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

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

#### State of New Mexico Energy, Minerals and Natural Resources Department

on DIVISION

DISTRICT 1 SUPERVISOR

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

### OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088 EB 12

AM 8 37

÷ΰ

DISTRICT III 1000 Rio Brazos Rd., Azzec, NM 87410		Sa	nta re,	new M	exico 8/30	4-2088 E	818	AM 8 37		
I.					BLE AND A	_		N		
Operator		IO IRA	INSPU	KI UIL	AND NAT	UHALG		II API No.		
BWA Oil and	Gas							30-025-2	8596	
Address							<del></del>	<u> </u>	<u> </u>	
P. O. Box 478	<u>4, Mic</u>	<u>lland</u>	<u>Tx</u>	7970	4		<del> </del>			<del></del>
Reason(s) for Filing (Check proper box) New Well		Change in	Tourne	lan afi	Othe	t (Please exp	olain)			
Recompletion	Oil	Cuange III	Dry Gas							
Change in Operator	Casinghea	d Gas 🔲	Condens	_						
If change of operator give name and address of previous operator Bru	ce A.	Wilb.	anks			<del></del>	<u>-</u>			
II. DESCRIPTION OF WELL	AND LEA	ASE								
Lease Name		Well No.	Pool Na	me, Includi	ing Formation ,	Pitchfor	k Ki	nd of Lease		ase No.
Moore 34 com.			ur	idesi	gnated /	Reinett S	trate Sta	te, Federal on Fee	<u> </u>	
Location Unit LetterG	- ::	1980	. Feet From	m The	North Line	and19	80	Feet From The	East	Line
Section 34 Township	24-8	3	Range	34-e	, NN	IPM,	Lea		····	County
III. DESIGNATION OF TRAN	CDADTE	D OF O	ff A NID	NIA TITI	DAT CAC					
Name of Authorized Transporter of Oil	SPURIE	or Conden		NATU		address to v	vhich appro	ved copy of this fo	rm is to be sen	ut)
Enron Oil Trad	i <del>ng</del> &	Trans	sport	l :				ton, TX		
Name of Authorized Transporter of Casing		[XX	or Dry G	as 🔲	Address (Give	address to w	vhich appro	ved copy of this fo	rm is to be sen	u)
Transwestern Pip	·	Co.	<u> </u>	<del></del> -				ton, Tx	<u>77251-9</u>	9931
If well produces oil or liquids, give location of tanks.	Unit     G	Sec. 34	Twp. 249	Rge.   34]		connected?	Į Wi	2-1-91		
If this production is commingled with that f	<del></del>				<del></del>	 eг:		<u> </u>	<del></del>	
IV. COMPLETION DATA										
Designate Type of Completion	- (X)	Oil Well	G	as Well	New Well	Workover	Deeper	Plug Back	Same Res'v	Diff Res'v
Date Spudded	Date Comp	ol. Ready to	Prod.		Total Depth			P.B.T.D.		
Elevations (DF, RKB, RT, GR, etc.)	Name of P	roducing Fo	ormation		Top Oil/Gas P	ay		Tubing Depth	1	
Perforations	L				l			Depth Casing	Shoe	
					·					
LIOLE OITE					CEMENTIN				10/0 05/45	
HOLE SIZE	CA	SING & TU	JRING SI	<u> </u>	<del> </del>	DEPTH SE	<u> </u>	S	ACKS CEME	NI .
	<del>                                     </del>				<del> </del>					
V. TECT DATE AND DECLIES	T FOD A	LLOW	A DI Y		<u> </u>					
V. TEST DATA AND REQUES OIL WELL (Test must be after re				l and must	he agual to or	exceed top al	lowable for	this death or he fo	or full 24 hours	e l
Date First New Oil Run To Tank	Date of Te		oj 1000 ou	. 6742 77463	Producing Me	<del></del>			<i></i>	
Length of Test	Tubing Pre	ssure			Casing Pressu	re		Choke Size		
Actual Prod. During Test	Oil - Bbls.		· · · · · · · · · · · · · · · · · · ·		Water - Bbls.			Gas- MCF		
GAS WELL										
Actual Prod. Test - MCF/D	Length of	<u> Fest</u>			Bbls. Condens	sate/MMCF		Gravity of Co	ondensate	
Testing Method (pitot, back pr.)	Tubing Pre	ssure (Shut	:-in)		Casing Pressu	re (Shut-in)		Choke Size		
					ļ					
VI. OPERATOR CERTIFIC	_			CE		IL CO	NSER'	VATION [	OIVISIO	N
I hereby certify that the rules and regular Division have been complied with and to is true and complete to the best of my k	that the infor	mation give			11					
Boll Walk	isii				Date	Thirde		FEB		

