

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPPLICATE*
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R1424.

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.)		5. LEASE DESIGNATION AND SERIAL NO. NM-03605	
1. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
2. NAME OF OPERATOR R & G Drilling Company		7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR c/o Walsh Engineering & Prod. Corp. P. O. Box 254, Farmington, New Mexico 87401		8. FARM OR LEASE NAME Marron	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 854' FNL, 1850' FWL		9. WELL NO. 42-A	
14. PERMIT NO.		10. FIELD AND POOL, OR WILDCAT Largo Chacra	
15. ELEVATIONS (Show whether DF, ET, GR, etc.) 5931' G.L., 5942' K.B.		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 22-T27N-R8W	
		12. COUNTY OR PARISH San Juan	13. STATE New Mexico

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <u>Acreage Dedication</u> <input checked="" type="checkbox"/>	
(Other) <input type="checkbox"/>		(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)	

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

The attached N.M.O.C.C. well location and acreage dedication plat is for the Chacra Formation of the dually completed well Chacra and Mesa Verde.

The NW/4, 160 acres, Section 22 is dedicated to the Chacra Formation.



For: R & G Drilling Company

18. I hereby certify that the foregoing is true and correct

SIGNER: Ewell N. Walsh P.E. TITLE: President, Walsh Engineering & Production Corporation DATE: February 24, 1976

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

NEW MEXICO OIL CONSERVATION COMMISSION
WELL LOCATION AND ACREAGE DEDICATION PLAT

Form C-102
Supersedes C-128
Effective 1-1-65

All distances must be from the outer boundaries of the Section.

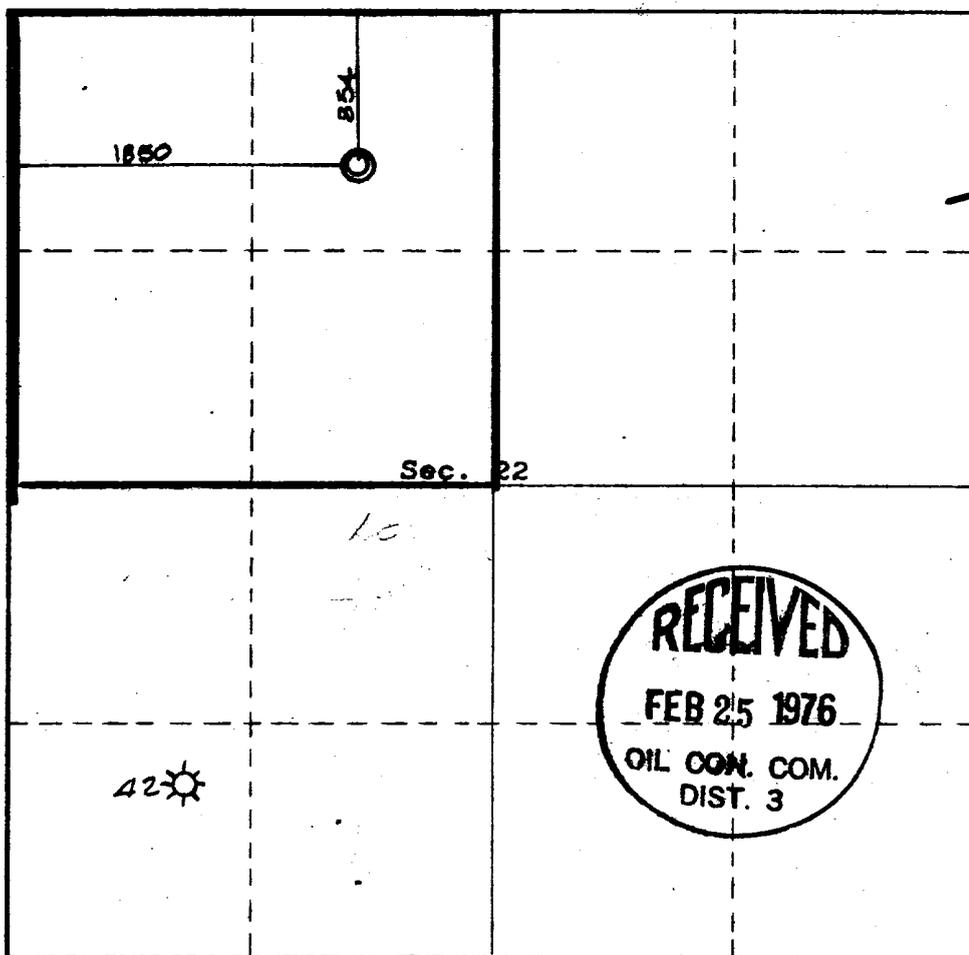
Operator R AND G DRILLING COMPANY		Lease MARRON			Well No. 42-A
Unit Letter C	Section 22	Township 27 NORTH	Range 8 WEST	County SAN JUAN	
Actual Footage Location of Well: 854 feet from the NORTH line and 1850 feet from the WEST line					
Ground Level Elev. 5931	Producing Formation Chacra	Pool Largo Chacra		Dedicated Acreage: 160 Acres	

1. Outline the acreage dedicated to the subject well by colored pencil or hachure marks on the plat below.
2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).
3. If more than one lease of different ownership is dedicated to the well, have the interests of all owners been consolidated by communitization, unitization, force-pooling, etc?

