

COMPANY

Merit Energy

PROPERTY NAME

Burton Flat

WELL NO.

2

DATE

LOCATION (ULSTR)

U+0-1-21-27

FOOTAGE

3300 FSL 1980 FEL

API NO.

30-015-24959

POOL

Avalon Bank Spring

Before

CASING RECORD:

13 3/8 630' 17 1/2" hole 6755x^c
8 5/8 2539' 11" hole 14005x^c
5 1/2 5708 77/8 hole 10255x^c
Perfs 5522

13 3/8
630' c

8 5/8
2539' c

BEFORE EXAMINER

OIL CONSERVATION DIVISION

OCD

EXHIBIT NO.

1A

CASE NO.

12279

Perfs 5522

5 1/2 5708'

Circ

COMPANY <i>Merit Energy</i>		PROPERTY NAME <i>Burton Flat</i>		WELL NO. <i>2</i>
DATE <i>U+O-1-21-27</i>	LOCATION (ULSTR) <i>U+O-1-21-27</i>		FOOTAGE <i>3300 FSL 1980 FEL</i>	
API NO. <i>30-015-24959</i>		POOL <i>Avalon Bone Spring</i>		

1. Spota 755x plug e 5530' WOC + Tag	<p style="text-align: center;"><i>After</i></p>
2. Spota 255x plug e 2590 Tag	
3. Spota 255x plug e 680' Tag	
4. Spota 105x surface plug	
5. Place mud between pluggs e 25 Lb Per bbl of brine	
6. Cut anchors, set P & A marker clean & level location	

CASING RECORD:	
<i>13 3/8</i>	<i>630' 17 1/2" hole 6755x"</i>
<i>8 5/8</i>	<i>2539' 11" hole 14005x"</i>
<i>5 1/2</i>	<i>5708 7 7/8 hole 10255x"</i>
<i>Perfs 5522</i>	

OIL CONSERVATION DIVISION
ARTESIA DISTRICT OFFICE

JENNIFER SALISBURY
CABINET SECRETARY

Merit Energy, Co.
12222 Merit Dr, Ste 1500
Dallas TX 75251

Dear Sirs

Rule 201 A. states the operator of any well drilled for oil, gas or injection, for seismic, core or other exploration, or for a service well, whether cased or uncased, shall be responsible for the plugging thereof.

Rule 201 B. states a well shall be either properly plugged and abandoned or temporarily abandoned in accordance with these rules with 90 days after (1) a 60 day period following suspension of drilling. (2) a determination that the well is no longer usable for beneficial purposes. (3) a period of 1 year in which a well has been continuously inactive.

House Bill 65 has been passed by the legislature and provides some tax incentives for wells put back in production. However, if there are no plans to put these wells back in service then they need to be either plugged or properly temporarily abandoned.

Our records show no production reported on the above mentioned wells for 1994, 1995, 1996 and 1997. Please forward to the NWCCD office in Artesia by July 15, 1997 a plan to bring the wells into compliance with rule 201.

John W. Green

Tim W. Gurn
District II Supervisor

Submit to Appropriate
District Office
State Lease - 6 copies
Fee Lease - 5 copies

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C 101
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)

30-015-24959

5. Indicate Type of Lease

STATE ☐

FEE ☒

6. State Oil & Gas Lease No.

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work:

DRILL ☐

RE-ENTER ☐

DEEPEN ☐

PLUG BACK ☒

b. Type of Well:

OIL
WELL ☒

GAS
WELL ☐

OTHER ☐

SINGLE
ZONE ☐

MULTIPLE
ZONE ☐

7. Lease Name or Unit Agreement Name

Burton Flat

2. Name of Operator

Merit Energy Company

8. Well No.

2

3. Address of Operator

12221 Merit Drive, Suite 500, Dallas, TX 75251

9. Pool name or Wildcat

NW Fenton (Proposed)

4. Well Location

Unit Letter 0 : 3300 Feet From The South Line and 1980 Feet From The East Line

Section 1

Township 21S

Range 27E

NMPM

Eddy

County

10. Proposed Depth

5700 P.B.

11. Formation

Delaware (Proposed)

12. Rotary or C.T.

NA

13. Elevations (Show whether DF, RT, GR, etc.)

3178 GR

14. Kind & Status Plug. Bond

Active Blanket

15. Drilling Contractor

NA

16. Approx. Date Work will start

1-15-93

17.

PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
17 1/2	13 3/8	54.5	630	675 sx Cl C	Surface
11	8 5/8	24	2539	1700 sx Cl C	Surface
7 7/8	5 1/2	15.5	5708	1025 sx Cl C	2400'

Currently this well is completed in the E. Avalon Bone Springs through perms at 5552'-5574'. We propose to abandon the Bone Springs with a CIBP at 5500' topped with 20' cmt (PBSD 5480'). We then propose to complete the Delaware in two stages with perms from 3014'-3026', 3090'-3100', 3112'-3130' in first stage and perms from 2880'-2888', 2902'-2930', 2948'-2958' in stage two. Both stages will include a frac stimulation of approximately 100,000# sand each. The well will be placed on production through all perms.

APPROVAL VALID FOR 180 DAYS
PERMIT NUMBER 7-543
UNIT 0 3300 1980 E 21S 27E NA

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

SIGNATURE Sheryl J. Carruth TITLE Regulatory Manager DATE 1-7-93

TYPE OR PRINT NAME Sheryl J. Carruth TELEPHONE NO. _____

(This space for State Use) ORIGINAL SIGNED BY

MIKE WILLIAMS

APPROVED BY Supervisor, District I TITLE _____ DATE JAN 13 1993

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.

Owner Merit Energy Company		Lease Burton Flat		Well No. 2	
Section 0	Section 1	Township 21 South	Range 27 East	County Eddy	
Footage Location of Well: 3300 feet from the South line and 1980 feet from the East line					
Level Elev. 3178.	Producing Formation Delaware	Pool NW Fenton		Dedicated Acreage: 40 Acres	

Outline the acreage dedicated to the subject well by colored pencil or hachure marks on the plat below.

