

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

OIL CONSERVATION DIVISION
RECEIVED
FEB 2 1989
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO.	30-025-30513
5. Indicate Type of Lease	STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
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
1. Type of Well: OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		Hood 8
2. Name of Operator Anadarko Petroleum Corporation		8. Well No. 1
3. Address of Operator P.O. Box 806 Eunice, NM 88231		9. Pool name or Wildcat Wildcat
4. Well Location Unit Letter B : 860 Feet From The North Line and 1980 Feet From The East Section 8 Township 17S Range 38E NMPM Lea County		
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3714.2 GL		

11. 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"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
OTHER: <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
	CASING TEST AND CEMENT JOB <input type="checkbox"/>
	OTHER: <input type="checkbox"/>

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.

1. MIRU Plugging unit. TOH w/RBP & PKR.
2. Shoot csg @ 10,050' & could not pull. Set CIBP @ 10,000' w/35 SX cement on top. Displace hole w/10# brine w/35 SX gel per 100 Bl. brine.
3. Shoot csg @ 5077' & pull csg. Set 50 SX cement plug 5130'-4980' (tagged plug).
4. Set 50 SX cement plug 4540-4445' (tagged plug).
5. Set 35 SX cement plug @ 2080'.
6. Set 35 SX cement plug @ 455'.
7. Set 10 SX cement plug @ surface.
8. Set P & A marker, cover pits, and clean location (8-23-89).

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

SIGNATURE

Rick L. Langley

TITLE

Field Foreman

DATE

8-23-89

TYPE OR PRINT NAME

Rick L. Langley

TELEPHONE NO. 394-318

(This space for STATE Use)

APPROVED BY

[Signature]

TITLE

OIL & GAS INSPECTOR

DATE

JAN 30 1990

CONDITIONS OF APPROVAL, IF ANY:

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

OIL CONSERVATION DIVISION

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

WELL API NO.
30-025-30513

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.)

1. Type of Well:
OIL WELL ☒ GAS WELL ☐ OTHER

2. Name of Operator
Andarko Petroleum Corporation

3. Address of Operator
P.O. Box 806 Eunice, NM 88231

4. Well Location
Unit Letter B : 860 Feet From The North Line and 1980 Feet From The East Li:
Section 8 Township 17S Range 38E NMPM Lea County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
3714.2 GL

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 ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT 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.

- MIRU Plugging Unit.
- Release PKR @ 11,200'. Load hole and kill well w/9.5# brine containing 35 SX brine gel/100 bbl brine. TOH w/ 2 7/8" tbg and PKR.
- Set CIBP @ 11,200' w/35' cement plug on top.
- Cut 5 1/2" csg @ 10,000'. Attempt to pull csg. If successful, TIH w/ 2 7/8" tbg. Set 100' cement plug 50' in and 50' above 5 1/2" csg stub @ 10,000'.
- Set 35 SX cement plug in OH @ 8640'.
- Set 35 SX cement plug in OH @ 6500'.
- Set 35 SX cement plug in OH @ 5070'.
- Set 35 SX cement plug @ 4540', 50' in and 50' out of 8 5/8" csg set @ 4490'.
- Set 35 SX cement plug @ 2080'.

Continued on next page.

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

SIGNATURE John C. English TITLE Area Supervisor DATE July 26, 1988
TYPE OR PRINT NAME John C. English TELEPHONE NO. 394-3184

(This space for State Use)

APPROVED BY [Signature] TITLE DISTRICT 1 SUPERVISOR DATE JUL 28 1988

CONDITIONS OF APPROVAL, IF ANY:

THE COMMISSION MUST BE NOTIFIED 24
HOURS PRIOR TO THE BEGINNING OF
PLUGGING OPERATIONS FOR THE C-103
TO BE APPROVED.

000
JUL 27 1966

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10. Set 35 SX cement plug @ 465'.
11. Set 10 SX cement plug @ surface.
12. RD Plugging unit. Remove well head equipment. Set plugged well marker. Clean location.

30-025-30513

WILLBROS DRILLING, INC.



INCLINATION REPORT

OPERATOR: Sohio Pet. Co.