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

Printed Name

Date

- 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.

Telephone No.

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

## State of New Mexico Energy, Minerals and Natural Resources Department

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

OIL CONSERVATION DIVISION: IVED

P.O. Box 2088

Santa Fe, New Mexico 87508-2088 21 AM 11 01

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

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

7410 DECLIEST SO

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

L.		O IDAN	NOPU		, ANU NA	I UNAL G	43			
Operator	<del></del>	<del></del>			<del></del>		Well A	PI No.	<del></del>	<del></del>
Bruce A. Wilbanks Cor	npany						30-	025-285	96	
Address				<del></del>						
505 N. Big Spring St.	. STE 50	00, Mid	lland	, Texa	as 79701	Вох	763 Mid	land. T	x 79702	
Reason(s) for Filing (Check proper box)		<del></del>			XX Oth	et (Please exp	GHEAD G	30:3110		
New Well	•	Change in T	ransporte	r of:	Re-ei	ー しべるい ntrv	ygnzau G	AS MUS	I NOT BE	
Recompletion	Oil	r	Ory Gas		-10-0.	FLAR	ED AFTER	<u> </u>	8-90	
Change in Operator	Casinghead	Gas 🔲 C	Condensa	te 🗌		UNLE	SS AN EX	CEPTAON	TO R-407	ia.
If change of operator give name						IC DE	TAINES.	17.	-	<del>5</del> ,
and address of previous operator	<del></del>	<del></del>				·		<del></del>	er er rættebli	<del>:::::::</del>
II. DESCRIPTION OF WELL A	AND LEA	SE ¥	(). <sub>***</sub>	41-	a Po	-16	1	927,	/	. •
Lease Name			ool Nan	e. Includi	ng Formation	1 1	Kind o			ease No.
Moore "34" Com.				signat	١.	traw		ederal on Fed		
Location			Unas	- HIGH		or and				
	10	980 г		- No	web	. 10	90 -		T a a d	
Unit LetterG	. :	300 F	eet Fron	The INC	orth Line	and	80 Fee	t From The	East	Line
Section 34 Township	97. (	c t	2	27. T		are a	-			Country
Section 34 Township	24-9	2 1	Range	<u> 34-1</u>	<u> </u>	ирм,	Lea			County
III. DESIGNATION OF TRANS	edanter		A NID	BLEA TOTAL	242 440					
Name of Authorized Transporter of Oil		or Condensa		NATU		e address to w	hich approved	name of this f	arm is to be se	
•	4 <u>4</u>		└				ton, TX			nuj
Enron Oil Trading &	Cranspor				<del></del>					
Name of Authorized Transporter of Casing		x <u>k</u> o	or Dry G	25			hich approved			
Transwestern Pipeline							, Housto		/251-118	38