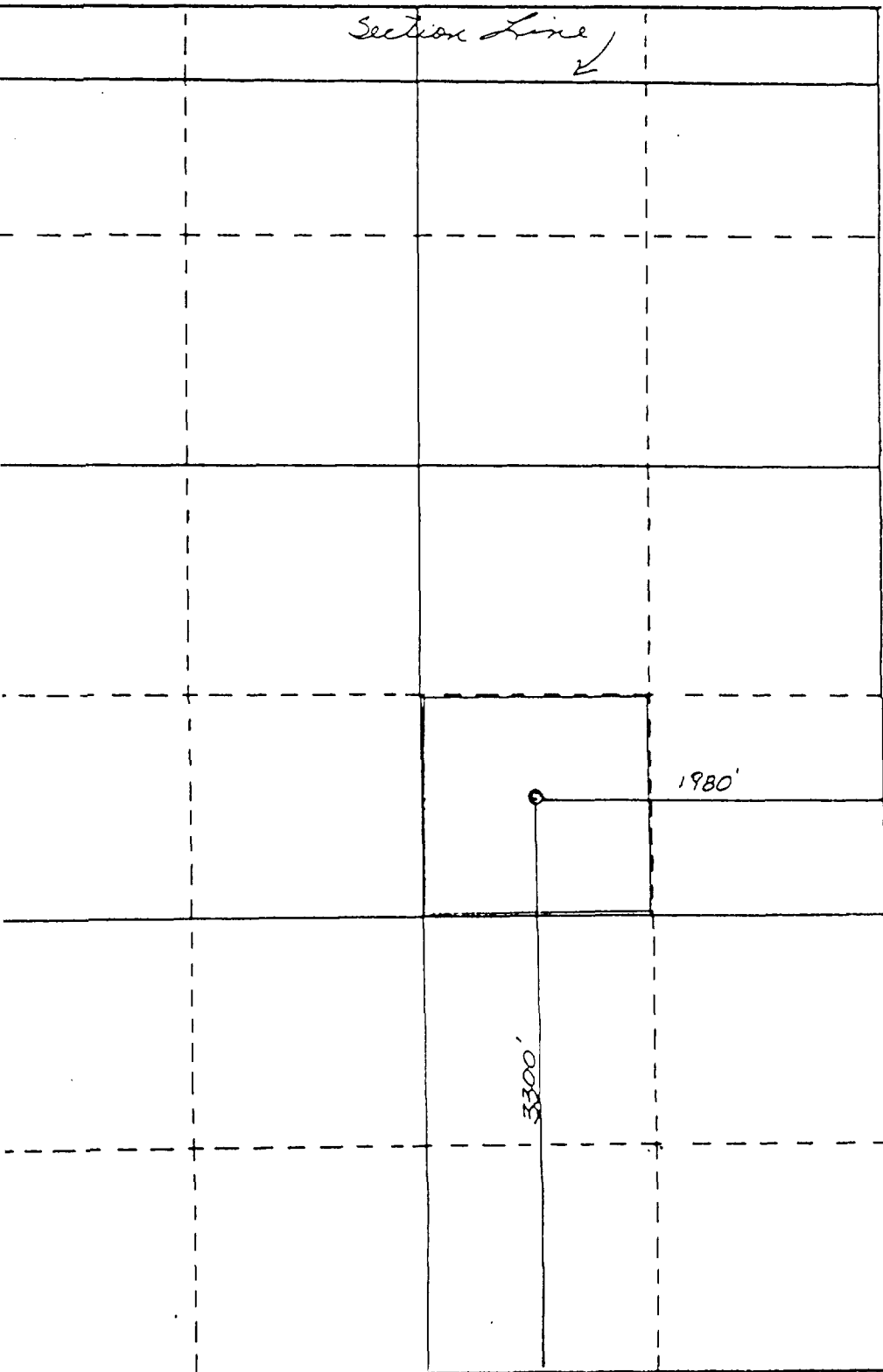
If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).

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.

Sheryl J. Carruth
Name
Sheryl J. Carruth
Position
Regulatory Manager
Company
Merit Energy Company
Date
1-6-93

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
May 10, 1984
Registered Professional Engineer
and/or Land Surveyor
Dan R. Reddy
Certificate No.
NM PE&LS #5412

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.	
Operator Merit Energy Company ✓	Well API No.
Address 12221 Merit Drive, Suite 500, Dallas, TX 75251	
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 checked="" type="checkbox"/> Effective 8-1-92
Change in Operator <input type="checkbox"/>	Casinghead Gas <input 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 Burton Flat	Well No. 2	Pool Name, including Formation E. Avalon - Bone Spring	Kind of Lease State, Federal or Fee	Lease No.
Location				
Unit Letter O	3330	Feet From The S	Line and 1980	Feet From The E
Section 1	Township 21S	Range 27E	NMPM, Eddy	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"/>	Address (Give address to which approved copy of this form is to be sent)					
Pride Pipeling	P. O. Box 2436, Abilene, TX					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Phillips 66 Natural Gas Co.	P. O. Box 2105, Hobbs, NM 88240					
If well produces oil or liquids, give location of tanks.	Unit 0	Sec. 1	Twp. 21S	Rge. 27E	Is gas actually connected? Yes	When? 05-16-85

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	Drill 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 (prior, 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.

Signature
Sheryl J. Carruth Regulatory Manager
Printed Name
7-21-92
Date
(214) 701-8377
Telephone No.

OIL CONSERVATION DIVISION

Date Approved JUL 29 1992

By ORIGINAL SIGNED BY

MIKE WILLIAMS

Title SUPERVISOR, DISTRICT II

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.

OIL CONSERVATION DIVISION

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator Merit Energy Company	Well API No.
Address 12221 Merit Drive, Suite 1040, Dallas, Texas 75251	
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)	
New Well <input type="checkbox"/>	Change in Transporter of: <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Change in Operator <input checked="" type="checkbox"/>	EFFECTIVE 11/01/90
If change of operator give name and address of previous operator Bridge Oil Company, L. P., 12377 Merit Dr., Suite 1600, Dallas, TX 75251	

II. DESCRIPTION OF WELL AND LEASE

Lease Name Burton Flat	Well No. 2	Pool Name, Including Formation E. Avalon - Bone Spring	Kind of Lease State, Federal or <u>Fee</u>	Lease No.
Location Unit Letter <u>O</u> : <u>3300</u> Feet From The <u>S</u> Line and <u>1980</u> Feet From The <u>E</u> Line Section <u>1</u> Township <u>21S</u> Range <u>27E</u> , NMPM, <u>Eddy</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

SCUPLOCK PERMIAN CORP EFF 9-1-91

Name of Authorized Transporter of Oil The Permian Corp. <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1183, Houston, TX 77001					
Name of Authorized Transporter of Casinghead Gas Phillips 66 Natural Gas Co. <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) P. O. Box 2105, Hobbs, NM 88240					
If well produces oil or liquids, give location of tanks.	Unit <u>0</u>	Sec. <u>1</u>	Twp. <u>21S</u>	Rge. <u>27E</u>	Is gas actually connected? Yes	When? <u>05-16-85</u>

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.

Bonnie C. Shea
Signature
Bonnie C. Shea V.P. Finance
Printed Name
11-1-90 (214) 701-8377
Date Telephone No.

OIL CONSERVATION DIVISION

Date Approved NOV 7 1990

By ORIGINAL SIGNED BY

MIKE WILLIAMS

Title SUPERVISOR, DISTRICT II

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

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- 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.

