

District I  
PO Box 880, Hobbs, NM 88241-1980

State of New Mexico  
Energy, Minerals & Natural Resources Department

Form C-104  
Revised February 10, 1994

District II  
PO Drawer DD, Artesia, NM 88211-0719

OIL CONSERVATION DIVISION  
RECEIVED  
OIL CONSERVATION DIVISION  
PO Box 2088  
Santa Fe, NM 87504-2088

Instruction on back  
Submit to Appropriate District Office  
5 Copies

District III  
1000 Rio Brazos Rd., Aztec, NM, 87410

District IV  
PO Box 2088, Santa Fe, NM 87504-2088

☐ AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

<sup>1</sup> Operator Name and Address ARCH PETROLEUM INC.  10 DESTA DRIVE, STE. 420E, MIDLAND TX 79705		<sup>2</sup> OGRID Number 000962
		<sup>3</sup> Reason for Filing Code CO EFFECTIVE MARCH 1, 1996
<sup>4</sup> API Number 30 - 025-21684	<sup>5</sup> Pool Name FOWLER UPPER YESO	
<sup>7</sup> Property Code 014915	<sup>8</sup> Property Name LILLIE	<sup>6</sup> Pool Code 26680
		<sup>9</sup> Well Number 4

II. <sup>10</sup> Surface Location

UI or Lot. No. F	Section 23	Township 24S	Range 37E	Lot Idn.	Feet from the 1880	North/South Line NORTH	Feet from the 1830	East/West Line WEST	County LEA
---------------------	---------------	-----------------	--------------	----------	-----------------------	------------------------------	--------------------------	---------------------------	---------------

<sup>11</sup> Bottom Hole Location

UI or Lot. No. F	Section	Township	Range	Lot Idn.	Feet from the	North/South Line	Feet from the	East/West Line	County
<sup>12</sup> Lse Code P	<sup>13</sup> Producing Code P	Method	<sup>14</sup> Gas Date	Connection	<sup>15</sup> C-129 Permit Number	<sup>16</sup> C-129 Effective Date	<sup>17</sup> C-129 Expiration Date		

III. Oil and Gas Transporters

<sup>18</sup> Transporter OGRID	<sup>19</sup> Transporter Name and Address	<sup>20</sup> POD	<sup>21</sup> O/G	<sup>22</sup> POD ULSTR Location and Description
007440	EOTT ENERGY OPERATING LP P. O. BOX 1660, MIDLAND, TX 79702	718310	O	
020809	SID RICHARDSON CARBON 201MAIN ST,STE.2300 FT.WORTH,TX76102	718330	G	

IV. Produced Water

<sup>23</sup> POD 718350	<sup>24</sup> POD ULSTR Location and Description
-----------------------------	--

V. Well Completion Data

<sup>25</sup> Spud Date	<sup>26</sup> Ready Date	<sup>27</sup> TD	<sup>28</sup> PBTD	<sup>29</sup> Perforations
<sup>30</sup> Hole Size	<sup>31</sup> Casing & Tubing Size	<sup>32</sup> Depth Set	<sup>33</sup> Sacks Cement	

VI. Well Test Data

<sup>34</sup> Date New Oil	<sup>35</sup> Gas Delivery Date	<sup>36</sup> Test Date	<sup>37</sup> Test Length	<sup>38</sup> Tbg. Pressure	<sup>39</sup> Csg. Pressure
<sup>40</sup> Choke Size	<sup>41</sup> Oil	<sup>42</sup> Water	<sup>43</sup> Gas	<sup>44</sup> AOF	<sup>45</sup> Test Method

<sup>46</sup> I hereby certify that the rules of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Signature: *Bobbie Brooks*

Printed Name:  
BOBBIE BROOKS

Title:  
PRODUCTION ANALYST

Date:  
3-12-96

Phone:  
915-685-1961

OIL CONSERVATION DIVISION

Approved by:

Title: *[Signature]*  
DISTRICT 1 SUPERVISOR

Approved Date: MAR 18 1996

<sup>47</sup> If this is a change of operator fill in the OGRID number and name of the previous operator

Previous Operator Signature

Printed Name

Title

Date

OIL CONSERVATION DIVISION  
RECEIVED

Submit 3 Copies  
to Appropriate  
District Office

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-103  
Revised 1-1-89

OIL CONSERVATION DIVISION

P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

DISTRICT I

P.O. Box 1980, Hobbs, NM 88240

DISTRICT II

P.O. Drawer Dd, Artesia, NM 88210

DISTRICT III

1000 Rio Brazos Rd., Aztec, Nm 87410

API NO. (assigned by OCD on New Wells)

30-025-21684

5. Indicate Type of Lease

STATE ☐

FEE ☒

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name

LILLIE

8. Well No.

4

9. Pool name or Wildcat

FOWLER UPPER YESO

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"  
(FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well:

OIL

GAS

WELL ☒

WELL ☐

OTHER

2. Name of Operator

ARCH PETROLEUM INC.

3. Address of Operator

777 TAYLOR ST., STE. IIA, FORT WORTH, TX 76102

4. Well Location

Unit Letter

F

1880 Feet From The NORTH

Line and

1830 Feet From The WEST

Line

Section

23

Township

24S

Range

37E

NMPM

LEA

County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)

GL=32

11

Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐

PLUG AND ABANDON ☐

TEMPORARILY ABANDON ☐

CHANGE PLANS ☐

PULL OR ALTER CASING ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐

ALTER CASING ☐

COMMENCE DRILLING OPNS. ☐

PLUG AND ABAN. ☐

CASING TEST AND CMT JOB ☐

OTHER: ADD PERFS & FRAC TREAT ☒

12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including  
estimated date of starting any proposed work) SEE RULE 1103.

