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NEW MEXICO OIL CONSERVATION COMMISSION  
WELL COMPLETION OR RECOMPLETION REPORT AND LOG

## a. TYPE OF WELL

OIL WELL ☐ GAS WELL ☐ DRY ☐ OTHER ☐

## b. TYPE OF COMPLETION

NEW WELL ☒ WORK OVER ☐ DEEPEN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ OTHER ☐

## 2. Name of Operator

Union Texas Petroleum Corp.

## 3. Address of Operator

375 US Highway 64, Farmington, NM 87401

## 4. Location of Well

UNIT LETTER E LOCATED 1850 FEET FROM THE North LINE AND 870 FEET FROMTHE West LINE OF SEC. 4TWP. 30NRGE. 11W

NMPM

## 15. Date Spudded

10/31/86

## 16. Date T.D. Reached

11/12/86

## 17. Date Compl. (Ready to Prod.)

12/23/86

## 18. Elevations (DF, RKB, RT, GR, etc.)

5785 GL, 5797 KB

## 19. Elev. Casinghead

5786

## 20. Total Depth

7004 KB

## 21. Plug Back T.D.

6944 KB

## 22. If Multiple Compl., How Many

2

## 23. Intervals Drilled By

Rotary Tools

0-7004

## Cable Tools

## 24. Producing Interval(s), of this completion - Top, Bottom, Name

584-6788 Dakota

## 26. Type Electric and Other Logs Run

DIL-GR, FDC-CNL-GR

## 25. Was Directional Survey Made

No

## 27. Was Well Cored

No

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

CASING SIZE	WEIGHT LB./FT.	DEPTH SET	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
10-3/4	40.5	302	14-3/4	see attached	
7-5/8	26.4	2669	9-7/8	see attached	

29. LINER RECORD				30. TUBING RECORD		
SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN	SIZE	DEPTH SET
5-1/2	2458	6987	see attach.		1.90	6752

## 31. Perforation Record (Interval, size and number)

See attached

32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
DEPTH INTERVAL	AMOUNT AND KIND MATERIAL USED
See attached	

## 33. PRODUCTION

Date First Production	Production Method (Flowing, gas lift, pumping - Size and type pump)				Well Status (Prod. or Shut-in)	
12/23/86	Flowing				Shut-in	
Date of Test	Hours Tested	Choke Size	Producing or Test Period	Oil - Bbl.	Gas - MCF	Water - Bbl.
1/14/87	3	3/4		0	301	
Flow Tubing Press.	Casing Pressure	Calculated 24-Hour Rate	Oil - Bbl.	Gas - MCF	Water - Bbl.	Oil Gravity - API (Corr.)
190	packer		0	2411	0	N/A

## 34. Disposition of Gas (Sold, used for fuel, vented, etc.)

Vented (to be sold)

Test Witnessed By  
Cliff Gates

## 35. List of Attachments

Cementing, Perforation and Stimulation Records

## 36. I hereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief.

SIGNED

Robert C. Frank

TITLE

Permit Coordinator

02/06/87



Section 28, Cementing Record

Surface Casing: 305 sxs (360 cu.ft.) Class "B" containing 2% CaCl<sub>2</sub>. Circulate 11 bbls (62 cu.ft.) of cement to surface.

Intermediate Casing: 300 sxs (861 cu.ft.) 65/35 POZ containing 12% gel and 12-1/4# gilsonite/sk, tailed by 100 sxs (118 cu.ft.) C1 "B" with 2% CaCl<sub>2</sub>. Circulate 24 bbls (135 cu.ft.) of cement to surface.

Production Liner: 635 sxs (997 cu.ft.) 50/50 POZ with 4% gel, 6-1/4# gilsonite sk and 10# salt/sk. Lost circulation. Cement top at 4529' KB by bond log dated 12/4/86.

Section 31, Perforation Record

Dakota: Total 30 - 0.32" holes, 2 spf at 6684', 86', 6764', 66', 68', 70', 72', 74', 76', 78', 80', 82', 84', 86', 88'.

Total 14 - 0.32" holes, 1 spf at 6874', 76', 78', 80', 82', 84', 86', 88', 90', 92', 94', 96', 98', 6900'.