OIL CONSERVATION DIVISION

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

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 BRIDGE OIL COMPANY, L. P.	Well API No.
Address 12377 Merit Drive, Ste. 1600, Dallas, Texas 75251	
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 checked="" type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Effective 01/01/90	
If change of operator give name and address of previous operator Petrus Oil Company, L. P., 12377 Merit Drive, Ste. 1600, Dallas, TX 75251	

II. DESCRIPTION OF WELL AND LEASE

Lease Name Burton Flat	Well No. 2	Pool Name, Including Formation E. Avalon - Bone Spring	Kind of Lease State, Federal or Fee <input checked="" type="radio"/>	Lease No.
Location Unit Letter O : 3300 Feet From The S Line and 1980 Feet From The E Line Section 1 Township 21S Range 27E , NMPM, Eddy 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"/>	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1183, Houston, TX 77001	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) P. O. Box 2105, Hobbs, NM 88240	
If well produces oil or liquids, give location of tanks.	Unit 0 Sec. 1 Twp. 21S Rge. 27E	Is gas actually connected? Yes When? 05-16-85

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			
					Part J.D-3			
					2-23-96			
					chgs op			

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.

Dora McGough
Signature
Dora McGough Regulatory Analyst
Printed Name Title
January 8, 1990 214/788-3300
Date Telephone No.

OIL CONSERVATION DIVISION

Date Approved **FEB 16 1990**
By **ORIGINAL SIGNED BY**
MIKE WILLIAMS
SUPERVISOR, DISTRICT II
Title

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.

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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	GAS
OPERATOR	
PROMOTION 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

RECEIVED

JUL 20 1988

O. C. D.

I. Operator
Petrus Oil Company, L. P.

Address
12377 Merit Drive, Suite 1600 Dallas, Texas 75251

Reason(s) for filing (Check proper box)
☐ New Well
☐ Recompletion
☒ Change in Ownership
 Change in Transporter of:
☐ Oil
☐ Casinghead Gas
☐ Dry Gas
☐ Condensate
 Other (Please explain)
 EFFECTIVE 06-01-88.

If change of ownership give name and address of previous owner
Mobil Producing TX & NM Inc., 9 Greenway Plaza, Suite 2700
Houston, Texas 77046

II. DESCRIPTION OF WELL AND LEASE

Lease Name BURTON FLAT	Well No. 2	Pool Name, including Formation AVALON-BONE SPRING, EAST	Kind of Lease State, Federal or Fee Fee	Lease N
Location Unit Letter <u>O</u> : <u>3300</u> Feet From The <u>SOUTH</u> Line and <u>1980</u> Feet From The <u>EAST</u>				
Line of Section <u>1</u> Township <u>21S</u> Range <u>27E</u> NMPM, Eddy Count				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> The Permian Corp.	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1183, Houston, TX 77001
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Phillips 66 Natural Gas Co.	Address (Give address to which approved copy of this form is to be sent) P. O. Box 2105, Hobbs, NM 88240
If well produces oil or liquids, give location of tanks. Unit <u>0</u> Sec. <u>1</u> Twp. <u>21S</u> Rge. <u>27E</u>	Is gas actually connected? Yes <u>05-16-85</u> When

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.

Suzann Welch Suzann Welch
(Signature)
Regulatory Coordinator
(Title)
07-14-88
(Date)

OIL CONSERVATION DIVISION

APPROVED JUL 27 1988, 19
BY Original Signed By
Mike Williams
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 deviated 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.

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-78

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OPERATOR	<input checked="" type="checkbox"/>

RECEIVED

NO 30 1987

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. <input checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- <u>ARTIFICIAL LIFT</u>		7. Unit Agreement Name
2. Name of Operator <u>Mobil Producing TX & NM Inc.</u>		8. Farm or Lease Name <u>Burton Flat</u>
3. Address of Operator <u>9 Greenway Plaza, Suite 2700, Houston, TX 77046</u>		9. Well No. <u>2</u>
4. Location of Well UNIT LETTER <u>0</u> <u>3300</u> FEET FROM THE <u>South</u> LINE AND <u>1980</u> FEET FROM THE <u>East</u> LINE, SECTION <u>1</u> TOWNSHIP <u>21-S</u> RANGE <u>27-E</u> NMPM.		10. Field and Pool, or Wildcat <u>E. Avalon-Bone Springs</u>
15. Elevation (Show whether DF, RT, GR, etc.)		12. County <u>Eddy</u>

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

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <u>Temporary Shut-In</u> <input checked="" type="checkbox"/>

SUBSEQUENT REPORT OF:

REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPERATIONS <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER <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 1103.

Well was shut-in 7-1-87 due to high GOR, and will continue to be shut-in until mid-September. A C-116 test will be filed when well is turned back on.

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

SIGNED Nancy Lewis TITLE Mobil Exploration & Producing U.S. Inc. as Agent for Mobil Producing TX & NM Inc. DATE 8-28-87

Original Signed By Les A. Clements TITLE Supervisor District 11 DATE SEP 10 1987

APPROVED BY _____

CONDITIONS OF APPROVAL, IF ANY: _____

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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LAND OFFICE	
TRANSPORTER	OIL
OPERATOR	GAS
PROMOTION OFFICE	

OIL CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-01-78
Format 08-01-83
Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator
Mobil Producing TX & NM Inc. ✓

Address
9 Greenway Plaza, Suite 2700, Houston, TX 77046

Reason(s) for filing (Check proper box)

<input type="checkbox"/> New Well	Change in Transporter of:	Other (Please explain) Change Operator Name from The Superior Oil Company
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Oil	
<input checked="" type="checkbox"/> Change in Ownership	<input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Dry Gas <input type="checkbox"/> Condensate	

APR 1 1986

If change of ownership give name and address of previous owner: The Superior Oil Company, 9 Greenway Plaza, Ste 2700, Houston, TX 77046

II. DESCRIPTION OF WELL AND LEASE

Lease Name Burton Flat	Well No. 2	Pool Name, including Formation E. Avalon - Bone Spring	Kind of Lease State, Federal or Fee	Fee
Location Unit Letter 0 : 3300 Feet From The South Line and 1980 Feet From The East Line of Section 1 Township 21S Range 27E, NMPM, Eddy, Com				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> The Permian Corporation Permian (Eff. 9/1/87)	Address (Give address to which approved copy of this form is to be sent) Box 1183, Houston, TX 77001
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Phillips Petroleum Corp.	Address (Give address to which approved copy of this form is to be sent) Frank Phillips Bldg, Bartlesville, OK 74004
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When
0 1 21S 27E	Yes 5/16/85

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.

Nancy Lewis
(Signature)

Authorized Agent

3-14-86
(Date)

OIL CONSERVATION DIVISION

APPROVED MAR 19 1986
Original Signed By
BY Les A. Clements
TITLE Supervisor District II

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 deviate 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.