7/20/95 Clean out fill F/5548'-5660'. Perf F/ 5498', 5440', 5409', 5349', 5313', 5290', 5248', 5214',  
5195', 5177', & 5168' w/4- 0.45" diameter JHPF, total 44 shots. Acidize w/total 4,300 gals 15% NEFE  
HCL. MIRU Dowell-Schlumberger & Frac perfs F/5162'-5579' DN 3-1/2" WS w/71,000 gals of 40# gel  
w/50-60% CO2 and 226,000# 16/30 mesh Ottawa sand(w/last stage containing propnet) @ 35 bpm and a  
max pressure of 7000#. Flow & swab back load. Install production equipment and resume production on  
8/3/95.

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

SIGNATURE

*Bobbie Brooks*

TITLE

PROD. ANALYST

DATE:

10-4-95

TYPE OR PRINT NAME

BOBBIE BROOKS

TELEPHONE NO.

915/685-1961

APPROVED BY

*Jerry Leub*

TITLE

DISTRICT 1 SUPERVISOR

DATE

OCT 06 1995

CONDITIONS OF APPROVAL, IF ANY:

Submit 3 Copies  
to Appropriate

District Office

OIL CONSERVATION DIVISION

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State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-103  
Revised 1-1-89

95 JU 14 OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT I

P.O. Box 1980, Hobbs, NM 88240

DISTRICT II

P.O. Drawer Dd, Artesia, NM 88210

DISTRICT III

1000 Rio Brazos Rd., Aztec, Nm 87410

API NO. (assigned by OCD on New Wells)

30-025-21684

5. Indicate Type of Lease

STATE ☐

FEE ☒

6. State Oil & Gas Lease No.

**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"  
(FORM C-101) FOR SUCH PROPOSALS.)

7. Lease Name or Unit Agreement Name

LILLIE

1. Type of Well:

OIL

GAS

WELL ☒

WELL ☐

OTHER

2. Name of Operator

ARCH PETROLEUM INC.

8. Well No.

4

3. Address of Operator

777 TAYLOR ST., STE. IIA, FORT WORTH, TX 76102

9. Pool name or Wildcat

FOWLER UPPER YESO

4. Well Location

Unit Letter

F

1880 Feet From The NORTH

Line and

1830 Feet From The

WEST

Line

Section 23

Township 24S

Range 37E

NMPM

LEA

County

10. Elevation(Show whether DF, RKB, RT, GR, etc.)

11

Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

**NOTICE OF INTENTION TO:**

PERFORM REMEDIAL WORK ☐

PLUG AND ABANDON ☐

TEMPORARILY ABANDON ☐

CHANGE PLANS ☐

PULL OR ALTER CASING ☐

OTHER:

ADD PERFS & FRAC TREAT ☒

**SUBSEQUENT REPORT OF:**

REMEDIAL WORK ☐

ALTER CASING ☐

COMMENCE DRILLING OPNS. ☐

PLUG AND ABAN. ☐

CASING TEST AND CMT JOB ☐

OTHER: ☐

12. Describe Proposed or Completed Operations(Clearly state all pertinent details, and give pertinent dates, including  
estimated date of starting any proposed work) SEE RULE 1103.

**WE PROPOSE:**

MIRU PU, NUBOP, PERF. CSG. @ 5171,5179,5197,5216,5250,5291,5315,5352,5411,  
5442, 5500 W/4-0.5" JHPF. ACIDIZE ALL PERFS. USING STADDLE PACKER. SAND  
FRAC TREAT ALL PERFS. FLOW BACK. NDBOP NUWH. RETURN WELL TO  
PRODUCTION.

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

SIGNATURE

*Bobbie Brooks*

TITLE

PROD. ANALYST

DATE:

7-5-95

TYPE OR PRINT NAME

BOBBIE BROOKS

TELEPHONE NO. 915/685-1961

APPROVED BY

TITLE

DISTRICT 1 SUPERVISOR

DATE

JUL 10 1995

CONDITIONS OF APPROVAL, IF ANY

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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	GAS
OPERATOR	
PRODUCTION OFFICE	

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

CHEVRON U.S.A. INC.

Address

P. O. Box 670, Hobbs, NM 88240

Reason(s) for filing (Check proper box)

- ☐ New Well  
☐ Recompletion  
☒ Change in Ownership

Change in Transporter of:

- ☐ Oil ☐ Dry Gas  
☐ Casinthead Gas ☐ Condensate

Other (Please explain)

Name Change Effective 7-1-85

If change of ownership give name and address of previous owner

Gulf Oil Corp., P. O. Box 670, Hobbs, NM 88240

II. DESCRIPTION OF WELL AND LEASE

Lease Name <i>Lillie</i>	Well No. <i>4</i>	Pool Name, including Formation <i>Gardner Upper Gess</i>	Kind of Lease State, Federal or Free <i>Free</i>	Lease No.
Location Unit Letter <i>F</i> : <i>1880</i> Feet From The <i>North</i> Line and <i>1870</i> Feet From The <i>West</i>				
Line of Section <i>23</i> Township <i>24S</i> Range <i>37E</i> , NMPM, <i>Lea</i> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/> <i>Shell Pipeline Corp.</i>	Address (Give address to which approved copy of this form is to be sent) <i>Box 1910, Midland TX 79701</i>	
Name of Authorized Transporter of Casinthead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> <i>El Paso Natural Gas Co.</i>	Address (Give address to which approved copy of this form is to be sent) <i>Box 1492 El Paso, TX 79999</i>	
If well produces oil or liquids, give location of tanks.	Unit	Sec.
	Twp.	Rge.
	Is gas actually connected?	When
	<i>Yes</i>	<i>Unknown</i>

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.