Standard Oil Production
P.O. Box 4587
Houston, Texas 77210

LOCATION: S60°N + 198°E

SOPE Hood 8-1/2 32
(Sec 8, T16S, R37E)
Lea County, New Mexico

DEPTH FEET	INCLINATION DEGREES	DEPTH FEET	INCLINATION DEGREES	DEPTH FEET	INCLINATION DEGREES
227	1/4	8,285	2-3/4		
426	1/2	8,535	2-1/2		
1,436	1/4	8,783	2		
2,023	1/2	9,031	1/2		
2,540	1/4	9,243	1/2		
3,033	1	9,470	1/4		
4,029	1	9,705	3/4		
4,490	1-1/4	9,951	2		
5,005	1-3/4	10,200	1-3/4		
5,500	1-1/4	10,430	2		
5,998	1	10,687	1-1/2		
6,556	1	11,112	2-1/2		
7,050	2-1/2				
7,551	1-1/4				
7,795	1-1/2				
8,044	2				

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APR 20 1989

OIL CONSERVATION DIV.
SANTA FE

COUNTY OF MIDLAND
STATE OF TEXAS

The undersigned states that he has knowledge of the facts and matter herein set forth and that the same are true and correct.

FEB 03 1989

L. E. Grimes, President

SUBSCRIBED AND SWORN TO BEFORE ME THIS 27th day of January 19 89

Dana West
Notary Public

My commission expires: 7-19-89

OIL CONSERVATION DIVISION

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

I.

Operator Anadarko Petroleum Corporation	Well API No. 30-025
Address P.O. Box 806 Eunice, NM 88231	
Reason(s) for Filing (Check proper box) New Well <input type="checkbox"/> Change in Transporter of: Recompletion <input type="checkbox"/> Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Request to Sell 40 Bbls of Oil 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 Hood 8	Well No. 1	Pool Name, Including Formation Wildcat	Kind of Lease X Leasehold Fee	Lease No.
Location Unit Letter B : 860 Feet From The North Line and 1980 Feet From The East Line Section 8 Township 17S Range 38E, 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"/> J.M. Petroleum	Address (Give address to which approved copy of this form is to be sent) P.O. Box 6527 Midland, Tx 79711	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> None designated at this time	Address (Give address to which approved copy of this form is to be sent) NA	
If well produces oil or liquids, give location of tanks.	Unit B	Sec. 8
	Twp. 17S	Rge. 38E
	Is gas actually connected? NA	When? NA

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.

Signature Rick L. Langley
Printed Name Rick L. Langley Title Field Foreman
Date July 3, 1989 Telephone No. 394-3184

OIL CONSERVATION DIVISION

JUL 06 1989
Date Approved _____
By Eddie W. Dean
Title OIL & GAS INSPECTOR

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.

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

OIL CONSERVATION DIVISION

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

Operator	Anadarko Petroleum Corporation	Well API No.	30-025-30513
Address	P.O. Box 806 Eunice, NM 88231		
Reason(s) for Filing (Check proper box)	<input checked="" type="checkbox"/> Other (Please explain) 110		
New Well <input type="checkbox"/>	Change in Transporter of:	Request to sell 72 Bbls test oil	
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>		
Change in Operator <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	June 1989	
If change of operator give name and address of previous operator			

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Hood	Well No.	1	Pool Name, Including Formation	Wildcat	Kind of Lease	State, Federal or Fee	Lease No.		
Location										
Unit Letter	B	:	860	Feet From The	North	Line and	1980	Feet From The	East	Line
Section	8	Township	17S	Range	38E		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"/>	J.M. Petroleum	Address (Give address to which approved copy of this form is to be sent)	P.O. Box 6527 Midland, Tx 79711				
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	None designated at this time	Address (Give address to which approved copy of this form is to be sent)	NA				
If well produces oil or liquids, give location of tanks.	Unit B	Sec. 8	Twp. 17S	Rge. 38E	Is gas actually connected?	When ?	NA

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

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
	X		X					
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
	2-22-89		11,800		11,306			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
3714.2 GL	Strawn		11,218		PKR 11,190			
Perforations					Depth Casing Shoe			
11,218-21, 11,241-47, 11,262-65, 11,273-76, 11,280-86				11,800				
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17 1/2"	13 3/8"		426'		400 SX			
11"	8 5/8"		4490'		1700 SX			
7 7/8"	5 1/2"		11,800'		875 SX			
	2 7/8"		11,190' PKR					

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.)

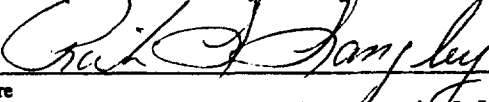
Date First New Oil Run To Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
2-22-89	3-15-89	Swabbed	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF
			UN - 5 1989

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.

Signature 
Printed Name Rick L. Langley Field Foreman
Date May 30, 1989 Telephone No. 505-394-3184

OIL CONSERVATION DIVISION

JUN 1 1989

Date Approved

By

Title

DISTRICT 1 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.