Section 32, Stimulation Record

6684'-6788' Acidize: 1600 gals 15% HCL and 60 - 7/8" ball sealers.  
Frac: 100,000# 20/40 sand in 100,000 gals 20# crosslinked gel water.

6874'-6900' Acidize: 1000 gals 15% HCL and 28 - 7/8" ball sealers.

6874'-6900' Squeeze: 50 sxs (59 cu.ft.) C1 "B" with 2% CaCl<sub>2</sub>. Squeeze to 3300 psi.



**LTR**



**Job separation sheet**

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-104  
Revised 10-01-78  
Format 06-01-83  
Page 1

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator Union Texas Petroleum Corporation

Address 375 US Highway 64,,Farmington, NM 87401

Reason(s) for filing (Check proper box)

<input checked="" type="checkbox"/> New Well	Change in Transporter of:	<input type="checkbox"/> Dry Gas
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Oil	<input type="checkbox"/> Condensate
<input type="checkbox"/> Change in Ownership	<input type="checkbox"/> Casinghead Gas	

Other (Please explain) \_\_\_\_\_

If change of ownership give name and address of previous owner \_\_\_\_\_

II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>Haynie</u>	Well No. <u>2M</u>	Pool Name, including Formation <u>Basin Dakota</u>	Kind of Lease State, Federal or Fee <u>Fee</u>	Lease No.
Location Unit Letter <u>E</u> : <u>1850</u> Feet From The <u>North</u> Line and <u>870</u> Feet From The <u>West</u> Line of Section <u>4</u> Township <u>30N</u> Range <u>11W</u> , NMPM, <u>San Juan</u> 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"/> <u>Conoco, Inc. Surface Trans.</u>	Address (Give address to which approved copy of this form is to be sent) <u>P. O. Box 1429, Bloomfield, NM 87413</u>
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> <u>Southern Union Gathering Co.</u>	Address (Give address to which approved copy of this form is to be sent) <u>P. O. Box 1809, Bloomfield, NM 87413</u>
If well produces oil or liquids, give location of tanks. Unit <u>E</u> Sec. <u>4</u> Twp. <u>30N</u> Rge. <u>11W</u>	Is gas actually connected? <u>No</u> When <u>Approx. 4/15/87</u>

If this production is commingled with that from any other lease or pool, give commingling order number: \_\_\_\_\_

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. 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 is true and complete to the best of my knowledge and belief.

Robert C. Frank  
(Signature)  
Permit Coordinator  
(Title)  
February 6, 1987  
(Date)

OIL CONSERVATION DIVISION  
FEB 10 1987  
APPROVED \_\_\_\_\_  
BY \_\_\_\_\_ Original Signed by FRANK T. CHAVEZ  
SUPERVISOR  
TITLE \_\_\_\_\_

This form is to be filed in compliance with RULE 1104.  
If this is a request for allowable for a newly drilled or deeper 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 all wells on new and recompleted wells.  
Fill out only Sections I, II, III, and VI for changes of own well name or number, or transporter, or other such change of condition.  
Separate Forms C-104 must be filed for each pool in multi-completed wells.

#### 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	X					
Date Spudded 10/31/86	Date Compl. Ready to Prod. 11/12/86	Total Depth 7004 KB		P.B.T.D. 6944 KB					
Elevations (DF, RKB, RT, CR, etc.) 5785 GL, 5797 KB	Name of Producing Formation Dakota	Top Oil/Gas Pay 6684		Tubing Depth 6752					
Perforations 6684-6788 Dakota							Depth Casing Shoe		
<b>TUBING, CASING, AND CEMENTING RECORD</b>									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT				
14-3/4	10-3/4		302		305 sxs (360 cu.ft.)				
9-7/8	7-5/8		2669		400 sxs (979 cu.ft.)				
6-3/4	5-1/2		2458-6987 liner		635 sxs (997 cu.ft.)				
	1.90		6752						

#### 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)

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 2411	Length of Test 3 hrs	Bbls. Condensate/MMCF 0	Gravity of Condensate 0
Testing Method (pilot, back pr.) back pressure	Tubing Pressure (shut-in) 1873	Casing Pressure (shut-in) N/A (packer)	Choke Size 3/4