*R.D. Pite*  
(Signature)

Area Engineer  
(Title)

5-31-85  
(Date)

OIL CONSERVATION DIVISION

AUG - 2 1985

APPROVED \_\_\_\_\_, 19

BY *James A. Taylor*  
TITLE DISTRICT 1 SUPERVISOR

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 multiple completed wells.

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U.S.G.S.	
LAND OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION

**RECEIVED**  
AUG 26 1971

Form C-103  
Supersedes Old  
C-102 and C-103  
Effective 1-1-65

5a. Indicate Type of Lease

State ☐ Fee ☒

5. State Oil & Gas Lease No.

**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 -" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name
2. Name of Operator <b>Gulf Oil Corporation</b>	8. Farm or Lease Name <b>Lillie</b>
3. Address of Operator <b>Box 670, Hobbs, New Mexico 88240</b>	9. Well No. <b>4</b>
4. Location of Well UNIT LETTER <b>F</b> <b>1880</b> FEET FROM THE <b>North</b> LINE AND <b>1870</b> FEET FROM THE <b>West</b> LINE, SECTION <b>23</b> TOWNSHIP <b>24-S</b> RANGE <b>37-E</b> NMPM.	10. Field and Pool, or Wildcat <b>Fowler Upper Yeso</b>
15. Elevation (Show whether DF, RT, GR, etc.) <b>3200' GL</b>	12. County <b>Lea</b>

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  
NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐  
TEMPORARILY ABANDON ☐  
PULL OR ALTER CASING ☐ CHANGE PLANS ☐  
OTHER ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐  
CASING TEST AND CEMENT JOB ☐  
OTHER ☐

**Perforated and frac treated.**

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

**5660' FB.**

Pulled rods, pump and tubing. Perforated 5-1/2" casing with 4, 1/2" JHPF at 5160-62', 5184-86', 5236-38', 5284-86' and 5306-08'. Frac treated new perforations with 2500 gallons of 15% NE acid, 35,000 gallons of gel water and 60,000# sand. Flushed with 122 barrels of gel water. Maximum pressure 2700#, ISIP 2200#, after 5 minutes 1300#, after 10 minutes 1200#. AIR 40 bpm. Ran 2-7/8" tubing and set at 5582' with SN at 5551'. Ran rods and pump and returned well to production.

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

SIGNED *Bobland*

TITLE **Area Production Manager**

DATE **August 20, 1971**

APPROVED BY *Joe Stacey*

TITLE **SUPERVISOR, DISTRICT I**

DATE **AUG 20 1971**

CONDITIONS OF APPROVAL, IF ANY

Submit 5 Copies  
Appropriate District Office  
DISTRICT I  
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-104  
Revised 1-1-89  
See Instructions  
at Bottom of Page

OIL CONSERVATION DIVISION

P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

DISTRICT II  
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III  
1000 Rio Brazos Rd., Aztec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS

I. **DATE** JAN 16 AM 9 29

Operator Chevron U.S.A., Inc.	Well API No. 30-025-21684
Address P.O. Box 1150 Midland, TX 79702	
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)	
New Well <input type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Operator <input type="checkbox"/>	Casinghead Gas <input checked="" type="checkbox"/> Condensate <input type="checkbox"/>
If change of operator give name and address of previous operator	

II. DESCRIPTION OF WELL AND LEASE

Lease Name Lillie	Well No. 4	Pool Name, Including Formation Fowler Upper Yeso	Kind of Lease State, Federal or Fee	Lease No.
Location				
Unit Letter F	1880	Feet From The North	Line and 1870	Feet From The West
Section 23	Township 24S	Range 37E	NMPM,	Lea County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Sid Richardson Carbon & Gasoline	Address (Give address to which approved copy of this form is to be sent) 201 Main St., Suite 3000, Ft. Worth, TX 76102					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected? Yes	When? 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
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

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 Tank	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 (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

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

*J. K. Ripley*  
Signature

J. K. Ripley

Tech Assistant

Printed Name

12/27/91

Title

(915)687-7148

Date

Telephone No.

OIL CONSERVATION DIVISION

JAN 13 '92

Date Approved

By

Title

DISTRICT I SUPERVISOR

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.

P. O. Box 1980, Hobbs, NM 88240

OIL CONSERVATION DIVISION

DISTRICT II  
P. O. Drawer DD, Artesia, NM 88210

RECEIVED

P. O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III  
1000 Rio Brazos Rd., Aztec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS

I.