If well produces oil or liquids, give location of tanks.	Unif. B	Sec. 8	Twp. 17S	Rge. 38E	Is gas actually connected? NA	When? NA
--	---------	--------	----------	----------	-------------------------------	----------

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.	11,306	
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay			Tubing Depth	11,190	
3714.2 GL	Strawn		11,218			Depth Casing Shoe	11,800	
Perforations								
11,218-21, 11,241-47, 11262-65, 11,273-76, 11,280-86								
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET			SACKS CEMENT		
17 1/2"	13 3/8"		426'			400 SX		
11"	8 5/8"		4490'			1700 SX		
7 7/8"	5 1/2"		11800'			875 SX		
	2 7/8"		11190' PKR					

V. TEST DATA AND REQUEST FOR ALLOWABLE

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

Date First New Oil Run To Tank	Producing Method (Flow, pump, gas lift, etc.)
2-22-89	Swabbed
Length of Test	Casing Pressure
24 hrs	0
Actual Prod. During Test	Water - Bbls.
35	139
	Gas - MCF
	NA

GAS WELL

Actual Prod. Test - MCF/D	Length of Test
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)
	Bbls. Condensate/MMCF
	Casing Pressure (Shut-in)
	Choke Size
	MAY 31 1989

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	Rick L. Langley	Title	Field Foreman
Printed Name	May 11, 1989	505-394-3184	Telephone No.

OIL CONSERVATION DIV.
DATE
MAY 24 1989

Date Approved

By *[Signature]*

Title Geologist

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.

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

State of New Mexico
Energy, Minerals and Natural Resources Department

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

Form C-105
Revised 1-1-89

WELL API NO. 30-025-30513
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

1a. Type of Well: OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> DRY <input type="checkbox"/> OTHER _____	7. Lease Name or Unit Agreement Name RECEIVED Hood 8
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. Well No. MAY 15 1989 1
2. Name of Operator Anadarko Petroleum Corporation	9. Pool name CONSERVATION DIV. Wildcat SANTA FE
3. Address of Operator P.O. Box 806 Eunice, NM 88231	

4. Well Location Unit Letter B : 860 Feet From The North Line and 1980 Feet From The East Line Section 8 Township 17S Range 38E NMPM Lea County

10. Date Spudded 12-22-88	11. Date T.D. Reached 1-14-89	12. Date Compl. (Ready to Prod.)	13. Elevations (DF & RKB, RT, GR, etc.) 3728.7	14. Elev. Casinghead 3714.2
15. Total Depth 11800	16. Plug Back T.D. 11753	17. If Multiple Compl. How Many Zones?	18. Intervals Drilled By Rotary Tools RT	Cable Tools
19. Producing Interval(s), of this completion - Top, Bottom, Name Strawn (11,218-11,315)				20. Was Directional Survey Made
21. Type Electric and Other Logs Run Dual Laterolog, Spectral Density Dual Spaced Neutron				22. Was Well Cored

CASING RECORD (Report all strings set in well)

CASING SIZE	WEIGHT LB/FT.	DEPTH SET	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
13 3/8	426		17 1/2	400 SX	
8 5/8	4490		11	1700 SX	
5 1/2	11,800		7 7/8	1175 SX	


LINER RECORD					TUBING RECORD		
SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN	SIZE	DEPTH SET	PACKER SET
					2 7/8	11,190	11,190

26. Perforation record (interval, size, and number) (2 SPF) 11,218-11,221, 11,241-11,247, 11,262-11,265, 11,273-11,276, 11,280-11,286, 11,311-11,351	27. ACID, SHOT, FRACTURE, CEMENT, SQUEEZE, ETC. DEPTH INTERVAL 11,218-11,247 3000 gal gelled 20%NEFE 11,262-11,286 3000 gal gelled 20%NEFE
--	---

PRODUCTION

28. Date First Production		Production Method (Flowing, gas lift, pumping - Size and type pump)				Well Status (Prod. or Shut-in) Shut-in	
Date of Test	Hours Tested	Choke Size	Prod'n For Test Period	Oil - Bbl.	Gas - MCF	Water - Bbl.	Gas - Oil Ratio
Flow Tubing Press.	Casing Pressure	Calculated 24-Hour Rate	Oil - Bbl.	Gas - MCF	Water - Bbl.	Oil Gravity - API - (Corr.)	
29. Disposition of Gas (Sold, used for fuel, vented, etc.)						Test Witnessed By	

30. List Attachments

31. 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			
Signature 	Printed Name Rick Langley	Title Field Foreman	Date 4-10-89

INSTRUCTIONS

This form is to be filed with the appropriate District Office of the Division not later than 20 days after the completion of any newly-drilled or deepened well. It shall be accompanied by one copy of all electrical and radio-activity logs run on the well and a summary of all special tests conducted, including drill stem tests. All depths reported shall be measured depths. In the case of directionally drilled wells, true vertical depths shall also be reported. For multiple completions, Items 25 through 29 shall be reported for each zone. The form is to be filed in quintuplicate except on state land, where six copies are required. See Rule 1105.