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

NO. OF COPIES RECEIVED	
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SANTA FE	<input checked="" type="checkbox"/>
FILE	<input checked="" type="checkbox"/>
U.S.O.S.	
LAND OFFICE	
OPERATOR	<input checked="" type="checkbox"/>

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-75

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.)

OIL WELL ☒ GAS WELL ☐ OTHER-

Name of Operator
The Superior Oil Company

Address of Operator
9 Greenway Plaza, Ste 2700, Houston, Texas 77046

Location of Well
UNIT LETTER 0 3300 FEET FROM THE South LINE AND 1980 FEET FROM
East 1 21S 27E
TOWNSHIP RANGE NMPM.

7. Unit Agreement Name

8. Farm or Lease Name
Burton Flat

9. Well No.
2

10. Field and Pool, or Wildcat
E. Avalon-Bone Springs

15. Elevation (Show whether DF, RT, GR, etc.)

12. County
Eddy

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 OPWS. ☐
CASING TEST AND CEMENT JOB ☐
OTHER ☐

ALTERING CASING ☐
PLUG AND ABANDONMENT ☐

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.

This well was shut in 3-4-85 pending gas connection with Phillips Petroleum Company.

Plan to have gas connected within 60 days; will run GOR test at that time.

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

Signed Nancy Lewis

TITLE MOBIL PRODUCING TX. & N.M., INC.
AS AGENT FOR THE SUPERIOR OIL COMPANY

DATE 3-22-85

APPROVED BY
Original Signed By
Leslie A. Clements
Supervisor District II

TITLE

DATE MAR 28 1985

CONDITIONS OF APPROVAL, IF ANY:

Burton Flat Well No. 2
3300' FSL, 1980' FEL
Section 1, T21S, R27E
E. Avalon - Bone Spring Field
Eddy County, New Mexico

Inclination Survey

<u>Measured Depth (Feet)</u>	<u>Angle of Inclination (Degree)</u>
383	0-1/4
714	0-3/4
1,100	1-3/4
1,208	2-1/2
1,301	2-1/2
1,352	2-1/4
1,538	2-1/2
1,643	3-0
1,737	3-0
1,857	2-0
2,079	1-1/2
2,567	1-3/4
2,755	1-1/4
3,282	1-0
3,881	0-3/4
4,367	1-0
4,644	0-3/4
5,126	1-0
5,321	1-0
5,745	1-0

I, Mike Mitchell, certify that the information contained on this report is true and correct to the best of my knowledge.

Signed: Mike Mitchell
Title: Wls. Eng. Supr.
Date: 1-30-85

STATE OF TEXAS
COUNTY OF MIDLAND

Before me, the undersigned Notary Public, on this day personally appeared Mike Mitchell, known to me as the person whose name is subscribed to the foregoing instrument and acknowledged to me that he executed the same ^{for} purposes and considerations therein expressed.

Given Under My Hand Seal this 30-22 Day of January, 1985.

My Commission Expires:
August 22, 1988

Lorraine Maroney
Notary Public in and for
Midland, County, Texas

OIL CONSERVATION DIVISION

P. O. BOX 2038

SANTA FE, NEW MEXICO 87501

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

NO. OF COPIES RECEIVED	
DISTRIBUTION	
STATE	✓
FILE	✓
L.S. G.C.	✓
LAND OFFICE	
OPERATOR	Burton

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

1. TYPE OF COMPLETION	OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> DRY <input type="checkbox"/> OTHER <input type="checkbox"/>
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 <input type="checkbox"/>

7. Unit Agreement Name
8. Form or Lease Name
Burton Flat

Name of Operator
Mobil Producing TX. & N.M. Inc.
Address of Operator
Nine Greenway Plaza, Suite 2700, Houston, Texas 77046
Location of Well

9. Well No.
2
10. Field and Pool, or Wildcat
E. Avalon - Bone Spring

11. LETTER	0	LOCATED	3300	FEET FROM THE	South	LINE AND	1980	FEET FROM
E. East	LINE OF SEC.	1	TWP.	21S	RGE.	27E	NMPM	

12. County
Eddy

13. Date Spudded	11-29-84	16. Date T.D. Reached	12-27-84	17. Date Compl. (Ready to Prod.)	1-23-85	18. Elevations (DF, RKB, RT, GR, etc.)	3178' GR	19. Elev. Casinghead
20. Total Depth	5745'	21. Plug Back T.D.	5700'	22. If Multiple Compl., How Many		23. Intervals Drilled By	Rotary Tools	Cable Tools

24. Producing Interval(s), of this completion - Top, Bottom, Name
5552'-5574' Bone Spring

25. Was Directional Survey Made
No
26. Type Electric and Other Logs Run
LDT-GR-Caliper, DLL-MSFL-GR-Caliper, Sidewall Cores

27. Was Well Cored
No

CASING RECORD (Report all strings set in well)					
CASING SIZE	WEIGHT LB./FT.	DEPTH SET	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
13-3/8"	54.5	630'	17-1/2"	675 sx Class C Lite	None
8-5/8"	24	2539'	11"	1700 sx Class C	None
5-1/2"	15.5	5708'	7-7/8"	525 sx Class C Lite	None
				and 500 Class C Neat	

LINER RECORD				30. TUBING RECORD		
SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN	SIZE	DEPTH SET
					2-7/8"	5578'
						PACKER SET
						5406'

Perforation Record (Interval, size and number)		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
5552-5574' (45 holes w/3-1/8" gun)		DEPTH INTERVAL	AMOUNT AND KIND MATERIAL USED
		4 sq holes @ 5680	Press to 2000 PSI-No break do
		5552-5574'	56 Bbls 7 1/2% HCL w/additives.
			750 SCF/bbl nitrogen, 10,400
			gals gel, 5600 gals CO2, 24,00

First Production		Production Method (Flowing, gas lift, pumping - Size and type pump)				Well Status (Prod. or Shut-in)	
1-19-85		Flowing				SI	
1-26-85	Hours Tested	Choke Size	Prod'n. For Test Period	Oil - Bbl.	Gas - MCF	Water - Bbl.	Gas - Oil Ratio
	24	21/64"		202	380	2	1881
Low Tubing Press.	Casing Pressure	Calculated 24-Hour Rate	Oil - Bbl.	Gas - MCF	Water - Bbl.	Oil Gravity - API (Corr.)	
	320	0				44.0°	

Disposition of Gas (Sold, used for fuel, vented, etc.)	SI - Negotiating for sales contracts.	Test Witnessed By	Jim Fletcher
--	---------------------------------------	-------------------	--------------

List of Attachments	Logs and Inclination Survey
---------------------	-----------------------------

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	G.E. Tate	TITLE	Regulatory Manager	DATE	1-28-85
As Agent for The Superior Oil Company					