Operator <b>Arch Petroleum Inc.</b>		Well API No. <b>30 - 025-21684</b>
Address <b>777 Taylor St., Penthouse II-A, Ft. Worth Club Tower, Ft. Worth, TX 76102</b>		
Reason (s) for Filling (check proper box) <input checked="" type="checkbox"/> Other (Please explain) <b>EFFECTIVE APRIL 1, 1994</b>		
New Well <input type="checkbox"/>	Change in Transporter of:	
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/>	Dry Gas <input type="checkbox"/>
Change in Operator <input checked="" type="checkbox"/>	Casinghead Gas <input type="checkbox"/>	Condensate <input type="checkbox"/>
If change of operator give name and address of previous operator <b>Chevron U.S.A., Inc., P. O. Box 1150, Midland, TX 79702</b>		

II. DESCRIPTION OF WELL AND LEASE

Lease Name <b>Lillie</b>	Well No. <b>4</b>	Pool Name, Including Formation <b>Fowler Upper Yeso 26680</b>	Kind of Lease State, Federal or Fee	Lease No.
Location Unit Letter <b>F</b> : <b>1880</b> Feet From The <b>North</b> Line and <b>1830</b> Feet From The <b>West</b> Line Section <b>23</b> Township <b>24S</b> Range <b>37E</b> , NMPM, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) <b>P. O. Box 2648, Houston, TX 77252</b>					
<b>Shell Pipeline Cor</b>						
Name of Authorized Transporter of Casinghead Gas or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) <b>201 Main St., Ste. 2300, Ft. Worth, TX 76102</b>					
<b>Sid Richardson Carbon</b>						
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected ? <b>Yes</b>	When ? <b>Unknown</b>

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	Plugback	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		
Peforations						Depth Casin; g		
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET			SACKS CEMENT		

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 Tank	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 (pilot, back press.)	Tubing Pressure (Shut - in)	Casing Pressure (Shut - in)	Choke Size

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief. <b>Rick Vanderslice</b> Signature <b>Rick Vanderslice</b> Printed Name <b>3/31/94</b> Date <b>Oper. Mgr.</b> Title <b>(915)685-1961</b> Telephone No.	<b>OIL CONSERVATION DIVISION</b> Date Approved <b>APR 04 1994</b> By <b>[Signature]</b> Title <b>Geologist</b>
--	---

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C - 104 must be filed for each pool in multiply completed wells.

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LAND OFFICE	
OPERATOR	

Form C-105  
Revised 1-1-65

**HOBBBS OFFICE D. C. C.**  
**NEW MEXICO OIL CONSERVATION COMMISSION**  
**WELL COMPLETION OR RECOMPLETION REPORT AND LOG**

APR 20 1 25 PM '66

5a. Indicate Type of Lease  
State ☐ Fee ☒  
State Oil & Gas Lease No. \_\_\_\_\_

1a. TYPE OF WELL OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> DRY <input type="checkbox"/> OTHER _____						7. Unit Agreement Name	
b. TYPE OF COMPLETION NEW WELL <input checked="" type="checkbox"/> WORK OVER <input type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input type="checkbox"/> DIFF. RESVR. <input type="checkbox"/> OTHER _____						8. Farm or Lease Name Lillie	
2. Name of Operator Gulf Oil Corporation						9. Well No. 4	
3. Address of Operator P. O. Box 980 - Kermit, Texas						10. Field and Pool, or Wildcat Fowler Blinebry	
4. Location of Well UNIT LETTER <u>F</u> LOCATED <u>1880</u> FEET FROM THE <u>North</u> LINE AND <u>1870</u> FEET FROM THE <u>West</u> LINE OF SEC. <u>23</u> TWP. <u>24S</u> RGE. <u>37E</u> NMPM						12. County Lea	
15. Date Spudded 3-18-66		16. Date T.D. Reached 4-5-66		17. Date Compl. (Ready to Prod.) 4-17-66		18. Elevations (DF, RKB, RT, GR, etc.) 3200.2 GR	
19. Elev. Casinghead 3198		20. Total Depth 5695'		21. Plug Back T.D. 5660'		22. If Multiple Compl., How Many ---	
23. Intervals Drilled By Rotary Tools 0 - 5695		24. Producing Interval(s), of this completion - Top, Bottom, Name 5401 - 5579 - Fowler Blinebry		25. Was Directional Survey Made No		26. Type Electric and Other Logs Run Microlaterolog, Laterlog, Sonic Log - Gamma Ray	
27. Was Well Cored No		28. CASING RECORD (Report all strings set in well)					
CASING SIZE		WEIGHT LB./FT.		DEPTH SET		HOLE SIZE	
8-5/8"		24#		1019		12-1/4"	
5-1/2"		15.5#		5695		7-7/8"	
CEMENTING RECORD		AMOUNT PULLED					
410 sacks		None					
640 sacks		None					
29. LINER RECORD				30. TUBING RECORD			
SIZE		TOP		BOTTOM		SACKS CEMENT	
None							
SIZE		DEPTH SET		PACKER SET			
2-7/8"		5557		None			
31. Perforation Record (Interval, size and number) 5401-03'; 5426-28'; 5466-68'; 5512-14' and 5577-79' w/4 - .72 JHPF				32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC. DEPTH INTERVAL Treated each set of perforations w/2000 gals. gelled wtr. pad, 2000 gal w/1# (20-40) SPG and 4000 gal w/1-1/2# (20-40) SPG. Total 40,000 gal gelled water frac.			
33. PRODUCTION							
Date First Production 4-14-66		Production Method (Flowing, gas lift, pumping - Size and type pump) Flowing 24/64" choke				Well Status (Prod. or Shut-in) Producing	
Date of Test 4-17-66		Hours Tested 24		Choke Size 24/64		Prod'n. For Test Period →	
Oil - Bbl. 155		Gas - MCF 42		Water - Bbl. 52		Gas - Oil Ratio 271	
Flow Tubing Press. 150		Casing Pressure 500		Calculated 24-Hour Rate →		Oil Gravity - API (Corr.) 36.4	
34. Disposition of Gas (Sold, used for fuel, vented, etc.) Sold						Test Witnessed By J. D. Gough	
35. List of Attachments Microlaterolog, Laterlog, Sonic Log - Gamma Ray							
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 <u>H. F. Swannack</u>		TITLE <u>Area Production Manager</u>				DATE <u>April 19, 1966</u>	



19270 JUN 21

100

23.