INDICATE FORMATION TOPS IN CONFORMANCE WITH GEOGRAPHICAL SECTION OF STATE

Southeastern New Mexico

T. Anhy _____	T. Canyon _____
T. Salt 2050	T. Strawn 11,218
B. Salt _____	T. Atoka _____
T. Yates 3180	T. Miss _____
T. 7 Rivers _____	T. Devonian _____
T. Queen _____	T. Silurian _____
T. Grayburg _____	T. Montoya _____
T. San Andres 5272	T. Simpson _____
T. Glorieta 6856	T. McKee _____
T. Paddock _____	T. Ellenburger _____
T. Blinebry _____	T. Gr. Wash _____
T. Tubb _____	T. Delaware Sand _____
T. Drinkard _____	T. Bone Springs _____
T. Abo 8652	T. _____
T. Wolfcamp 10054	T. _____
T. Penn _____	T. _____
T. Cisco (Bough C) _____	T. _____

Northwestern New Mexico

T. Ojo Alamo _____	T. Penn. "B" _____
T. Kirtland-Fruitland _____	T. Penn. "C" _____
T. Pictured Cliffs _____	T. Penn. "D" _____
T. Cliff House _____	T. Leadville _____
T. Menefee _____	T. Madison _____
T. Point Lookout _____	T. Elbert _____
T. Mancos _____	T. McCracken _____
T. Gallup _____	T. Ignacio Otzte _____
Base Greenhorn _____	T. Granite _____
T. Dakota _____	T. _____
T. Morrison _____	T. _____
T. Todilto _____	T. _____
T. Entrada _____	T. _____
T. Wingate _____	T. _____
T. Chinle _____	T. _____
T. Permian _____	T. _____
T. Penn "A" _____	T. _____

OIL OR GAS SANDS OR ZONES

No. 1, from _____ to _____	No. 3, from _____ to _____
No. 2, from _____ to _____	No. 4, from _____ to _____

IMPORTANT WATER SANDS

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

No. 1, from _____ to _____	feet _____
No. 2, from _____ to _____	feet _____
No. 3, from _____ to _____	feet _____

LITHOLOGY RECORD (Attach additional sheet if necessary)

From	To	Thickness in Feet	Lithology	From	To	Thickness in Feet	Lithology
0	2050	2050	Redbeds & Salt				
2050	3180	1130	Rustler				
3180	5272	2092	Yates				
5272	6856	1584	San Andres				
6856	8652	1796	Glorieta				
8652	10054	1402	ABO				
10054	11218	1164	Wolfcamp				
11218	11800	582	Strawn				

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APR 18 1989

**OCD
HOBBS OFFICE**

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

OIL CONSERVATION DIVISION

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

Operator Anadarko Petroleum Corporation	Well API No.
Address P.O. Box 806 Eunice, NM 88231	
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 Date 2-22-89
If change of operator give name and address of previous operator Sohio Pet. Co.	

II. DESCRIPTION OF WELL AND LEASE

Lease Name Hood 8	Well No. 1	Pool Name, including Formation Strawn-Wildcat	Kind of Lease State, Federal or <u>Fee</u>	Lease No.
Location Unit Letter B : 710 Feet From The North Line and 2100.1980 Feet From The East Line Section 8 Township 17S Range 38E , 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"/> None designated at this time	Address (Give address to which approved copy of this form is to be sent)	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> None designated at this time	Address (Give address to which approved copy of this form is to be sent)	
If well produces oil or liquids, give location of tanks.	Unit	Sec.
	Tw.	Rge.
Is gas actually connected?	When ?	

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.

Signature **Rick L. Langley**
Printed Name **Rick L. Langley** Field Foreman
Date **4-6-89** Telephone No. **394-3184**

OIL CONSERVATION DIVISION

Date Approved **APR 7 1989**
By **[Signature]**
Title **DISTRICT 1 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.

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

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

WELL API NO.	30-025-30513
5. Indicate Type of Lease	STATE <input type="checkbox"/> FEE <input type="checkbox"/>
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.)

