

AREA 640 ACRES
LOCATE WELL CORRECTLY

NEW MEXICO OIL CONSERVATION COMMISSION

Santa Fe, New Mexico

WELL RECORD

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

Well No. 1, in NE $\frac{1}{4}$ of NE $\frac{1}{4}$, of Sec. 10, T. 1N, R. 10E, NMPM.
Pool, San Juan County.
Well is 100 feet from North line and 750 feet from East line of Section 10. If State Land the Oil and Gas Lease No. is 123
Drilling Commenced 1-1-68, 1968 Drilling was Completed 1-15-68, 1968
Name of Drilling Contractor Smith & Sons
Address 123 Main St, Santa Fe, NM
Elevation above sea level at Top of Tubing Head 5000 The information given is to be kept confidential until 12-31-68, 1968

OIL SANDS OR ZONES

No. 1, from 100 to 500 No. 4, from 500 to 1000
No. 2, from 500 to 1000 No. 5, from 1000 to 1500
No. 3, from 1000 to 1500 No. 6, from 1500 to 2000

IMPORTANT WATER SANDS

Include data on rate of water inflow and elevation to which water rose in hole.

No. 1, from 100 to 500 feet.
No. 2, from 500 to 1000 feet.
No. 3, from 1000 to 1500 feet.
No. 4, from 1500 to 2000 feet.

CASING RECORD

| SIZE | WEIGHT PER FOOT | NEW OR USED | AMOUNT | KIND OF SHOE | CUT AND PULLED FROM | PERFORATIONS | PURPOSE |
|--------------|-----------------|-------------|------------|--------------|---------------------|--------------|-----------|
| <u>4 1/2</u> | <u>10</u> | <u>NEW</u> | <u>750</u> | <u>10</u> | <u>10</u> | <u>10</u> | <u>10</u> |

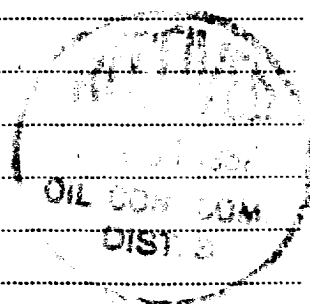
MUDDING AND CEMENTING RECORD

| SIZE OF HOLE | SIZE OF CASING | WHERE SET | NO. SACKS OF CEMENT | METHOD USED | MUD GRAVITY | AMOUNT OF MUD USED |
|--------------|----------------|-----------|---------------------|-------------|-------------|--------------------|
| <u>6 1/2</u> | <u>4 1/2</u> | <u>10</u> | <u>10</u> | <u>10</u> | <u>10</u> | <u>10</u> |

RECORD OF PRODUCTION AND STIMULATION

(Record the Process used, No. of Qts. or Gals. used, interval treated or shot.)

Result of Production Stimulation 1000
Depth Cleaned Out 1000



F

ORD 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 tools were used from.....feet to.....feet, and from.....feet to.....feet.
Cable tools were used from.....feet to.....feet, and from.....feet to.....feet.

PRODUCTION

Put to Producing....., 19.....

OIL WELL: The production during the first 24 hours was.....barrels of liquid of which.....% was
was oil;% was emulsion;% water; and.....% was sediment. A.P.I.
Gravity.....

GAS WELL: The production during the first 24 hours was.....M.C.F. plus.....barrels of
liquid Hydrocarbon. Shut in Pressure.....lbs.

Length of Time Shut in.....

PLEASE INDICATE BELOW FORMATION TOPS (IN CONFORMANCE WITH GEOGRAPHICAL SECTION OF STATE):

Southeastern New Mexico

Northwestern New Mexico

| | | |
|--------------------|---------------------|----------------------------|
| T. Anhy..... | T. Devonian..... | T. Ojo Alamo..... |
| T. Salt..... | T. Silurian..... | T. Kirtland-Fruitland..... |
| B. Salt..... | T. Montoya..... | T. Farmington..... |
| T. Yates..... | T. Simpson..... | T. Pictured Cliffs..... |
| T. 7 Rivers..... | T. McKee..... | T. Menefee..... |
| T. Queen..... | T. Ellenburger..... | T. Point Lookout..... |
| T. Grayburg..... | T. Gr. Wash..... | T. Mancos..... |
| T. San Andres..... | T. Granite..... | T. Dakota..... |
| T. Glorieta..... | T. | T. Morrison..... |
| T. Drinkard..... | T. | T. Penn..... |
| T. Tubbs..... | T. | T. |
| T. Abo..... | T. | T. |
| T. Penn..... | T. | T. |
| T. Miss..... | T. | T. |

FORMATION RECORD

| From | To | Thickness in Feet | Formation | From | To | Thickness in Feet | Formation |
|------|----|----------------------|------------------------|------|----|----------------------|-----------|
| | | | See Attached Schedule. | | | | |

OIL CONSERVATION COMMISSION

AZTEC DISTRICT OFFICE

No. Copies Received 5

DISTRIBUTION

| | | |
|-------------------|---|---|
| Operator | 1 | |
| Santa Fe | 1 | |
| Proration Office | | |
| State Land Office | | |
| U. S. G. S. | 2 | |
| Transporter | | |
| File | 1 | ✓ |

ATTACH SEPARATE SHEET IF ADDITIONAL SPACE IS NEEDED

I hereby swear or affirm that the information given herewith is a complete and correct record of the well and all work done on it so far
as can be determined from available records.

Company or Operator.....Address.....
Name.....Position or Title.....
(Date).....