT TO PROSPECT

evensen #1 C-senvse

DEPARTMENT OF THE INTERIOR

JANTED STATES

GEOLOGICAL SURVEY

LOG OF OIL OR GAS WELL

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Vell N	lo	1	Sec.	19	T. 27N	R. 10W	Meridian	<u>N.</u>	M.P.	М. Со	unty	Se	an Jua	n 5933 Cr
ocatio	on 1 6	50 ft.{	$\left. egin{aligned} \mathbf{N}_{\mathbf{S}} \\ \mathbf{S} \end{aligned} ight\} \mathbf{of} \ .$	<u>s</u>	Line and	1650 _{ft.}	$\left\{ egin{array}{c} \mathbf{E}_{\mathbf{v}} \end{array} \right\} \mathbf{of} \ldots$	<u>E</u> L	ine o	f Section	19		Elevat	5933 Gr ion 5936 K.
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totary Cable t Th mulsic	tools pe pro	s were	used fred and and an for the water;	om _ 5/11 he fin and r 24	0 1643 , 19_51 rst 24 hor	feet feet sediment.	to .1763 to .1715 DATES Pr	sen ut to barrel	feet, feet, prod	and from and from ucing fluid of whice Gravity,	ch °Bé.		feet to feet to	feet
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UNITED STATES DEPART NEAR TOP THE INTER OR

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LOG OF OIL OR CAS WELL.

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OIL OR GAS SANDS DR MONES

St. Compatibility

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BUTTER OF TAW NAMES BANDS

131 to 30 10 1

It is of the greatest importance to have a complete history of the well. Please state in detail the dates of redrilling, together waith the reaing, state fully, and its results. If there well has been dynamited, give date, size, position, and it number "side tracked" or left in the well, give its size and location, and location dynamited, give date, size, position, and number of shots. If plages or bridges were put in to test for water, state kind of material used, position, and results of pumping or bailing. HISLOBY OF OIL OR GAS WELL

11116 Atom I - 100 Local Late 100 Lag 1 Land the state of the second state of the second se 465# with a special principle of the state of eran kon anilitati i isali ka 1년: 1 1년: 11 - 12 - 1 n was a maan on a maan oo a maa a 1 0-114E LAST THE MARK $\bullet^{(N)}$ 74 O. 623.5 14.1 16-31 4674 2772 F 1234 200 1030 Light of the second these which is a $\Lambda = \underline{1} \underline{1}$. . . FORMATICA $-\mathbf{or}$ TOTAL FEET rrom-(Maye

FORMATION RECORD—Continued

UNITED STATES

DEPARTMENT OF THE INTERIOR

GEOLOGICAL SURVEY

Budget Bureau No. 42-R356.3.
Approval expires 12-31-52.
Santa Fe
LEASE NUMBER 078004

LESSEE'S MONTHLY REPORT

State New Mexico San Juan Kutz Canyon County ... Field . The following is a correct report of operations and production (including drilling and producing April wells) for the month of 410 Boston Building Agent's address . Denver, Colorado SignedCHerry 4521 Agent's title K. C. Forcade. Phone ... BARRELS OF WATER (If none, so state) GALLONS OF GASOLINE RECOVERED REMARKS
depth; if shut down
result of test for ga
content of (288) WELL No. CU. Fr. OF GAS
(In thousands) SEC. AND Twp. RANGE BARRELS OF OIL PRODUCE -sen/se Sec. 19 27N 10W 1 Spudded 4/30/51 Set 991 9-5/8" 29.3# with 60 sacks.

runs or sales of gasoline during the month. (Write "no" where applicable.)

Note.—Report on this form is required for each calendar month, regardless of the status of operations, and must be filed in plicate with the supervisor by the 6th of the succeeding month, unless otherwise directed by the supervisor.