If well produces oil or liquids, give location of tanks.			wp.	Rge.	Is gas actually	y connected?	When			
	G	34	24S	34E	No		1 5/3	1/90		
If this production is commingled with that f	rom any othe	r lease or po	ool, give	commingl	ing order numl	er:				
IV. COMPLETION DATA							1 1/4/2/2/2/2/2/2		·	- <b>,</b>
Designate Type of Completion -	(V)	Oil Well	Ga	s Well	New Well	Workover	XXXXXX	Plug Back	Same Res'v	Diff Res'v
	_ `	XX				L	REENTRY	, <del> </del>	L	_L
Date Spudded	Date Compl	. Ready to F	rod.		Total Depth			P.B.T.D.		
3-30-90	4-30-				13,800			13.8	00	
Elevations (DF, RKB, RT, GR, etc.)	Name of Pro	oducing For	nation		Top Oil/Gas	Pay	į	Tubing Dept	h	
3396 GL	Strawn	n Lime			13.647-	-13.780		13.64		
Perforations								Depth Casin	g Shoe	
13,647-13,780 48 ho	oles									
		UBING, C	CASINO	G AND	CEMENTI	NG RECOR	D			
HOLE SIZE	CAS	ING & TUB	ING SIZ	?E		DEPTH SET	•	5	SACKS CEMI	ENT
14"	11-3/4	11				515		415		
11"	8-5/8'					233'		1250		
7-7/8"	5-1/2'	11			13	540		1210		
4-3/4"	3-1/2'					370		250		
V. TEST DATA AND REQUES	T FOR A	LLOWA	BLE							
OIL WELL (Test must be after re	covery of total	al volume of	load oil	and must	be equal to or	exceed top all	owable for this	depth or be j	or full 24 hou	rs.)
Date First New Oil Run To Tank	Date of Test				Producing Me	thod (Flow, p.	ump, gas lift, et	c.)		
4-30-90	4-6-90	)			flor	ving				
Length of Test	Tubing Press				Casing Pressu		<del></del>	Choke Size	· _ · · · · · · · · · · · · · · ·	
24 hours	325				0			12/6/		
Actual Prod. During Test	Oil - Bbls.				Water - Bbls.			12/64 Gas- MCF		
					21			234		
	14				31	<del></del>		234		
GAS WELL		<del></del>			·					
Actual Prod. Test - MCF/D	Length of To	est			Bbls. Conden	sate/MMCF		Gravity of C	ondensate	
Testing Method (pitot, back pr.)	Tubing Pres	sure (Shut-in	n)		Casing Pressu	re (Shut-in)		Choke Size		
	<u> </u>							·		
VI. OPERATOR CERTIFICA	ATE OF	COMPI	JANC	Έ						
I hereby certify that the rules and regula						OIL COI	<b>NSERVA</b>	ATION	DIVISIC	N
Division have been complied with and t					[]					
is true and complete to the best of my k					Data	Approve	d	MAY	1 8 199	an
O -	1				Date	ANDIOVE	u		40 19	<del>/\</del>
Leanth,	auce	11_			II _	(/		1		
Signature					∥ By_	XX	ryx	LILA	m	
Jeanette Lowery		Agent				בפות'	FRICT 1	SUPER1	/ISOR	
Printed Name		_	litle	•	Title	<b>WIO</b>	111101 -		=	
5/14/90	915 68	82 7582								
Date		Telent	none No.		11					