1. Type of Well:	OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>
------------------	---

2. Name of Operator	Anadarko Petroleum Corporation
---------------------	--------------------------------

3. Address of Operator	P.O. Box 806 Eunice, NM 88231
------------------------	-------------------------------

4. Well Location	Unit Letter <u>B</u> : <u>710</u> ⁸⁶⁰ Feet From The <u>North</u> Line and <u>2100</u> ¹⁹⁸⁰ Feet From The <u>East</u> Line
	Section <u>8</u> Township <u>17S</u> Range <u>38E</u> NMPM Lea County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)	3714.2 GL
--	-----------

7. Lease Name or Unit Agreement Name	
--------------------------------------	--

Hood 8	
--------	--

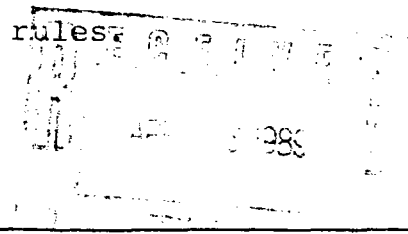
8. Well No.	1
-------------	---

9. Pool name or Wildcat	Wildcat
-------------------------	---------

11. 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"/>
PLUG AND ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
CHANGE PLANS <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>
OTHER: <u>New Completion</u> <input checked="" type="checkbox"/>	OTHER: <u></u> <input type="checkbox"/>

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.

1. MIRUPU. Release PKR & TOH w/prod. tbg. TIH w/5½ RBP & PKR.
2. Acidize perforations 11,218-11,247 w/1000 gal 20% NEFE acid.
3. Swab test.
4. Acidize perforations 11,262-11,286 w/3000 gal. 20% NEFE acid.
5. Swab test.
6. If production indicated POP.
7. If non-productive P & A in accordance w/State rules.



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

SIGNATURE <u>Rick Langley</u>	TITLE <u>Field Foreman</u>	DATE <u>4-6-88</u>
TYPE OR PRINT NAME <u>Rick Langley</u>	TELEPHONE NO. <u>394-3184</u>	

(This space for State Use)

APPROVED BY <u>Jerry Sexton</u>	TITLE <u>DISTRICT 1 SUPERVISOR</u>	DATE <u>APR 10 1988</u>
CONDITIONS OF APPROVAL, IF ANY:		

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

Operator SOHIO PETROLEUM COMPANY, ATTN: ONSHORE NORTH PRODUCTION		Well API No. 30-025-3000
Address P.O. Box 4587, Houston, Texas 77210		
Reason(s) for Filing (Check proper box) New Well <input checked="" type="checkbox"/> Recompletion <input type="checkbox"/> Change in Operator <input type="checkbox"/>		Other (Please explain) Request for test allowable 3000bbl. (stored in Frac tanks) Jan 1989
If change of operator give name and address of previous operator		

II. DESCRIPTION OF WELL AND LEASE

Lease Name Hood 8	Well No. 8-1	Pool Name, Including Formation Shipp Strawn	Kind of Lease State, Federal or Fee	Lease No.
Location Unit Letter B : 1980 Feet From The East Line and 860' Feet From The North Line Section 8 Township 17S Range 38E, 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"/> Texaco Trading & Transportation	Address (Give address to which approved copy of this form is to be sent) P.O. Box 6196, Midland, Tx. 79711-0196					
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)					
If well produces oil or liquids, give location of tanks.	Unit E	Sec. 8	Twp. 17S	Rge. 38E	Is gas actually connected? NO	When ?

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 X	Gas Well	New Well X	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded Dec. 22, 1988	Date Compl. Ready to Prod. Estimate Test 1-31-89		Total Depth 11,800'		P.B.T.D. 11755'			
Elevations (DF, RKB, RT, GR, etc.) 3714' GRL	Name of Producing Formation Strawn		Top Oil/Gas Pay 11,224'		Tubing Depth 11150'			
Perforations 11218-221', 11241-247', 11262-265', 11273-276', 11280-286', 11311-315'					Depth Casing Shoe 11,900'			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17 1/2"	13-3/8"		426'		400 sx.			
11"	8-5/8"		4490'		1700 sx.			
7-7/8"	5 1/2"		11800'		1175 sx.			
		2-7/8" tubing		11150' pkr)				

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.

Signature
J. J. Hoffer, North Area Prod. Supt.
Printed Name
Date Jan 27, 1989 (713) 552-8500
Telephone No.

OIL CONSERVATION DIVISION

Date Approved JAN 30 1989
By
Title DISTRICT 1 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.

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

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

WELL API NO. 30-025-30513
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
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.)