_____runs or sales of oil; _____

No

m 9-329 uary 1950) No

.......... M. cu. ft. of gas sold;

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UNITED STATES

LANG DAME

DEFARTMENT OF THE INTERIOR

GEOLOGICAL SLEVEY

LESSEE'S MONTHLY REPORT OF OPENATIONS

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STATE OF NEW MEXICO OIL CONSERVATION COMMISSION

DISTRICT NO. 3 P. O. Box 697 AZTEC, NEW MEXICO

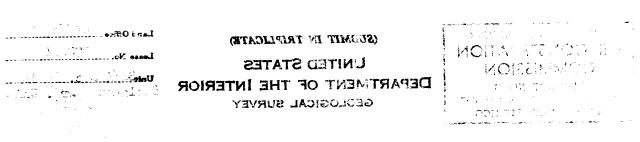
(SUBMIT IN. TRIPLICATE)

UNITED STATES DEPARTMENT OF THE INTERIOR GEOLOGICAL SURVEY

Land Office	Santa fe:
Lease No	078004

UniSE/4 Sec. 19 is Designated Da

SUNDRY NOTICES	AND REPORTS ON WELLS
NOTICE OF INTENTION TO DRILL	
NOTICE OF INTENTION TO CHANGE PLANS	SUBSEQUENT REPORT OF SHOOTING OR ACIDIZING
NOTICE OF INTENTION TO TEST WATER SHUT-OFF.	The state of Stoothing on Acidizing
NOTICE OF INTENTION TO RE-DRILL OR REPAIR WELL	SUBSEQUENT REPORT OF REDRILLING OR REPAIR
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NOTICE OF INTENTION TO PULL OR ALTER CASING	SUPPLEMENTARY WELL HISTORY.
NOTICE OF INTENTION TO ABANDON WELL	
(INDICATE ABOVE BY CHECK MA	ARK NATURE OF REPORT, NOTICE, OR OTHER DATA)
Evensen #1 C SE NW SE	June 25 , 19 51
Well No. 1 is located 1650 ft.	from $\frac{E}{S}$ line and 1650. ft. from $\frac{E}{S}$ line of sec. 19
SE/4 19 27N (% Sec. and Sec. No.) (Twp.)	10W N.M.P.M. (Range) (Meridian)
W. Kutz Canyon San Jua	
(Field) (Com	nty or Subdivision) (State or Territory)
The elevation of the derrick floor above sea	level is _5936_ ft.
DET	AILS OF WORK
itate names of and expected depths to objective sands; show ing points, and a	sizes, weights, and lengths of proposed casings; indicate mudding jobs, coment- ill other important proposed work)
3. Tested casing with 500# pressur and showed no drop in pressur	re held for 30 minutes major to drilling plans
I understand that this plan of work must receive approval ompany The Frontier Refining Com ddress 410 Boston Building	
Denver, Colorado	By Denman J. Delbrait
	Title Denman S. Galbraith, Geologist



SUNDRY NOTICES AND REPORTS ON WELLS

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bdivision) (State or Testitury)	<u> </u>
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OF WORK	DETA Y S
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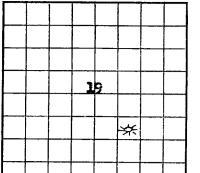
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CORRECTED REPORT