## Northwestern New Mexico

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80	81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	100
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80	81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	100

1100

1 32 11.00

HUBBS OFFICE O. C. C.

WELL NAME AND NUMBER Lillie No. 4

LOCATION Unit F, Sec. 23, T-24S, R-37E  
(New Mexico give U.S.T&R; Texas give S<sub>1</sub> Blk., Surv. & Twp. when required)

OPERATOR GULF OIL CORPORATION

DRILLING CONTRACTOR Johnn Drilling Company

APR 19 12 38 PM '66

The undersigned hereby certifies that he is an authorized representative of the drilling contractor who drilled the above-described well and that he has conducted deviation tests and obtained the following results:

<u>Degrees @ Depth</u>	<u>Degrees @ Depth</u>	<u>Degrees @ Depth</u>	<u>Degrees @ Depth</u>
<u>462</u>	<u>3/4</u>	<u>6.10</u>	<u>6.10</u>
<u>743</u>	<u>1</u>	<u>4.92</u>	<u>11.02</u>
<u>1020</u>	<u>1-1/4</u>	<u>6.07</u>	<u>17.09</u>
<u>1450</u>	<u>2-3/4</u>	<u>20.68</u>	<u>37.77</u>
<u>1617</u>	<u>3-3/4</u>	<u>10.94</u>	<u>48.71</u>
<u>1721</u>	<u>3-3/4</u>	<u>6.81</u>	<u>55.52</u>
<u>1912</u>	<u>4-3/4</u>	<u>15.85</u>	<u>71.37</u>
<u>2154</u>	<u>4-1/4</u>	<u>17.96</u>	<u>89.33</u>
<u>2302</u>	<u>3-3/4</u>	<u>9.69</u>	<u>99.02</u>
<u>2402</u>	<u>3-1/2</u>	<u>6.10</u>	<u>105.12</u>
<u>2493</u>	<u>3</u>	<u>4.76</u>	<u>109.88</u>
<u>2651</u>	<u>2-1/4</u>	<u>6.21</u>	<u>116.09</u>
<u>2776</u>	<u>1-3/4</u>	<u>3.84</u>	<u>119.93</u>
<u>2888</u>	<u>1/2</u>	<u>.97</u>	<u>120.90</u>

APR 19 12 38 PM '66

Degrees @ Depth	Degrees @ Depth	Degrees @ Depth	Degrees @ Depth
3116	1/2	1.98	122.88
3379	3/4	3.47	126.35
3519	3/4	1.85	128.20
3648	3/4	1.70	129.90
3828	3/4	2.38	132.28
4201	2	13.02	145.30
4533	1-1/4	7.27	152.57
4857	1-1/2	8.49	161.06
5170	1-1/4	6.85	167.91
5392	1-1/2	5.82	173.73
5695	1-1/4	6.64	180.37
		Total Displacement	180.37

Total Displacement	180.37
--------------------	--------

Drilling Contractor Johnn Drilling Company

By Harold Lewis

Subscribed and sworn to before me this 15 day of April, 1966

**My Commission Expires:**

6-1-67

~~Notary Public~~

County,

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OPERATOR	

HOBBS OFFICE O.C.C.  
NEW MEXICO OIL CONSERVATION COMMISSION

APR 13 1 14 PM '66  
32

Form C-103  
Supersedes Old  
C-102 and C-103  
Effective 1-4-65

5a. Indicate Type of Lease
State <input type="checkbox"/> Fee <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.

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 -" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name
2. Name of Operator Gulf Oil Corporation	8. Farm or Lease Name Lillie
3. Address of Operator P. O. Box 980, Kermit, Texas	9. Well No. 4
4. Location of Well UNIT LETTER <u>F</u> <u>1880</u> FEET FROM THE <u>North</u> LINE AND <u>1870</u> FEET FROM THE <u>West</u> LINE, SECTION <u>23</u> TOWNSHIP <u>24 S</u> RANGE <u>37 E</u> NMPM.	10. Field and Pool or Wildcat UNDERSIGNED Fowler Blinbry
15. Elevation (Show whether DF, RT, GR, etc.) 3200.2	12. County Lea

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐  
TEMPORARILY ABANDON ☐  
PULL OR ALTER CASING ☐  
OTHER ☐

PLUG AND ABANDON ☐  
CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐  
COMMENCE DRILLING OPNS. ☐  
CASING TEST AND CEMENT JOB ☒  
OTHER ☐

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

Ran 171 jts. & 1 cut jt. (5680.50') 5 1/2" OD 15.50# J-55 casing set at 5695' with DV tool @ 3804'. Cemented 1st stage w/140 sacks 16% gel, 3% salt and .2% HR-7, and 150 sacks Incor neat. Complete 1st stage @ 6:00 A. M., 4-6-66. Circulated through DV tool, 2nd stage consisted of 250 sacks 16% gel, 3% salt & .2% HR-7 and 100 sacks neat cement, plug down at 12:30 P. M. 4-6-66. Temperature survey indicated top of cement @ 2000'. Waited on cement, drilled out DV tool. Tested to 1000# for 30 minutes, no drop in pressure, drilled out to 5660', released rig.