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	RECEIVEE	_		State of Ne s and Natur			partme					C-105 ed 1-1-89
	Fee Lease — 5 copies DISTRICT I P.O. Box 1980, Hobber N	D. F COO. 40	OIL		ERVA' P.O. Bo			SIO	N	ELL API N 30-	025 – 2	8596	
	DISTRICT II P.O. Drawer DD, Artesia,		11 (	Santa Fe,	New Me			38	5.	Indicate T	•	TATE [	FEE X
	DISTRICT III 1000 Rio Brazos Rd., Azi	tec, NM 87410							6.	State Oil &	de Gas Lease	No.	
	WELL CO	OMPLETION (	OR RE	COMPLE	TION RE	PORT	AND LO	G		Lease Nan			
	OIL WELL	GAS WELL	$\square$	DRY 🗌	OTHER _				<del> </del> "		e "34		
	b. Type of Completion:  NEW WORK WELL OVER	DEEPEN	PLU0 BACK		DIFF RESVR O	THER R	e-ent	rv					
1	Name of Operator	Wilbanks		· <del></del>					8.	Well No.	#1		
3	. Address of Operator	ig Sprin			n Mid	land	т.,	7070	9.	Pool name	or Wildcat	Undes	ignated Strawn
7	. Well Location	· · · · · · · · · · · · · · · · · · ·			· <del>w</del>								
	Unit Letter	G: 1980		0					.980		from The	East	Line
-	Section  0. Date Spudded 1	34  1. Date T.D. Reach		r	4 – S ompl. <i>(Ready t</i>	Range			NMF	M L RKB, RT, G	ea R. etc.)	14. Elev. (	County
Ľ	• 1	4-26-90	)	1	30-90		1.54		396 (		n, e.c.,	330	•
1	5. Total Depth 13,800'	16. Plug Bac 13	<b>k T.D.</b> 800		17. If Multiple Many Zon	e Compl. ses?	How	18. in	tervals rilled By	Rotary Too	ls	Cable To	
1	9. Producing Interval(s), 6 13,647-1	of this completion	Top, B	ottom, Name	Δ						20. Was Dir		•
12	1. Type Electric and Othe		CLA	MII TITIL	<u> </u>					22. Was W		re-er	ırry
12	3.	·	CA	SING RI	ECORD	(Reno	rt all str	ings s	et in w	no ell)		·	
	CASING SIZE	WEIGHT LE		<del></del>	H SET		OLE SIZE			ENTING R	ECORD	AM	OUNT PULLED
+	5 1/2"	17.00		653	4 '		7.5/	3′- : -	250	sx 50 sx "	-50 no	7.C. C.1	
-	Above is	lie-back	stri	ng on	ly,all	oth	er st	ring	s set	by H	N <del>C re</del> r	nain i	ntact.
L													
2	4.			ER RECO	,				25.		BING RE		
	SIZE	TOP	BC	MOTTO	SACKS CE	MENT	SCRE	EN		3/8	13	640	13,460
2	6. Perforation recon	d (interval, size	, and r	number)			27. A	CID, S	HOT, F	RACTUR	L E, CEME	NT, SQU	EEZE, ETC.
	13,647-13	3780,34"	48	holes	5			INTER	eatme		NT AND K	IND MATI	RIAL USED
								/ L.L.	cacille	114			
2	8				PRODU	CTIO	N_						
1	4 - 30 - 90	1			lowing, gas li	ft, pumpi	ng - Size an	d type p	ump)		Well St	atus (Prod.	or Shut-in)
I	4-30-90 late of Test 4-6-90	Hours Tested 24		wing hoke Size	Prod'n Fo	-	Oil - BЫ.	, (	Gas - MCI	_	Vater - Bbi.	ut-in 	Gas - Oil Ratio
F	low Tubing Press. 325	Casing Pressure	C H	12/64 alculated 24- lour Rate	Oil - Bbl.		Gas - N			r - Bbl.	31	Vity - API	,500/1 -(Corr.)
2	9. Disposition of Gas (Sold				4		23	4	3	Test W	itnessed By		
3	vented  O. List Attachments							-	·····	I	). Eim	ers_	
3	1. I hereby certify that t	the information s	hown o	n both sides	of this form	is true	and compl	eie to ti	he best of	my knowle	edge and b	elief	
	Signature O	anutte) T	Lou	<u>ui1_</u>	Printed Name	Jean	nette 1	Lower	<u>Y</u> Title	Agent		Data	5/14/90
!	7												