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UNITED STATES
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LOG OF OIL OR GAS WES LOCATE WELL CORRECTLY Company The Frontier Lafinin Company Address /10 Boston suilding, sonver, Colo. Lessor or Tract vonsen-Covern ant Field a ntz Canyon State were state Well No. 1 Sec. 19 T.27% R. 10 Meridian County County $\begin{array}{c} \text{Location 65C} \quad \text{ft.} \begin{array}{c} \{N.\} \\ \text{IS} \end{array} \end{array} \right\} \text{ of } \begin{array}{c} \mathbb{Z} \\ \mathbb{Z} \end{array} \text{ Line of } \begin{array}{c} \mathbb{Z} \\ \mathbb{Z} \end{array} \end{array} \begin{array}{c} \mathbb{Z} \\ \mathbb{Z} \end{array} \begin{array}{c} \mathbb{Z} \end{array} \begin{array}{c} \mathbb{Z} \end{array} \begin{array}{c} \mathbb{Z} \\ \mathbb{Z} \end{array} \begin{array}{c} \mathbb{Z}$ 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 Clenman & Helbraith TitleDensen 3. Calbraith, Caologist The summary on this page is for the condition of the well at above date. Commenced drilling _____, 1951 Finished drilling _____, 1951 OIL OR GAS SANDS OR ZONES 😁 🖟 (Denote gas by G) No. 1, from 1632 to 1721 G. No. 4, from _____ to ____ No. 2, from _____to ___ No. 5, from to _____ No. 6, from _____to IMPORTANT WATER SANDS No. 1, from ______ to _____ No. 3, from _____to No. 4, from _____to CASING RECORD Perforated Threads per Amount Kind of shoe Cut and pulled from Pu::pose From-1001 1031 MUDDING AND CEMENTING RECORD Number sacks of cement 9-5/8" (O sucits piu: PLUGS AND ADAPTERS Heaving plug—Material Length Depth set Adapters—Material Size SHOOTING RECORD Shell used Explosive used Quantity Depth shot TOOLS USED Rotary tools were used from feet to feet to feet to feet to feet to feet to feet Cable tools were used from ______ feet to _____ feet to _____ feet to _____ feet DATES Put to producing 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 Gallons gasoline per 1,000 cu. ft. ef gas Rock pressure, lbs. per sq. in 656 Conden Drilling Conveny , Driller ----, Driller inglish Drilling Company, Driller **011-**

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UNITED STATES DEPARTMENT OF THE INTERIOR

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NEW MEXICO OIL CONSERVATION COMMISSION Santa Fe, New Mexico

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REQUEST FOR (DTD) - (GAS) ALLOWABLE

New Well

This form shall be submitted by the operator before an initial allowable will be assigned to any completed Oil or Gas well. Form C-104 is to be submitted in QUADRUPLICATE to the same District Office to which Form C-101 was sent. The allowable will be assigned effective 7:00 A.M. on date of completion or recompletion, provided this form is filed during calendar month of completion or recompletion. The completion date shall be that date in the case of an oil well when cil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

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OIL CONTEGRATION COMMISSION

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OIL CONSERVATION COMMISSION

1000 RIO BRAZOS ROAD AZTEC, NEW MEXICO

September 29, 1965

Frontier Refining Company 4040 East Louisiana Avenue Denver Colorado 80222

Gentlemen:

Our file does not contain an approved Form C-110 for your Evensen #1 well located in Unit J. Section 19-27N-10W, Fuither Kutz Pictured Cliffs Pool.

Will you please submit Form C-104 (Revised 1-1-65) designating the gas transporter for this well.

Yours very truly

Emery C. Arnold Supervisor, District #3

ECA: ks

cc: OCC, Santa Fe, N.M.