Yes No If answer is "yes," type of consolidation _____

If answer is "no," list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if necessary.) _____

No allowable will be assigned to the well until all interests have been consolidated (by communitization, unitization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interests, has been approved by the Commission.



CERTIFICATION

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.

Ewell N. Walsh

Name **Ewell N. Walsh, P.E.**

Position **President, Walsh Engr. & Production Corporation**

Company **For: R & G Drilling Co.**

Date **February 24, 1976**

I hereby certify that the well location shown on this plat was plotted from field notes, actual surveys made by me or under my supervision, and that the same is true and correct to the best of my knowledge and belief.

Date Surveyed **22 January, 1975**

Registered Professional Engineer and/or Land Surveyor
James P. Leese

JAMES P. LEESE
Certificate No. **1463**



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(Other instructions on reverse side)

Form approved. ✓
Budget Bureau No. 42-R1424.

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.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		5. LEASE DESIGNATION AND SERIAL NO. NM-03605
2. NAME OF OPERATOR R & G Drilling Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR c/o Walsh Engineering and Prod. Corp. P. O. Box 254 Farmington, New Mexico 87401		7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 854' FNL, 1850' FWL		8. FARM OR LEASE NAME Marron
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 5931' GL, 5942' KB	9. WELL NO. 42-A
		10. FIELD AND POOL, OR WILDCAT Blanco Mesa Verde and Largo Chacra
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 22-127N-R8W N. M. P. M.
		12. COUNTY OR PARISH San Juan
		13. STATE New Mexico

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <u>Initial Potential Test</u> <input checked="" type="checkbox"/>	
(Other) <input type="checkbox"/>		(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)	

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Test Date 2-18-76

Test for Chacra Formation. Test for Mesa Verde Formation submitted on Form 9-330.

Flowing 3 hours - 3/4" choke - Flowing Pressures. Tubing - 42 psig, Casing - 223 psig. 3/4" choke volume - 668 MCFPD, CAOF - 699 MCF/D. Shut in pressures. Tubing and Casing 1011 MCF/D.

Well waiting on pipeline connection.



RECEIVED

FEB 24 1976

U. S. GEOLOGICAL SURVEY

18. I hereby certify that the foregoing is true and correct
 For: R & G Drilling
 _____ President, Walsh Engineering
 SIGNED: [Signature] P. E. TITLE: Production Corporation DATE: 2-23-76

(This space for Federal or State office use)

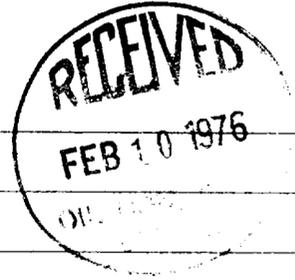
APPROVED BY _____ TITLE _____ DATE _____
 CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

NO. OF COPIES RECEIVED	5
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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL 1 GAS 1
OPERATOR	1
PRORATION OFFICE	

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-110
Effective 1-1-65



Operator
R & G Drilling Company

Address
**c/o Walsh Engineering and Prod. Corp.
P.O. Box 254, Farmington, New Mexico 87401**

Reason(s) for filing (Check proper box) Other (Please explain)

New Well Change in Transporter of:
 Recompletion Oil Dry Gas
 Change in Ownership Casinghead Gas Condensate

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.
Marron	42-A	Blanco Mesa Verde	State, Federal or Fee Federal	NM 03605
Location				
Unit Letter C	854'	Feet From The North Line and 1850'	Feet From The West	
Line of Section 22	Township 27N	Range 8W	NMFM, San Juan	County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Inland Corporation	P.O. Box 1528 Farmington, N.M. 87401					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
El Paso Natural Gas Company	P.O. Box 990 Farmington, N. M. 87401					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	C	22	27N	8W	No	Unknown

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.
		X						
Date Spudded	Date Compl. Ready to Prod.	Total Depth		P.B.T.D.				
11-18-75	12-19-75	4660'		4630'				
Elevations (DF, RKB, RT, CR, etc.)	Name of Producing Formation	Top Oil/Gas Pay		Tubing Depth				
593' GL, 5942' KB	Mesa Verde	4424'		4379'				
Perforations				Depth Casing Shoe				
4424'-4450', 4474'-4500', 4520'-4526' and 4566'-4576'				4660'				
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12-1/4"	8-5/8"		233		140			
7-7/8"	4-1/2"		4660'		848			
					(Stage tool - 3783')			

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (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)

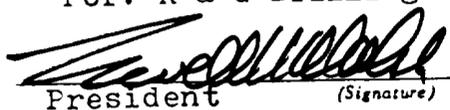
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL Flowing Pressures, Tubing 110 psig			
Actual Prod. Test MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
3/4" 1,509	3 hours	-0-	-----
CAOP - 1,709	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size
Testing Method (pitot, back pr.)	920 psig	Packer	3/4"
Back Pressure			

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.

For: **R & G Drilling Company**


President (Signature) **Walsh** P.E.
Engineering & Prod. Corp. (Title)
2/9/76 (Date)

OIL CONSERVATION COMMISSION
APPROVED **MAR 3 1976**, 19_____
BY **Original Signed by A. R. Kendrick**
TITLE **SUPERVISOR DIST. #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