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

SIGNED M. M. Whitaker TITLE Area Engineer DATE April 11, 1966  
W. W. Whitaker  
APPROVED BY Joe J. Ramey TITLE SUPERVISOR DISTRICT DATE 5  
CONDITIONS OF APPROVAL, IF ANY:

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LAND OFFICE	
OPERATOR	

HOBBS OFFICE O.C.C.  
NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103  
Supersedes Old  
C-102 and C-103  
Effective 1-1-65

MAR 24 PM 1 15

MAR 22 1 12 PM '66

5a. Indicate Type of Lease	
State <input type="checkbox"/>	Fee <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.	

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 -" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		7. Unit Agreement Name
2. Name of Operator Gulf Oil Corporation		8. Farm or Lease Name Lillie
3. Address of Operator P. O. Box 980, Kermit, Texas		9. Well No. 4
4. Location of Well UNIT LETTER <u>F</u> <u>1880</u> FEET FROM THE <u>North</u> LINE AND <u>1870</u> FEET FROM THE <u>West</u> LINE, SECTION <u>23</u> TOWNSHIP <u>24-S</u> RANGE <u>37-E</u> NMPM.		10. Field and Pool, or Wildcat Fowler Blinebry
15. Elevation (Show whether DF, RT, GR, etc.) Later		12. County Lea

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input checked="" type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input checked="" type="checkbox"/>
OTHER <input type="checkbox"/>	OTHER <input type="checkbox"/>
PLUG AND ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
CHANGE PLANS <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1703.

Johnn Drilling Company spudded 12-1/4" hole at 6:00 P. M. 3-18-66.

Run 32 jts. (1,003') of 8-5/8" 24# J-55 casing set @ 1019' and cemented with 310 sacks of 16% gel and 100 sacks regular w/2% CaCl<sub>2</sub>. Plug down @ 1:30 A. M., 3-20-66. Circulated approximately 10 sacks, waited on cement, tested casing, BOP and rams w/1000# for 30 minutes. No drop in pressure. Drilling ahead.

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.		
SIGNED <u>H. F. Swannack</u>	TITLE <u>Area Production Manager</u>	DATE <u>3-21-66</u>
APPROVED BY <u>[Signature]</u> TITLE <u>[Signature]</u> DATE <u>[Signature]</u>		
CONDITIONS OF APPROVAL, IF ANY:		

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LAND OFFICE	
OPERATOR	

NEW MEXICO OIL & GAS COMMISSION

MAR 8 11 25 AM '66

Form C-101  
Revised 1-1-65

5A. Indicate Type of Lease	
STATE <input type="checkbox"/>	FEE <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.	

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work		7. Unit Agreement Name	
b. Type of Well OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		8. Farm or Lease Name Lillie	
2. Name of Operator Gulf Oil Corporation		9. Well No. 4	
3. Address of Operator P. O. Box 980, Kermit, Texas		10. Field and Pool, or Wildcat Fowler Blinebry	
4. Location of Well UNIT LETTER F LOCATED 1880 FEET FROM THE North LINE AND 1870 FEET FROM THE West LINE OF SEC. 23 TWP. 24-S RGE. 37-E NMPM		12. County Lea	
19. Proposed Depth 5900		19A. Formation Blinebry	
20. Rotary or C.T. Rotary		21. Elevations (Show whether DF, RT, etc.) Later	
21A. Kind & Status Plug. Bond Blanket		21B. Drilling Contractor Not Awarded	
22. Approx. Date Work will start March 15, 1966			

23.

PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
12-1/4	8-5/8	24#	800	285	Circulate
7-9/8	5-1/2	14 & 15.5#	5900	475	3100

It is proposed to drill with rotary tools to approximately 5900'

Cement must tie back into 4 1/2" casing

APPROVAL VALID  
FOR 30 DAYS UNLESS  
DRILLING COMMENCED

EXPIRES 6/7/66

IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM: IF PROPOSAL IS TO DEEPEN OR PLUG BACK, GIVE DATA ON PRESENT PRODUCTIVE ZONE AND PROPOSED NEW PRODUCTION ZONE. GIVE BLOWOUT PREVENTER PROGRAM, IF ANY.

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

Signed H. F. Swannack Title Area Production Manager Date March 7, 1966

(This space for State Use)

APPROVED BY [Signature] TITLE Engineer District DATE MAR 9 1966

CONDITIONS OF APPROVAL, IF ANY:

**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.

**HOBBS OFFICE O.C.C.**  
**MAR 8 11 25 AM '66**

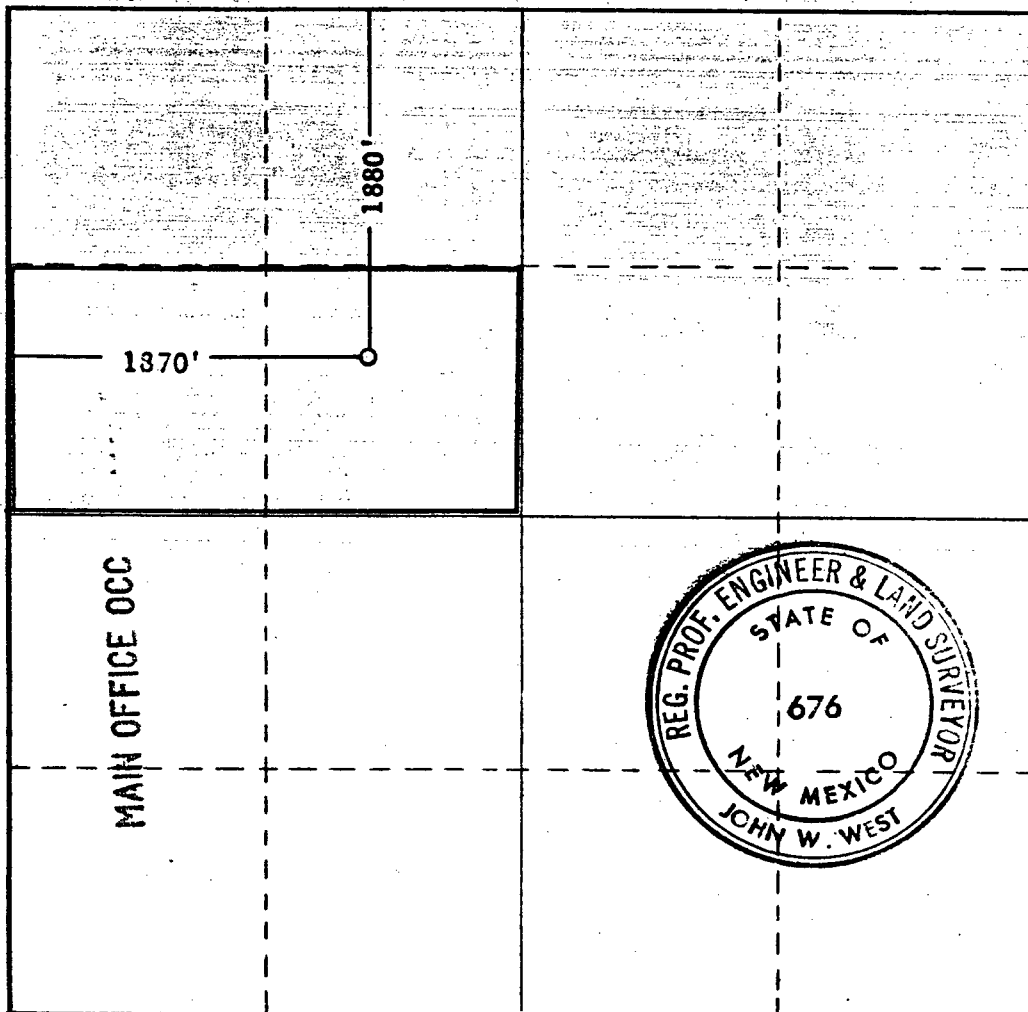
Operator <b>GULF OIL CORP</b>		Lease <b>LILLIE</b>		Well No. <b>4</b>	
Unit Letter <b>F</b>	Section <b>23</b>	Township <b>24 SOUTH</b>	Range <b>37 EAST</b>	County <b>LEA</b>	
Actual Footage Location of Well:					
<b>1880</b> feet from the <b>NORTH</b> line and		<b>1870</b> feet from the <b>WEST</b> line			
Ground Level Elev. <b>Later</b>	Producing Formation <b>Blinebry</b>	Pool <b>Fowler</b>	Dedicated Acreage: <b>80</b> 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.

Name *H. J. Swannack*  
Position  
**Area Production Manager**  
Company  
**Gulf Oil Corporation**  
Date  
**March 7, 1966**

I hereby certify that the well location shown on this plat was plotted from field notes of 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  
**FEBRUARY 10, 1966**  
Registered Professional Engineer  
and/or Land Surveyor

*John W. West*  
Certificate No.

**676**

0 330 660 990 1320 1650 1980 2310 2640 2000 1500 1000 500

OWWO

COUNTY LEA FIELD Fowler STATE NM MN 21684

OPR GULF OIL CORP. MAP

4 Lillie

Sec 23, T-24-S, R-37-E CO.ORD

1880' FNL, 1830' FWL of Sec

Re-Cmp 8-20-71 CLASS OWOF EL 32092

	FORMATION	DATUM	FORMATION	DATUM
CSG & SX - TUBING				
8 5/8" at 1019' w/410 sx				
5 1/2" at 5695' w/540 sx				
LOGS EL GR RA IND HC A				

TD 5695'; PBD 5660'

(Upper Yeso) Perfs 5160-5579' NO NEW POTENTIAL

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CONT. DATE PROP DEPTH 5579' TYPE WO

8-31-71 F.R.C. 9-2-71; Opr's Elev. 3200' GL  
PD 5579' WO (Upper Yeso)  
(Orig. comp. 4-17-66 thru Perfs 5401-5579',  
OTD 5695', OPB 5660')  
TD 5695'; PBD 5660'; COMPLETE  
Perf 5160-62', 5184-86', 5236-38', 5284-86',  
5306-08' w/4 SPF  
Acid (5160-5308') 2500 gals  
Frac (5160-5308') 35,000 gals wtr + 60,000# sd

9-2-71 COMPLETION REPORTED



COUNTY	LEA	FIELD	Fowler	STATE	NM
OPR	GULF OIL CORP.			MAP	
	4 Lillie				
	Sec. 23, T-24-S, R-37-E			CO-ORD	
	1880' FNL, 1830' FWL of Sec.			MN 21684	
	Spd 3-18-66; 1870			CLASS	
	Cmp 4-17-66;			EL	
	FORMATION	DATUM	FORMATION	DATUM	
CSG & SX - TUBING					
8 5/8" at 1019' w/410 sx					
5 1/2" at 5695' w/540 sx					
LOGS EL GR RA IND HC A					
	TD 5695'; PBD 5660';				

IP(Blinebry) Perf 5401-5579' F 155 BOPD + 52 BLW. Pot based on 24 hr test thru 24/64" chk. GOR 271; CP 500#; TP 150#. Grav 36.4.