CIL Dokeervation Jo<mark>mmiesio</mark>n TECO PIO ERAZUS POAD

200

ALTEG, NEW MEXICO

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	OIL	OIL GAS	

	SANTA FE /		CONSERVATION COMMISSION FOR ALLOWABLE	Form C-104 Supersedes Old C-104 and C-110
	FILE	KEQUEST	AND	Effective 1-1-65
	U.S.G.S.	AUTHORIZATION TO TR	ANSPORT OIL AND NATURAL	GAS
	LAND OFFICE			
	TRANSPORTER OIL			
	GAS			
	OPERATOR			n *
I.	PRORATION OFFICE			
	•	EFINING COMPANY		
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	, , , , , , , , , , , , , , , , , , ,	·	Other (Please explain)	
			No C-104 or	n filo
				" TITE
į	suança in ounce on p	Cashiqueda das [] Conide		
	If change of ownership give nar	ne		
	and address of previous owner_			
11.	DESCRIPTION OF WELL A	ND LEASE		
ĺ	Lease Name	Lease No. Well No. Pool No.	me, Including Formation	Kind of Lease
ļ				State, Federal or Fee Federal
	Unit Letter \underline{J} ; $\underline{}$,	1650 Feet From The East Lin	ne and 1650 Feet From	The South
Í		m 27N	10W San .	Juan
i	Line of Section	Township Hange	, NMPM, Dati	County
ŦŦ	DESIGNATION OF TRANSP	OPTER OF OU AND NATURAL GA	48	
· [oved copy of this form is to be sent)
į į				
į	Name or Authorized Transporter o	f Casinghead Gas or Dry Gas _X	Address (Give address to which appr	roved copy of this form is to be sent)
	El Paso Natural (Gas Co.	Box 1492, E1 Paso.	Texas
,		Unit Sec. Twp. P.ge.		
	give location of tanks.		Yes	August, 1953
1	If this production is commingled	with that from any other lease or pool.	give commingling order number:	
	COMPLETION DATA	·		
	Decignate Type of Compl	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.
			,	
				1
-	April 30, 19651	May 11, 1951		
- 1		Pictured Cliffs	1634	
	_	iguid nitro 16/2-1715		
ŀ	Shot w/ too qts.		D CENENTING BECORD	1030
-	HOLE 6175			SACKS CEMENT
}				
ŀ				
Ė				133
		<u>L</u> ``	1024	1
v	TEST DATA AND REQUEST	FOR ALLOWARIE (Test must be a	ofter recovery of total volume of load of	l and must be equal to or exceed top allow-
	OIL WELL			
-	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas	lift, etc.)
				OFFICE
Ī	Length of Test	Tubing Pressure	Casing Pressure	Chok SIN LULIVED
		· · · · · · · · · · · · · · · · · · ·		
-	Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gar MCFUCT 1 4 1965
l,			1	CH COM COM
	CAG WELL			
٢		Length of Test	Bbls. Condensate MMCF	
i	Actual Place Per-Meryb	Length of Teat	Bbis. Condensate Midden	Gravity or Condensate
ŀ	Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size
J.	CERTIFICATE OF COURT	ANCE	OIL CONSERV	ATION COMMISSION
11.	CERTIFICATE OF COMPLI	ANCE		
,	THE FRONTIER REFINING COMPANY Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Company Com			
- (Commission have been complied	ed with and that the information given	Omiginal Signed	Emery C. Arnold
1	above is true and complete to	the best of my knowledge and belief.	BY Ungital Signed	
			TITLE Supervisor Dist. # 3	
	J- (1)	4	[]	
	7 20	Tranville	11	compliance with RULE 1104.
		Signature)	well, this form must be accomp	anied by a tabulation of the deviation
	Supt: Drilling a	nd Production	tests taken on the well in acco	ordance with RULE 111.
-	CUPL . WHATHER	(Title)	All sections of this form m able on new and recompleted w	ust be filled out completely for allow-
	October 11, 1965		Fill out only Sections I	II. III. and VI for changes of owner.
-		(Date)	well name or number, or transpor	rter, or other such change of condition.

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.

PRORATION OF F	JSKY (i	<u> </u>
OPERATOR		.3	<u> </u>
TRANSPORTER -	GAS	_/_	
TRANSPORTER	OIL	1	
LAND OFFICE		L	
U.S.G.S.		<u>.</u>	!
FILE		i	2
SANTA FE		1	_
DISTRIBUTIO	N	<u></u>	
NO. OF COPIES RECI	EIVED	1	