1. Type of Well:
OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. Name of Operator
Sohio Petroleum Company

3. Address of Operator
P. O. Box 460609, Houston, Texas 77056-8609

4. Well Location
Unit Letter B : 1980 Feet From The East Line and 860 Feet From The North Line
Section 8 Township 17S Range 38E NMPM Lea County

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

3714.2

7. Lease Name or Unit Agreement Name
Hood "8" LB & N
8. Well No.
1
9. Pool name or Wildcat
Wildcat
OIL CONSERVATION DIVISION
SANTA FE

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: ☐

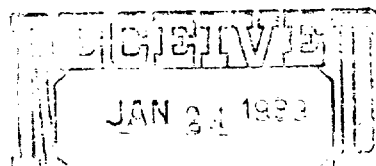
SUBSEQUENT REPORT OF:

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

Spud 12-22-88

Csg	Depth	Cement	Pressure	Date
13-3/8 conductor, 54.5 & K55	425	420 sxs C1 C		12-23-88
8-5/8, K55	4490	1500 sxs Lite, 200 sxs C1 C	500# w/o cement, 13-1/2 hours	12-26-88
5-1/2, K55 & N80	11800	875 sxs C1 C	2200#	1-17-89



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

SIGNATURE Elaine Kubicek TITLE Technical Assistant DATE 1-18-89

TYPE OR PRINT NAME Elaine Kubicek TELEPHONE NO. 713/552-6433

(This space for State Use)

APPROVED BY Jerry L. [Signature] DISTRICT 1 SUPERVISOR DATE FEB 01 1989

CONDITIONS OF APPROVAL, IF ANY:

cc: 0 + 2 NM Oil Cons., Hobbs
F. Hoffer
E. Kubicek
WELL FILE

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

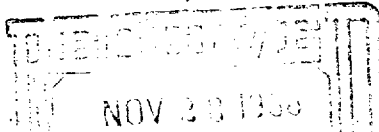
OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-101
Revised 10-1-78

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SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	



5A. Indicate Type of Lease
STATE ☐ FEE ☒

5. State Oil & Gas Lease No.

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work DRILL <input checked="" type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input type="checkbox"/>		7. Unit Agreement Name
b. 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 Hood "8"
2. Name of Operator Sohio Petroleum Company		9. Well No. 1
3. Address of Operator PO Box 460609 Houston, Texas 77056-8609		10. Field and Pool, or Wildcat Wildcat
4. Location of Well UNIT LETTER B LOCATED 1980 FEET FROM THE East LINE AND 860 FEET FROM THE North LINE OF SEC. 8 TWP. 17S REC. 38 East NMPM		12. County Lea
19. Proposed Depth 12,000 TVD		19A. Formation Atoka
20. Rotary or C.T. Rotary		
1. Elevations (Show whether DF, RT, etc.) 3714.2	21A. Kind & Status Plug. Bond Blanket	21B. Drilling Contractor To be announced
		22. Approx. Date Work will start December 1, 1988

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	48	400	350	Surface
11	8 5/8	24	4500	1450	Surface
7 7/8	5 1/2	17	12000	770	8700

The proposal is to drill to 400 ft, set and cement 13 3/8 Surface Casing as outlined above. A 2-Ram, Annular BOP stack will be nipped up and tested initially and every 30 days thereafter as required. A 11" hole will be drilled to 4500 and 8 5/8 casing set across the salt. A 7 7/8" hole will be drilled to total depth. The objective is to test the Strawn. Well is to be drilled as a wildcat 40 acre. 80 acre spacing will be requested once production has been found.

cc: BW Smith
JD Sikes
Karen Harvey
Well File

Permit Expires 6 Months From Approval
Date Unless Drilling Underway

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.

Signed Elaine Kubisek Title Technical Assistant Date 12-22-88

(This space for State Use)

DISTRICT 1 SUPERVISOR

NOV 23 1988

APPROVED BY [Signature] TITLE

DATE

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.