INDICATE FORMATION TOPS IN CONFORMANCE WITH GEOGRAPHICAL SECTION OF STATE

Southeastern New Mexico

Northwestern New Mexico

T. Anhy	T. Canaan	T. Dryden	T. Penn. "B"
T. Salt	T. Strawn	T. Rindler	T. Penn. "C"
B. Salt	T. Atoka	T. Pictured Cliffs	T. Penn. "D"
T. Yates	T. Miss	T. Cliff House	T. Leadville
T. 7 Rivers	T. Devonian	T. Merced	T. Madison
T. Queen	T. Silurian	T. Point Lookout	T. Elbert
T. Grayburg	T. Montoya	T. Mancos	T. McCracken
T. San Andres	T. Simpson	T. Gallup	T. Ignacio Qtzite
T. Glorieta	T. McKee	Base Greenhorn	T. Granite
T. Paddock	T. Ellenburger	T. Dakota	T.
T. Blinberry	T. Gr. Wash	T. Morrison	T.
T. Tubb	T. Granite	T. Todillo	T.
T. Drinkard	T. Delaware Sand 2872	T. Detrital	T.
T. Abo	T. Bone Springs 5459	T. Wingate	T.
T. Wolfcamp	T.	T. Charlie	T.
T. Penn.	T.	T. Permian	T.
T. Cisco (Bough C)	T.	T. Penn. "A"	T.

OIL OR GAS SANDS OR ZONES

No. 1, from	to	No. 4, from	to
No. 2, from	to	No. 5, from	to
No. 3, from	to	No. 6, from	to

IMPORTANT WATER SANDS

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

No. 1, from	2872	to	2934	feet
No. 2, from	5550	to	5580	feet
No. 3, from		to		feet
No. 4, from		to		feet

FORMATION RECORD (Attach additional sheets if necessary)

From	To	Thickness in Feet	Formation	From	To	Thickness in Feet	Formation
2872	3050	178	Limestone w/interbedded sands				
3050	5460	2410	Sand, shale				
5460	TD	785	Limestone, sand.				

P. O. BOX 2000
SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

The Superior Oil Company

Nine Greenway Plaza, Suite 2700, Houston, TX 77046

ion(s) for filing (Check proper box)

Well ☒ Change in Transporter of:
Completion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐

Other (Please explain)

ange of ownership give name
address of previous owner

DESCRIPTION OF WELL AND LEASE

Well Name	Well No.	Pool Name, including Formation	Kind of Lease	Lease
Burton Flat	2	E. Avalon - Bone Spring	State, Federal or Fee	Fee

Initial Letter 0 : 3300 Feet From The South Line and 1980 Feet From The East

Line of Section 1 Township 21S Range 27E NMPM, Eddy Co

SIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Address of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Permian Corporation, The Permian (Eff. 9/1/87)	P.O. Box 1183 Houston Tx. 77001

Address of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Phillips Petroleum	Bartelsville 583 Frank Phillips Bldg. Oklahoma, 77004

Well produces oil or liquids, location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	0	1	21S	27E	Yes	May 16, 1985

Is production is commingled with that from any other lease or pool, give commingling order number:

COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res't.	Diff. I
Spudded								
Date Compl. Ready to Prod.								
Total Depth								
P.B.T.D.								
Sections (DF, RKB, RT, CR, etc.)								
Name of Producing Formation								
Top Oil/Gas Pay								
Tubing Depth								
Depth Casing Shoe								

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
			past 70-3 5-24-85 add 67:11

TEST DATA AND REQUEST FOR ALLOWABLE
WELL

(Test must be after recovery of total volume of load all and must be equal to or exceed top
able for this depth or be for full 24 hours)

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

WELL

Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
ing Method (pilot, back pr.)	Tubing Pressure (Shot-in)	Casing Pressure (Shot-in)	Choke Size - - -

CERTIFICATE OF COMPLIANCE

by certify that the rules and regulations of the Oil Conservation
on have been complied with and that the information given
is true and complete to the best of my knowledge and belief.

T.J. Auld

OBIL PRODUCING TEXAS & NEW MEXICO
S AGENT FOR THE SUPERIOR OIL COMPANY

OIL CONSERVATION DIVISION

APPROVED MAY 20 1985, 19

BY ORIGINAL SIGNED
BY LARRY BROOKS
GEOLOGIST - NMOCD

This form is to be filed in compliance with RULE 1104.
If this is a request for allowable for a newly drilled or de
well, this form must be accompanied by a tabulation of the de
tests taken on the well in accordance with RULE 111.
All sections of this form must be filled out completely for
able on new and recompleted wells.

NO. OF COPIES RECEIVED	
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TRANSPORTER	OIL
	GAS
OPERATOR	
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-11
Effective 1-1-85

Operator
The Superior Oil Company

Address
Nine Greenway Plaza, Suite 2700 - Houston, TX 77046

Reason(s) for filing (Check proper box)

New Well	<input checked="" type="checkbox"/>	Change in Transporter of:		Other (Please explain)
Recompletion	<input type="checkbox"/>	Oil	<input type="checkbox"/>	Form C-104 dated 2-1-85
Change in Ownership	<input type="checkbox"/>	Casinghead Gas	<input checked="" type="checkbox"/>	Filed in error. Please cancel.
		Dry Gas	<input type="checkbox"/>	
		Condensate	<input type="checkbox"/>	

If change of ownership give name and address of previous owner
No change in ownership. *Mobil Prod. Tex. & N.M. Inc.*

I. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
Burton Flat	2	E. Avalon-Bone Spring	State, Federal or Fee Fee	
Location				
Unit Letter	0	3300 Feet From The South Line and 1980 Feet From The East		
Line of Section	1	Township 21S	Range 27E	NMPM, Eddy County

II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Permian Corporation, The	P. O. Box 1183 - Houston, TX 77001
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Phillips Petroleum	583 Frank Phillips Bldg. - Bartlesville, OK 77004
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When
	0 1 21S 27E No

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

V. 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	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
11-29-84	1-23-85	5745'	5700'					
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
3178' GR	Bone Spring	5459'	5578'					
Perforations			Depth Casing Shoe					

TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17-1/2"	13-3/8"	630'	675 Class C & Lite
11"	8-5/8"	2539"	1700 Class C
7-7/8"	5-1/2"	5708'	525 Class C Lite & 500 Class C Neat

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.)	
1-19-85	1-26-85	Flowing	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 hrs.	320	0	21/64"
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF
	202	2	380

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. 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.

Manning Lewis
Mobil Producing (Texas) & New Mexico Inc.
As Agent for The Superior Oil Company
(Title)
2-27-85
(Date)

OIL CONSERVATION COMMISSION
MAR 8 1985
APPROVED _____, 19____
BY _____ Original Signed By
Leslie A. Clements
TITLE _____ Supervisor District II

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.