	DISTRIBUTION SANTA FE /		ONSERVATION COMMISSION FOR ALLOWABLE		des Old C-104 and C-110
	U.S.G.S. LAND OFFICE	AUTHORIZATION TO TRA	AND NSPORT OIL AND NAT	URAL GAS	
	TRANSPORTER OIL /				
	OPERATOR 3				
1.	PRORATION OFFICE Operator				
	HUSKY OIL COM	(PANY			
	Address 4040 East Lou	nisiana Avenue, Denver, C	Colorado 80222		
	Reason(s) for filing (Check proper box))	Other (Please exp	lain)	
	New Well Recompletion	Change in Transporter of: Oil Dry Gas	s		
	Change in Ownership	Casinghead Gas Condens	sate		
	If change of ownership give name and address of previous owner	The Frontier Refining C	Company-4040 East	Louisiana Ave.,De	80222
II.	DESCRIPTION OF WELL AND Lease Name	LEASE Lease Fulcher RUZ-PI	re Including Formation	Kind of Lease	SE 070004
	evensen	1 FOLCHER NOTZ-PI	CTORED CLIFFS	State, Federal o	eral SF 078004
	Location Unit Letter J 16	550 Feet From The East Line	e and 1650 F	eet From The South	1
	10	vnship 27N Range 1	LOW , NMPM,	San Juan	County
***		TED OF OU AND NATURAL CA	c		
111.	Name of Authorized Transporter of CII El Paso Natural Ge		Address (Give address to wing Box 1492, El.		orm is to be sent)
	Name of Authorized Transporter of Cas	singhead Gas or Dry Gas	Address (Give address to w	nich approved copy of this fo	orm is to be sent)
	El Paso Natural Ge	Unit Sec. Twp. Rge.	Box 1492, El is gas actually connected?	When	
	give location of tanks.	J 19 27N 10W	Yes	August, 195	5.3
	If this production is commingled wit COMPLETION DATA	th that from any other lease or pool,			
	Designate Type of Completic		·		me Resty. Diff. Resty.
	April 30, 1951	May 11, 1951	Total Depth 1763	1705	
	Elevations (DF, RKB, RT, GR. etc.) 5933 Ground	Name of Producing Formation Pictured Cliffs	Top Oil/Gas Pay 1634	Tubing Depth 1692	
	Perforations Shot w/180 qts. liguid	i nitro 1643-1715		Depth Casing S 1636	hoe
			CEMENTING RECORD		S CEMENT
	15-5/4	CASING & TUBING SIZE	DEPTH SET	SACK	150
	7-7/8"	5-1/2"	1636° 1692°	J	55
		<u> </u>	1002		
V.	TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be as	fter recovery of total volume of the property of total volume of the for full 24 hours)	of load oil and must be equa	l to or exceed top allow-
	OIL WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pr	imp, gas lift, etc.)	
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
			Water - Bbls.	Gas - MCF	
	Actual Prod. During Test	Oil-Bhis.	Water - DDIB!		
	GAS WELL				
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Con	densate
	Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size	
VI.	CERTIFICATE OF COMPLIAN	CE	OIL CO	NSERVATION COMM	ISSION 1968
	I hereby certify that the rules and	regulations of the Oil Conservation	APPROVED		, 19
	above is true and complete to the	with and that the information given e best of my knowledge and belief.	By Original Sign	ed by A. R. Kend	IICK
	200	,	1	A ENGINEER DIST. 1	
	こ、あく	Tranvelle	If this is a reques	filed in compliance with t for allowable for a new	ly drilled or deepened
	Manager: Drilling and	ature) i Production	well, this form must be tests taken on the wel	e accompanied by a tabul 1 in accordance with RU	ation of the deviation LE 111.
		itle)	All sections of thi	s form must be filled out apleted wells.	completely for allow-

February 15, 1968 (Date)

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.