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CONT.	Johnn Drlg. Co.	PROP DEPTH	5900'	TYPE
DATE				

F.R. 3-3-66; Opr's Elev. 3214' KB  
PD 5900' - Blinebry  
Contractor - Johnn Drlg. Co.

3-28-66 Drlg.. 3100'  
4-4-66 Drlg. 5150' 1m  
4-11-66 TD 5695'; WOC  
DST (Lower Paddock) 5150-5250', open 1 hr, GTS 45 min, no gauge, rec 360' GC sul wtr w/trace oil, ISIP 1618#, FP 94-141#, FSIP 1828#, HP 2785-2782#;

4-18-66 TD 5695'; PBD 5660'; Swbg load  
Perf 5401-03', 5426-28', 5466-68', 5512-14', 5577-79' w/4 SPF;  
Frac (5401-5579') 32,000 gals jelled brine + 40,000# sd; Inj @ 33.3 BPM;

LEA                      Fowler      NM  
GULF OIL CORP.    4   Lillie

Sec. 23, T-24-S, R-37-E  
Page #2

**[REDACTED]**-18-66      Continued  
Swbd & flwd 271 BLW + 39 EO in 10 hrs;  
4-26-66      TD 5695'; PBD 5660'; COMPLETE  
LOG TOPS: Glorieta 4863', Blinebry 5346';  
4-28-66      COMPLETION REPORTED

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LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND/OR BBBS OFFICE O. C. C.  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-105  
Effective 1-1-65

APR 19 12 38 PM '66

APR 22 1 AM '66

APR 22 1 AM '66

I.

Operator Gulf Oil Corporation	
Address P. O. Box 980, Kermit, Texas	
Reason(s) for filing (Check proper box)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of ownership give name and address of previous owner

CHANGE

OK R-3987

II. DESCRIPTION OF WELL AND LEASE

Lease Name Lillie	Well No. 4	Pool Name, Including Sample to Fowler-Blinebry	Kind of Lease State, Federal or Fee Fee
Location Unit Letter F ; 1880 Feet From The North Line and 1870 Feet From The West Line of Section 23 , Township 24S Range 37E , NMPM, Lea County			

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Shell Pipe Line Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1910, Midland, Texas					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> El Paso Natural Gas Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1394, Jal, New Mexico					
If well produces oil or liquids, give location of tanks.	Unit E	Sec. 23	Twp. 24S	Rge. 37E	Is gas actually connected? Yes	When 1-15-66

If this production is commingled with that from any other lease or pool, give commingling order number: Not commingled

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well <input type="checkbox"/>	New Well <input checked="" type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Res'tv. <input type="checkbox"/>	Diff. Res'tv. <input type="checkbox"/>
Date Spudded 3-18-66	Date Compl. Ready to Prod. 4-17-66		Total Depth 5695'		P.B.T.D. 5660'			
Pool Fowler	Name of Producing Formation Blinebry		Top Oil/ Gas Pay 5401'		Tubing Depth 5557'			
Perforations 5401-03', 5426-28', 5466-68', 5512-14', 5577-79'					Depth Casing Shoe 5694'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12-1/4"	8-5/8" Casing		1019		410			
7-7/8"	5-1/2" Casing		5695		640			
5-1/2" Casing	2-7/8" Tubing		5557					

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 4-14-66	Date of Test 4-17-66	Producing Method (Flow, pump, gas lift, etc.) Flow	
Length of Test 24 hours	Tubing Pressure 150	Casing Pressure 500	Choke Size 24/64"
Actual Prod. During Test 207	Oil-Bbls. 155	Water-Bbls. 52	Gas-MCF 42

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	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.

M. M. Whitaker

(Signature)

W. W. Whitaker

Area Engineer

(Title)

April 18, 1966

(Date)

OIL CONSERVATION COMMISSION

APPROVED

, 19

BY

TITLE

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 Sections I, II, III, and VI only 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 multiple completed wells.

CMD :  
OG5SECT

ONGARD  
INQUIRE LAND BY SECTION

03/23/00 10:25:36  
OGOMES -TQC6  
PAGE NO: 1

Sec : 01 Twp : 29N Rng : 13W Section Type : NORMAL

4 39.74  Federal owned	3 39.81  Federal owned	2 39.89  Fee owned	1 38.96  Fee owned  A A
E 40.00  Fee owned	F 40.00  Fee owned	G 40.00  Fee owned	H 40.00  Fee owned

PF01 HELP  
PF07 BKWD

PF02  
PF08 FWD

PF03 EXIT  
PF09 PRINT

PF04 GoTo  
PF10 SDIV

PF05  
PF11

PF06  
PF12

*Gary Kane- Arch Ret.  
Has a question about  
NSL-4421 that you recently  
issued.  
915-685-8126*

CMD :  
OG5SECT

ONGARD  
INQUIRE LAND BY SECTION

03/23/00 10:25:41  
OGOMES -TQC6  
PAGE NO: 2

Sec : 01 Twp : 29N Rng : 13W Section Type : NORMAL

L 40.00	K 40.00	J 40.00	I 40.00
Fee owned	Fee owned	Fee owned	Fee owned
M 40.00	N 40.00	O 40.00	P 40.00
Fee owned	Fee owned	Fee owned	Fee owned
		A	A

PF01 HELP	PF02	PF03 EXIT	PF04 GoTo	PF05	PF06
PF07 BKWD	PF08 FWD	PF09 PRINT	PF10 SDIV	PF11	PF12