OIL CONSERVATION DIVISION

P. O. BOX 2000

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

NAME OF OPERATOR	
REGISTRATION OFFICE	
DATE OF FILING	
DATE OF COMPLETION	
DATE OF OWNERSHIP	
DATE OF OFFICE	
DATE OF TRANSPORT	
DATE OF PERMIT	
DATE OF REGISTRATION	
DATE OF OFFICE	
DATE OF TRANSPORT	
DATE OF PERMIT	
DATE OF REGISTRATION	

Mobil Producing TX. & N.M. Inc.

Address

Nine Greenway Plaza, Suite 2700, Houston, Texas 77046

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"/>
Change in Ownership	<input type="checkbox"/>	Casinghead Gas	<input type="checkbox"/>
		Dry Gas	<input type="checkbox"/>
		Condensate	<input type="checkbox"/>

Other (Please explain)

5-1-85

Change of ownership give name
and address of previous owner

The Superior Oil Company, P.O. Box 3901, Midland, Texas 79702

DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
Burton Flat	2	E. Avalon-Bone Spring	State, Federal or Fee Fee	
Location	Unit Letter	0	3300	Feet From The South Line and 1980
				Feet From The East
	Line of Section	1	Township	21S
			Range	27E
				NMPM, Eddy
				County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Permian Corporation, Inc.	P.O. Box 1183, Houston, TX 77001					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Negotiating for Contract						
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	0	1	21S	27E	No	

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

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	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
11-29-84	1-23-85	5745'	5700'					
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
3178' GR	Bone Spring	5459' 5552'	5578'					
Perforations			Depth Casing Shoe					
5552' - 5571'								

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17-1/2"	13-3/8"	630'	675 Class C & Lite
11"	8-5/8"	2539'	1700 Class C
7-7/8"	5-1/2"	5708'	525 Class C Lite
	2 7/8"	5578'	& 500 Class C Neat

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.)	
1-19-85	1-26-85	Flowing	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 hrs	320	0	21/64"
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF
	202	2	380

GOK 1881

AS 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

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.

G. E. Tate G.E. Tate
Agent for The Superior Oil Company
Environmental & Regulatory Manager

(Title)

(Date)

OIL CONSERVATION DIVISION

FEB 28 1985

APPROVED _____, 19

BY _____ Original Signed By

Leslie A. Clements

TITLE _____ Supervisor District II

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.

Concrete Form O-104 must be filed for

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OPERATOR	<input checked="" type="checkbox"/>

P.O. BOX 2088
SANTA FE, NEW MEXICO 87501

3a. 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 DILLEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.)

OIL WELL ☒ GAS WELL ☐ OTHER ☐

Name of Operator

Mobil Producing TX & N.M., Inc.

Address of Operator

Nine Greenway Plaza, Suite 2700, Houston, TX 77046

Location of Well

UNIT LETTER 0 3300 FEET FROM THE South LINE AND 1980 FEET FROM
THE East LINE, SECTION 1 TOWNSHIP 21-S RANGE 27-E NMPM.

7. Unit Agreement Name

8. Farm or Lease Name

Burton Flat

9. Well No.

2

10. Field and Pool, or Wildcat

E.Avalon-Bone Sprin

15. Elevation (Show whether DF, RT, GR, etc.)

3178' GR

12. County

Eddy

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"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input checked="" type="checkbox"/>	OTHER <input type="checkbox"/>

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.

CORRECTED REPORT

5½" Casing Recap

Drilled 7-7/8" hole to total depth of 5745'.
Ran 5½", 15.5#, K-55 LT&C Casing to 5708' w/12 centralizers.
Cemented casing w/525 sx Class "C" Pace Setter Lite, followed
w/500 sx Class "C" Neat.
Displaced cement w/136 bbl. fresh water. Had full returns.
Bumped plug and cement job completed at 8:15 P.M., 12-28-84.
Held 1600 psi on plug for 45 minutes with no pressure loss.
RIH w/4-3/4" bit and tagged top of cement inside 5-1/2" casing at
5598'. Drilled out cement to 5700 PBTD on 1-17-85.
Pressured up on 5-1/2" casing to 1000 psi and held for 15 minutes
with no pressure loss.

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

SIGNED W. C. McConnell TITLE Environmental Specialist DATE 2-26-85
W. C. McConnell Phone 915 688-1770

PROVED BY _____ TITLE Ladino A. Clements DATE FEB 23 1985
Supervisor District II

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1

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OPERATOR	<input type="checkbox"/>

5a. Indicate Type of Lease
State ☐ For ☒
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 BALS IN A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

OIL WELL ☒ GAS WELL ☐ OTHER ☐

Name of Operator

Mobil Producing TX & NM Inc.

Address of Operator

Nine Greenway Plaza, Suite 2700, Houston, Texas 77046

Location of Well

UNIT LETTER 0 3300 FEET FROM THE South LINE AND 1980 FEET FROM
THE East LINE, SECTION 1 TOWNSHIP 21S RANGE 27E NMPM.

7. Unit Agreement Name

8. Farm or Lease Name

Burton Flat

9. Well No.

2

10. Field and Pool, or Wildcat
Bone
E. Avalon - Sprin

11. Elevation (Show whether DF, RT, GR, etc.)

3178' GR

12. County

Eddy

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

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

PLUG AND ABANDON ☐
CHANGE PLANS ☐
OTHER ☐

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

ALTERING CASING
PLUG AND ABANDONMENT

Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any propo. work) SEE RULE 1503.

CORRECTED REPORT
8-5/8" Casing Recap

Drilled 11" hole to 2567'.
Ran 8-5/8", 24#, K-55, ST&C casing to 2539'
w/8 centralizers. Cemented casing with 1400 sacks
Class C Pace Setter Lite, with 3#/sx Hyseal,
1/4#/sx Flocele and 2% CACL, followed with
300 sx Class C. Displaced with 161 bbl. fresh water.
Bumped plug and cement job completed at 11:50 A.M., 12-16-84.
Held 1900 psi on plug for 3 1/2 hours with no pressure loss.
Ran in hole with 7-7/8" bit. Tagged top of cement at 2492'.
Drilled out of casing shoe set at 2539 at 6:00 A.M., 12-17-84 after
W.O.C. for 18 hours and 10 minutes
Drilling 7-7/8" hole.

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

SIGNED W. C. McConnell TITLE Environmental Specialist DATE 2-26-85

W. C. McConnell Phone 915 688-1770

Original Signed By
Leslie A. Clements
Supervisor District II

DATE FEB 28 1985

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:

OIL CONSERVATION DIVISION

P.O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1

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OPERATOR	<input checked="" type="checkbox"/>

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

OIL WELL ☒ GAS WELL ☐ OTHER ☐

Name of Operator Superior Oil Company, Inc.
Superior Oil Company, The

Address of Operator
P.O. Box 3901, Midland, Texas 79702

Location of Well

UNIT LETTER 0, 3300 FEET FROM THE South LINE AND 1980 FEET FROM
THE East LINE, SECTION 1 TOWNSHIP 21-S RANGE 27-E NMPM.