O. OF CHPLES MESSIVED DISTRIBUTION NEW MEXICO OF CONSERVATION COMMISSION Form C .04 Supercodes Old C-101 and C-110 REQUEST FOR ALLOWABLE Effective 1-1-65 FILE AND U.S.G.5. AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS LAND OFFICE TRANSPORTER OPERATOR PRORATION OFFICE HUSKY OIL COMPANY OF DELEWARE BOX 380, CODY, WYOMING 92414 Reason(s) for filing (Check proper box) New Well Change in Tra Other (Please explain) Change in Transporter of: Dry Gas Recompletion Oil CHANGE OF OPERATOR NAME Condensate Change in Ownership Casinghead Gas If change of ownership give name and address of previous owner ____ HUSKY OIL COMPANY II. DESCRIPTION OF WELL AND LEASE Well No. Pool Name, including Formation Kind of Lease State, Federal or Fee SF78004 FULCHER KUTZ PICTURE CLIFFS EVENSEN Legation __Line and ____1650 1650 __ Feet From The ____E Feet From The_ Unit Letter SAN JUAN County Range 10W Township 27N Line of Section 19 III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Address (Give address to which approved copy of this form is to be sent) Box 1492, El Paso, Texas EL PASO NATURAL GAS COMPANY Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Casinghead Gas or Dry Gas X Box 1492, El Paso, Texas EL PASO NATURAL GAS COMPANY Is gas actually connected? If well produces oil or liquids, give location of tanks. Unit August 1953 19 27N 10W If this production is commingled with that from any other lease or pool, give commingling order number: IV. COMPLETION DATA Plug Back | Same Resty. Diff. Resty. New Well Workover Deepen Gas Well Oil Well Designate Type of Completion - (X) Date Compl. Ready to Prod. Total Depth Top Oll/Gas Pay Name of Producing Formation Elevations (DF, RKB, RT, GR, etc.) _{aoe} 8 1969 De Perforations OIL CON COM TUBING, CASING, AND CEMENTING RECORD DIST. 3 DEPTH SET 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 Producing Method (Flow, pump, gas lift, etc.) Date of Test Date First New Oil Run To Tanks 1.1741 Choke Size Casing Pressure Length of Test Tubing Pressure Gas - MCF Oll-Bbls. Water - Bbls. A+2-1-7-1989 Actual Prod. During Test OIL COM. COM DIST. GAS WELL Actual Prod. Test-MCF/D Gravity of Condensate Length of Test Bbls. Condensate/MMCF Choke Size Casing Pressure Testing Method (pitot, back pr.) Tubing Pressure

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conscruation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

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H.C. Bentler	ı
11 (1) 12 200 300	1
	1
√ (Signature)	i
	1
District Production Clerk	i
DISCIPLE LLOCHELLOH CIELK	1

(T:12)

April 15, 1969

(Date)

OIL CONSERVATION COMMISSION

MAY 8 19 1969 APPROVED__ BY Original Signed by Emery C. Arnold

SUPERVISOR DIST. #9 TITLE

This form is to be filed in compli-

Ath RULE 1164.

If this is a request for allowable for the ewhy deilled or despected well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance of the RULE 111.

All acctors of this form

All sections of this form must be filled out completely for the sable on new and recompleted walls.

Fill out only Sections I, M. III, and VI for classics of contar, well name or number, or transporter, or other such whiteger of conditions. Expande Forms C-104 must be filed for each pool in multiply completed wells.

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FILE		1	-
U.S.G.S.			
LAND OFFICE			
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TRANSPORTER	GAS	1	
OPERATOR	1		
PRORATION OF	TICE		

	DISTRIBUTION SANTA FE FILE U.S.G.S. LAND OFFICE	REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GA						
1.	TRANSPORTER OIL / GAS / OPERATOR PRORATION OFFICE Operator							
	HUSKY OIL COMPAN	HUSKY OIL COMPANY OF DELEWARE						
	P. O. BOX 380, C							
	Reason(s) for filing (Check proper box) New We!!	Change in Transporter of:	Other (Please explain)					
	Recompletion	Cil Dry Go						
	Change in Cwnership	Cdsinghedd Gds Conde	made []					
	If change of ownership give name and address of previous owner							
II.	DESCRIPTION OF WELL AND I	LEASE	101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101, - 101					
	Lease Name EVENSEN		ame, Including Formation CHER KUTZ PICTURE CLIFFS	Kind of Lease State, Federal or Fee				
	Location T 165	0 E	1650	S				
	Unit Letter 100	O E Line E Line Line E	ne andFeet From	The				
	Line of Section 19 Tow	mship 27N Range	10W , NMPM, SAN J	UAN County				
ш.	DESIGNATION OF TRANSPORT	EER OF OIL AND NATURAL GA	AS					
	Name of Authorized Transporter of Oil PLATEAU, INC.	or Condensate [XX	Address (Give address to which appro	ico				
	Name of Authorized Transporter of Cas	inghead Gas or Dry Gaskx AL GAS COMPANY	Address (Give address to which appro P. O. BOX 1492, EL	1				
	If well produces oil or liquids,	Unit Sec. Twp. Ege.	Is gas actually connected? Wh	en				
	give location of tanks.	J 19 27N 10W	yes	August 1953				
IV.	f this production is commingled with that from any other lease or pool, give commingling order number: COMPLETION DATA Cil Well Gas Well New Well Workover Deepen Plug Back Same Restv. Diff. Restv. Designate Type of Completion - (X)							
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.				
				This Park				
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth				
	Perforations			Depth Casing Shoe				
		TUBING, CASING, AN	D CEMENTING RECORD					
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT				
				JOM.				
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 li	ift, etc.)				
				Choke Size				
	Length of Test	Tubing Pressure	Casing Pressure	Chore Size				
	Actual Prod. During Test	Oil-Bbis.	Water-Bbls.	Gas-MCF				
	GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate				
	Actual Prod. 1est-MCF/D	Langin of Test	Bite: Condensate Nino	Gara, or osliasion				
	Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size				
VI.	CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION FEB 2 0 1970					
	I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given		Original Signed by Emery C. Arnold					
	above is true and complete to the	best of my knowledge and belief.	SUPERVISOR DIST. #					
	_		TITLE					
	A.O. Berthy (Highature)		If this is a request for allow	compliance with RULE 1104. wable for a newly drilled or deepened				
	(Fignature)		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.					
	District Produc		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.					
	February 17, 19	70						
	(Do	ite)						