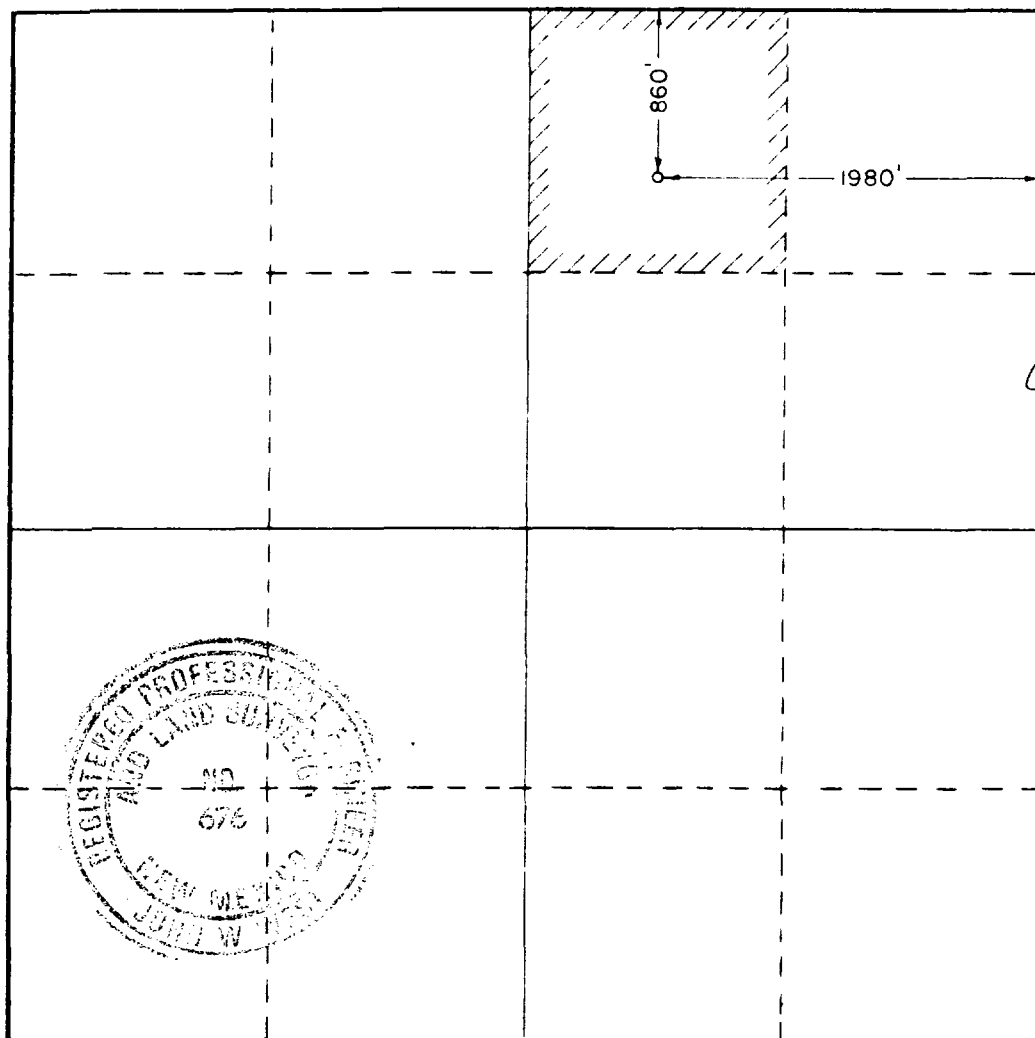
Operator Sohio Oil Company			Lease Hood "B"		Well No. 1
Unit Letter B	Section 8	Township 17 South	Range 38 East	County Lea	
Actual Footage Location of Well: <div style="display: flex; justify-content: space-between; align-items: center;"> 860 feet from the north line and 1980 feet from the east line </div>					
Ground Level Elev. 3714.2	Producing Formation Strawn	Pool Wildcat	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.

Name *John W. West*
 Position _____
 Agent

Company
Sohio Oil Company

Date
November 22, 1988

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
November 21, 1988

Registered Professional Engineer and/or Land Surveyor

John W. West
 Certificate No. **JOHN W. WEST, 676**

RONALD J. EIDSON, 3239

96560

WRS COMPLETION REPORTREISSUES SEC 8 TWP 17S RGE 38E
PI# 30-T-0003 10/01/89 30-025-30513-0000 PAGE 1NMEX LEA * 860FNL 1980FEL SEC NW NE
STATE COUNTY FOOTAGE SPOT
ANADARKO PET D D
OPERATOR WELL CLASS INIT FIN1 HOOD "8"
WELL NO. LEASE NAME
3729KB 3714GR LEA CO UNDESIGNTD
OPER ELEV FIELD POOL AREA
API 30-025-30513-0000
LEASE NO. PERMIT OR WELL I.D. NO.12/22/1988 08/23/1989 ROTARY VERT D&A-O
SPUD DATE COMP. DATE TYPE TOOL HOLE TYPE STATUS
12000 ATOKA WILLBROS DRLG 6 RIG SUB 14
PROJ. DEPTH PROJ. FORM CONTRACTOR
DTD 11800 FM/TD STRAWN
DRILLERS T.D. LOG T.D. PLUG BACK TD OLD T.D. FORM T.D.**LOCATION DESCRIPTION**

3 MI NW KNOWLES, NM

WELL IDENTIFICATION/CHANGESOPERATOR CHGD FROM SOHIO PET
FINAL STATUS CHGD FROM TA-O**CASING/LINER DATA**CSG 13 3/8 @ 426 W/ 400 SACKS
CSG 8 5/8 @ 4490 W/ 1700 SACKS
CSG 5 1/2 @ 11800 W/ 1175 SACKS
CUT 5 1/2 CSG @ 5077 & PLD
PLUGS @ 4980-5130 W/50 SX, 4445-4540 W/50 SX,
2080 W/35 SX, 455 W/35 SX, SURF W/10 SX