7. Unit Agreement Name

8. Farm or Lease Name

Burton Flat

9. Well No.

2

10. Field and Pool, or Wildcat

E. Avalon-Bone Spring

11. Elevation (Show whether DF, RT, GR, etc.)

3178' GR

12. County

Eddy

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK ☐

PLUG AND ABANDON ☐

REMEDIAL WORK ☐

ALTERING CASING

TEMPORARILY ABANDON ☐

COMMENCE DRILLING OPS. ☐

PLUG AND ABANDONMENT

PULL OR ALTER CASING ☐

CHANGE PLANS ☐

CASING TEST AND CEMENT JOB ☒

OTHER ☐

OTHER

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.

CORRECTED REPORT

Spud and 13-3/8" Casing Detail

Spudded at 2400 hrs. on 11-29-84
Ran 13-3/8", 54.5#, K-55, ST&C casing to 630' w/12 centralizers,
Cemented with 675 sx Class "C" cement with 2% CACL.
Displaced cement with 92 bbls. fresh water and circulated cement to surface.
Bumped plug and cement job completed at 1:45 P.M., 12-1-84. Held 400 psi
on plug for 3 1/2 hours with no pressure loss. Ran 11" bit and tagged
top of cement inside 13-3/8" casing at 578'.
Drilled out of shoe after W.O.C. 24+ hours.
Drilling 11" hole.

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

SIGNED W. C. McConnell TITLE Environmental Specialist DATE 2-26-85

W. C. McConnell Phone 915 688-1770

APPROVED BY

TITLE

Original Signed By

Leslie A. Clements

Supervisor District II

DATE

FEB 28 1985

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LAND OFFICE	
OPERATOR	

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

Form C-103
Revised 10-

1a. Indicate Type of Lease
State ☐ For ☐
3. State Oil & Gas Lease No.

SUNDRY NOTICES AND REPORTS ON WELLS

DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO CEASE OR PLUG BACK TO A DIFFERENT RESERVOIR.
USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.

Oil Well ☒ Gas Well ☐ Other ☐

Name of Operator
Mobil Producing TX & NM Inc.

Address of Operator
Nine Greenway Plaza, Suite 2700, Houston, Texas 77046

Location of Well
UNIT LETTER 0 3300 FEET FROM THE South LINE AND 1980 FEET FROM East LINE, SECTION 1 TOWNSHIP 21S RANGE 27E WMPM.

10. Field and Pool, or Wildcat
E. Avalon - Bone Spri

15. Elevation (Show whether DF, RT, GR, etc.)
3178' GR

12. County
Eddy

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

<p>DRILL REMEDIAL WORK <input type="checkbox"/></p> <p>REABANDON <input type="checkbox"/></p> <p>OR ALTER CASING <input type="checkbox"/></p>	<p>PLUG AND ABANDON <input type="checkbox"/></p> <p>CHANGE PLANS <input type="checkbox"/></p> <p>OTHER <input type="checkbox"/></p>	<p>REMEDIAL WORK <input type="checkbox"/></p> <p>COMMENCE DRILLING OPNS. <input type="checkbox"/></p> <p>CASING TEST AND CEMENT JOBS <input checked="" type="checkbox"/></p> <p>OTHER <input type="checkbox"/></p>	<p>ALTERING CASING <input type="checkbox"/></p> <p>PLUG AND ABANDONMENT <input type="checkbox"/></p>
---	---	--	--

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.

8-5/8" Casing Recap

12-17-84: Ran 64 jts 8-5/8" casing, set @ 2539' w/ 8 centralizers. Cemented w/1400 sxs Class C Pace Setter Lite, 3#/sx Hyseal, 1/4#/sx Flocele, 2% CaCl, followed w/300 sx Class C, displaced w/161 bbls fresh water, circ 120 sx cmt. Bumped plug w/1900# - Held O.K. WOC 15.5 hrs prior to drilling.

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

G. E. Tate G. E. Tate TITLE Regulatory Manager DATE 1-7-85
An Agent for The Superior Oil Company.

BY _____ TITLE _____ DATE _____

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

INSTITUTION	
DATE	
U.S.	
OFFICE	
REPORTER	
OIL	
GAS	
RATION	
ATION OFFICE	

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Mobil Producing TX. & N.M. Inc.

Nine Greenway Plaza, Suite 2700, Houston, TX 77046

son(s) for filing (Check proper box)

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

Other (Please explain)

Change operator name from
The Superior Oil CompanyChange of ownership give name
address of previous owner

Superior Oil Company, The, P.O. Box 3901, Midland, Texas 79702

DESCRIPTION OF WELL AND LEASE

Well Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
Burton Flat	2	E. Avalon - Bone Spring	State, Federal or Fee Fee	
Location				
Unit Letter	0	3300 Feet From The South Line and 1980 Feet From The East		
Line of Section	1	Township 21S Range 27E, NMPM, Eddy County		

SIGNATURE OF TRANSPORTER OF OIL AND NATURAL GAS

Signature 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)
Signature of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Well produces oil or liquids, location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When

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

COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'
Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
Locations (DF, RKB, RT, CR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
Locations			Depth Casing Shoe					

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

TEST DATA AND REQUEST FOR ALLOWABLE
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)

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
Total Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

WELL

Total Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
Testing Method (spiral, back pr.)	Tubing Pressure (Shot-in)	Casing Pressure (Shot-in)	Choke Size

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.

G. E. Tate G. E. Tate
Agent for The Superior Oil Company
Environmental & Regulatory Manager

February 1, 1985

(Date)

OIL CONSERVATION DIVISION

APPROVED FEB 6 1985, 19

BY Original Signed By
Leslie A. Clements
TITLE Supervisor District II

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 deviate
tests taken on the well in accordance with RULE 111.All sections of this form must be filled out completely for allow-
able 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 conditions.



TONEY ANAYA
GOVERNOR

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT
OIL CONSERVATION DIVISION
ARTESIA DISTRICT OFFICE

January 22, 1985

P.O. DRAWER DD
ARTESIA, NEW MEXICO 88210
(505) 748-1283

Mobil Producing Texas &
New Mexico Inc.
Nine Greenway Plaza, Suite 2700
Houston, Texas 77046

Re: Burton Flat
#2-O-1-21-27
E. Avalon Bone Spring Pool

Gentlemen:

We are still carrying the above captioned well with
The Superior Oil Co. as the operator.

We have never received a notice of change of operator
for this well.