well name or number, or transporter, or other such changes of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.

(May 1968)	DEPA	UNITED STAT ARTMENT OF THE GEOLOGICAL SI	E INTERIOR	SUBMIT IN TRIPL (Other instructions verse side)	JCATE*	5. LEAS	Form appro Budget Bure B DESIGNATION	ean No 48	21434 L WO.
	SUNDRY NOTICES AND REPORTS ON WELLS (Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use "APPLICATION FOR PERMIT" for such proposals.)					6. IF INDIAN, ADLOTTEE OR TRIBE NAME			
OIL G						7. UNIT	7. UNIT AGREEMENT NAME		
Husky Oi	1 Company	of Delaware				8. FARM OR LEASE NAME			
a. ADDENSE OF OP	RATOR						Evensen 9. WELL NO.		
4. LOCATION OF WI	K JOU, Cod	ly, Wyoming 8241	14	*		1			
5	4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* At surface					Fulcher Kutz 10. Fired and POOL, OR WILDCAT Fulcher Kutz 11. SEC., T., R., M., OR BLE. AND SURVEY OR ARE.			
	1650 Fil & 1650 FEL, Sec. 19, T27N, R10W								
14. PERMIT NO.		15. BLEVATIONS (Show	w whether pr. mr. o	T (D A)		Sec. 19, T27N, R10W			
		5936 R					TY OR PARISH	1	
£€.	Check	Appropriate Box for		Ai hu - 4		San J	uan	New Me	xic
	NOTICE OF IN	TENTION TO:							
TRAT WATER SH	UT-OFF	PULL OR ALTER CASING			UBSEQUE	NT REPORT	f o r :		
PRACTURE TREAT		MULTIPLE COMPLETE		WATER SHUT-OFF			REPAIRING W	Ki i	:
SHOOT OR ACIDI	6B	ABANDON*	X	PRACTURE TREATMENT SHOOTING OR ACIDIZING			ALTERING CA	and the second second	
REPAIR WELL (Other)	L	CHANGE PLANS		(Other)	·		ABUNDONMEN	r*	
1) Cer 2) Cur 3) Cer 4) Cer 5) 10	ment plug, t & pull lo ment plug l ment plug sax and do table to re	f commercial pro T.D. to 1500 wold wold wold wold wold wold wold wold	/25 sax ing sax sax n surface.						
2) Per	forate 5-1 H 43 cay	1/2" casing at 89	50' and ceme	ent to 650' (i	.nside	& out	sid=)		
Loc	ation will	volument. be cleaned afte	er well is	plugged.					
					· 2 · 2 · 4	€.~	4719/44		
8IGNED	t the topegoing i	8 true and correct	Distric	t Production	::'{1'	G C	4	، پسد	
		TITL.	E. Superin:	tendent		DATE .	_ Noverm	b∈ r 5,	
APPROVED BY CONDITIONS OF A	PPROVAL, IF A					DATE			

Form 9-331 (May 1963)

UNITED STATES SUBMIT IN TRIPLICATE* (Other Instructions on reWENT OF THE INTERIOR verse side) 5. Lease Designation and Serial No.