TYPE	FORMATION	LTH	TOP DEPTH/SUB	BSE DEPTH/SUB
LOG	SALT		2050	1679
LOG	YATES		3180	549
LOG	SN ANDRS		5272	-1543
LOG	GLORIETA		6856	-3127
LOG	ABO		8652	-4923
LOG	WOLFCAMP		10054	-6325
LOG	STRAWN		11218	-7489

SUBSEA MEASUREMENTS FROM KB

CONTINUED IC# 300257043588

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Prohibited**Petroleum Information**PI-WRS GF
Form No. 187**BB** a company of
The Dun & Bradstreet Corporation

REISSUES
PI# 30-T-0003 10/01/89 SEC 8 TWP 17S RGE 38E
30-025-30513-0000 PAGE 2

ANADARKO PET D D
1 HOOD "8"

PRODUCTION TEST DATA

PTS 8BO 143BW
STRAWN PERF W/ 2/FT 11218-11351 GROSS
PERF 11218-11221 11241-11247 11262-11265 11273-11276
PERF 11280-11286 11311-11320 11320-11330 11331-11351
ACID 11218-11351 3000GALS
BRPG @11306 11311-11351

PTS 32BO 23BW 12HRS
STRAWN PERF 11218-11286 GROSS
BRPG @11254 11262-11286

PTS 68BO 315BW 96HRS
STRAWN PERF 11218-11247 GROSS
ACID 11218-11247 3000GALS

STRAWN PERF 11218-11247 GROSS
ACID 11218-11247 2000GALS
BRPG @11288 11311-11351
PLD BRPG @ 11254

PTS 35BO 104BW 22HRS
STRAWN PERF 11218-11286 GROSS
PERF 11218-11286
ACID 11218-11286 3000GALS
BRPG @10000 11218-11286
SWBD 35 BO + 104 BW IN 22 HRS 30 MINS

LOGS AND SURVEYS /INTERVAL,TYPE/

LOGS	DLL	SPCT	DENL
LOGS	DSN		

DRILLING PROGRESS DETAILS

	ANADARKO PET
	BOX 2497
	MIDLAND, TX 79702
	915-682-1666
11/23	LOC/1988/
12/27	DRLG 4490
01/04	DRLG 8824
01/10	DRLG 10862

CONTINUED

REISSUES SEC 8 TWP 17S RGE 38E
PI# 30-T-0003 10/01/89 30-025-30513-0000 PAGE 3

ANADARKO PET

D D

1 HOOD "8"

DRILLING PROGRESS DETAILS

01/17 11800 TD, RNG 5 1/2 CSG
01/17 DEVIATION SURVEYS @ 227 (1/4 DEG), 426 (1/2 DEG),
1436 (1/4 DEG), 2023 (1/2 DEG), 2540 (1/4 DEG),
3033 (1 DEG), 4029 (1 DEG), 4590 (1 1/4 DEG),
5005 (1 3/4 DEG), 5500 (1 1/4 DEG), 5998 (1 DEG),
6556 (1 DEG), 7050 (2 1/2 DEG), 7551 (1 1/4 DEG),
7795 (1 1/2 DEG), 8044 (2 DEG), 8285 (2 3/4 DEG),
8535 (2 1/2 DEG), 8783 (2 DEG), 9031 (1/2 DEG),
9243 (1/2 DEG), 9470 (1/4 DEG), 9705 (3/4 DEG),
9951 (2 DEG), 10200 (1 3/4 DEG), 10430 (2 DEG),
10687 (1 1/2 DEG), 11112 (2 1/2 DEG)
02/02 11800 TD, WOCT
02/08 11800 TD, WOCT
02/16 11800 TD, WOCT
02/21 11800 TD, PB 11306, SWBG
02/24 11800 TD, PB 11306, TSTG
03/02 11800 TD, PB 11306, TSTG
03/03 11800 TD, PB 11254, SWBG
03/31 11800 TD, PB 11288, SI WOO
04/13 11800 TD, PB 11288, SI
05/17 11800 TD, PB 11288, TEMP ABND
TD REACHED 01/14/89 RIG REL 01/18/89
09/28 11800 TD
COMP 8/23/89, D&A
NO CORES OR DSTS RPTD
REISSUED TO CORRECT COMP DATE, FINAL
STATUS, PROD TEST & ADD PLUGGING DETAILS,
CSG NARR & DELETE PBD
REPLACEMENT FOR CT ISSUED 5/22/89