Sincerely,

Les A. Clements
Supervisor District II

LAC/mm

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U.S.G.S.	
LAND OFFICE	
OPERATOR	

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

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1. Type of Work DRILL <input checked="" type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input type="checkbox"/>		7. Unit Agreement Name
2. Type of Well OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> SINGLE ZONE <input type="checkbox"/> MULTIPLE ZONE <input type="checkbox"/>		8. Farm or Lease Name Burton Flat
3. Name of Operator The Superior Oil Company ✓		9. Well No. 2
4. Address of Operator P.O. Box 3901, Midland, Texas 79702		10. Field and Pool, or Wildcat Undesignated-Bone Sp
5. Location of Well UNIT LETTER 0 LOCATED 3300 FEET FROM THE south LINE 1980 FEET FROM THE east LINE OF SEC. 1 TWP. 21S R.C.C. 27E N.M.P.M.		12. County Eddy
19. Proposed Depth 6000'		19A. Formation Bone Spring
20. Rotary or C.T. Rotary		21. Kind & Status Plug, Bond Active Blanket
21B. Drilling Contractor Verna		22. Approx. Date Work will start 10-3-84

PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
17-1/2"	13-3/8"	54.5#	650'	675	Surface
11"	8-5/8"	24#	2,450-2,500'	720	Surface
7-7/8"	5-1/2"	15.5#	6,000'	690	2400'

BOP Sketch Attached

Gas is Dedicated

Foot ID-1
8-14-84
HPI & BK180
2-14-84
DRILLING UNDERWAY

ABOVE SPACE DESCRIBE PROPOSED PROGRAM; IF PROPOSAL IS TO DEEPEN OR PLUG BACK, GIVE DATA ON PRESENT PRODUCTIVE ZONE AND PROPOSED NEW PA 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.

by G. E. Taterule G.E. Taterule Division Operations Suptd. Date 8-6-84

(This space for State Use)

APPROVED BY Mr. Williams TITLE OIL AND GAS INSPECTOR DATE AUG 14 1984

CONDITIONS OF APPROVAL, IF ANY:

O.M.O.C.G. in sufficient

has cementing

E. S. K.

NEW MEXICO OIL CONSERVATION COMMISSION
WELL LOCATION AND ACREAGE DEDICATION PLAT

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

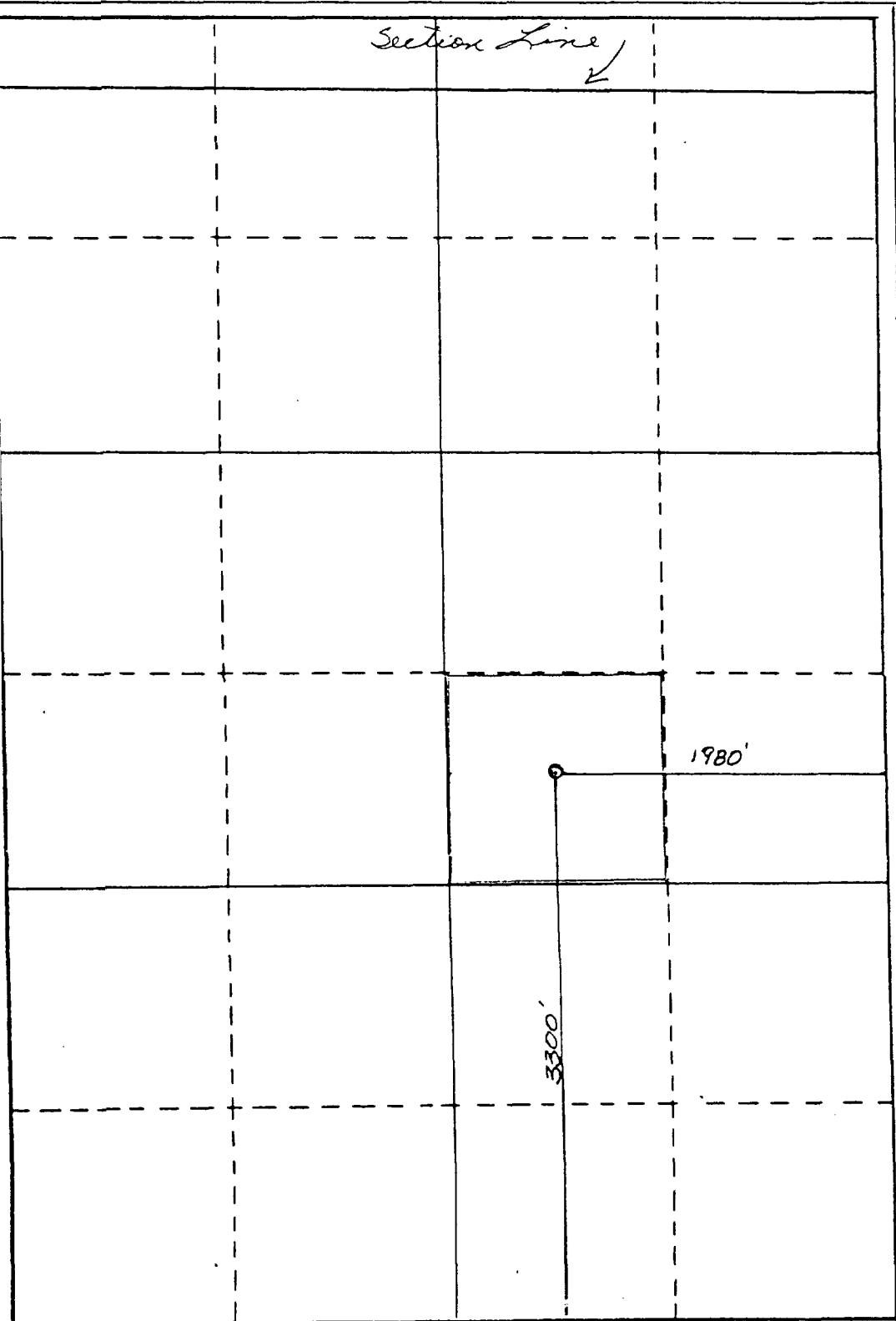
All distances must be from the outer boundaries of the Section.

Operator THE SUPERIOR OIL COMPANY			Lease Burton Flat			Well No. 2		
Section 0	Section 1	Township 21 South	Range 27 East	County Eddy				
Actual Footage Location of Well: 3300 feet from the South line and 1980 feet from the East line								
Sound Level Elev. 3178.	Producing Formation Bone Spring		Pool Undesignated		Dedicated Acreage: 40 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.

G. E. Tate G.E. Tate
Name
Division Operations Supt
Position
The Superior Oil Company
Company
8-7-84
Date

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
May 10, 1984
Registered Professional Engineer
and/or Land Surveyor
Dan R. Reddy
Certificate No.
NM PE&LS #5412