DEPARTMENT OF TO		M Antwe Bine)	078004			
SUNDRY NOTICES AND I	REPORTS C	N WELLS ck to a different reservoir.	6. IF INDIAN, ALLOTTEE	OR TRIBE NAME		
1.	IT- " for such pro	posais.)	7. UNIT AGREEMENT NAME			
OIL GAS WELL TO OTHER			8, FARM OR LEASE NAM	E		
2. NAME OF OPERATOR Husky Oil Company of Delaware			Evensen			
3. ADDRESS OF OPERATOR			9. WELL NO.			
P. O. Box 380, Cody, Wyoming 82	2414		1			
 LOCATION OF WELL (Report location clearly and in accordance also space 17 below.) 	rdance with any S	tate requirements.*	Fulcher Ku			
At wurfnee	•		11. 8 CC., T., R., M., OR B			
1650 FAL & 1650 FEL, Sec. 19, T	27N, R10W		Sec. 19, T27N	, R10W		
14. PERMIT NO. 16. ELEVATIONS.	(Show whether DF,	RT, GR, etc.)	12. COUNTY OR PARISH	13. STATE		
5936	ÀТ.		San Juan	New Mexico		
16. Check Appropriate Box	To Indicate No	ature of Notice, Report, or (
NOTICE OF INTENTION TO:		BEQ :	QUENT REPORT OF:			
TEST WATER SHUT-OFF PULL OR ALTER CA	SINO	WATER SHUT-OFF	REPAIRING P			
FRACTURE TREAT MULTIPLE COMPLE	re	FRACTURE THEATMENT	ALTERING CA	10		
REPAIR WELL CHANGE PLANS		(Other)				
REPAIR WELL CHANGE PLANS (Other)		(Nork: Report result	s of multiple completion bletion Report and Log for	on Well m.)		
Plugged and abandoned as formula of the second plug, T.D. 2) Perforated 5-1/2" of the second perforation of the second perforation of the second plug 180 second plugged perforation of the second plugged perforation of the second plugged perforation of the second plugged perforation of the second plugged perforation of the second plugged perforation of the second plugged perforation of the second plugged perforation of the second plugged perforation of the second plugged perforation of the second plugged perforation of the second plugged perforation of the second plugged perforation of the second plugged perforation of the second plugged perforation of the second plugged perforation of the second plugged perforation of the second plugged perforation of the second plugged perforation of the second plugged perforation of the second plugged perforation of the second plugged perforation of the second plugged perforation of the second plugged perforation of the second plugged perforation of the second plugged perforation of the second plugged perforation of the second plugged perforation of the second plugged perforation of the second plugged perforation of the second plugged perforation of the second plugged perforation of the second plugged perforation of the second plugged perforation of the second plugged perforation of the second plugged perforation of the second plugged perforation of the second plugged perforation of the second plugged perforation of the second plugged perforation of the second plugged perforation of the second plugged perforation of the second plugged perforation of the second plugged perforation of the second plugged perforation of the second plugged perforation of the second plugged perforation of the second plugged perforation of the second plugged perforation of the second plugged perforation of the second plugged perforation of the second plugged perforation of the second plugged perforation of the second plugged perforation of the second plugged perforation of the second plugged perfor	to 1500' w, casing at & ons at 838 ax down bac top of cas	338' GL. ', down casing w/120 ck side of 5-1/2" ca sing.	sax. sing.			
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18. I hereby certify that the foregoing is true and correct		strict Production		10 107/		
SIGNED 11 11	TITLE Su	perintendent		ber 18, 1974		
(This space for Federal or State office use)			DATE			
APPROVED BY	TITLE		DATE	-		