### **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

\_\_\_\_\_\_ T. Canyon \_\_\_\_\_ T. Ojo Alamo \_\_\_\_\_ T. Penn. "B"\_\_\_\_\_

 T. Salt
 T. Strawn
 T. Kirtland-Fruitland
 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. Menefee
 T. Madison

Northwestern New Mexico

Southeastern New Mexico

T. Anhy \_

										_			
Graybur	rg			T. Montoya	<del></del>	_ T. Mano	::::::::::::::::::::::::::::::::::::::		T. McCracken				
San And	dres	<del></del>		T. Simpson		_ T. Gallu	p		T. Ignaci	io Otzte			
Glorieta	·			T. McKee		_ Base Gr	eenhorn.		T. Grani	te			
Drinkard	d			T. Bone Springs		T. Entra	da		T	TT			
Abo				Т.		T. Wing	ate		Т.				
Wolfcan	mp			Т.		T. Chinl	e		Т.				
Penn	-			Т.		T. Perm	ain		T.				
Cisco (B	Bough (	<u> </u>		т.		T. Penn	"A"		T.				
o. 2, from	n ta on ra	te of wa	ter inflo	to	MPORTANT V	No. 3 No. 4 WATER se in hole.	, from , from SAND	S	to				
				to									
				to									
3. from	n			to		••••••	•••••	feet	• • • • • • • • • • • • • • • • • • • •				
J. J, 11-01.								1 -1 + : <b>c</b>					
		· = · ·		THOLOGY R	ECORD (A	Attach ad	ditiona	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	ecessary)				
From	То	Thickner in Fee	:88	Lithology R		Attach ad	To	Thickness in Feet	ecessary)	Lithology			

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

TYPE OR PRINT NAME

(This space for State Use)

CONDITIONS OF APPROVAL, IF ANY:

## State of New Mexico Energy, Minerals and Natural Resources Department

Form C-101 Revised 1-1-89

DISTRICT II P.O. Box 1980, Hobbs, NM 88240  DISTRICT II P.O. Drawer DO Artesia, NM 88210  P.O. Drawer DO Artesia, NM 88210  DISTRICT II P.O. Drawer DO Artesia, NM 88210  10 10	API NO. (assigned by OCD on New Wells) $30-025-28596$ 5. Indicate Type of Lease STATE FEE
DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410	6. State Oil & Gas Lease No.
APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK	
la. Type of Work:	7. Lease Name or Unit Agreement Name
DRILL RE-ENTER DEEPEN PLUG BACK	
b. Type of Well:  OIL GAS WELL GAS WELL COTHER  OTHER  OTHER  OTHER	Moore "34" Com.
2. Name of Operator (C. Abritaka)	8. Well No.
Bruce A. Willbanks Co.	. 1
3. Address of Operator	9. Pool name or Wildcat tindisconcetal
505 N. Big Spring Suite 500, Midland, Tx 79701	Pitchfork Ranch Wolfca
4. Well Location Unit Letter : 1980 Feet From The North Line and 198	60 Feet From The East Line
Section 34 Township 24-S Range 34-E	NMPM Lea County
//////////////////////////////////////	formation 12. Rotary or C.T.
<i>\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\</i>	Volfcamp Rotary
13. Elevations (Show whether DF, RT, GR, etc.) 14. Kind & Status Plug. Bond 15. Drilling Contractor	····
3396 G.L. Blanket Well-Tec	
17. PROPOSED CASING AND CEMENT PROGR	RAM
SIZE OF HOLE   SIZE OF CASING   WEIGHT PER FOOT   SETTING DEPTH	SACKS OF CEMENT EST. TOP
14" 11 3/4" 42.00 615'	415 Sur.
11" 8 5/8" 32.00&36.00 5233'	1250 Sur.
7 7/8" 5 1/2" 17.00 13,540'	1210 6500'
4 3/4 3 1/2" 10.20 15,370	250 13209'
Program to include, drill cement plugs out to	cop of Strawn. Run 5 1/2
liner from 6534' to5000' cement in place. Log a BOP program to include ram type BOP's as well a solve the	as annular preventers.

Permit Expires 5 Months From Approva-Date Unless Drilling Undersay.

Geologist

TELEPHONE NO. 115-682-7582

## STATE OF NEW MEXICO

ENERGY AND MINERALS DEPARTMENT OIL CONSERVATION DIVISION --. \*\* COPIES SCCEIVES DISTRIBUTION P. O. BOX 2088 Form (C-103 -Revised .10-1-78 SANTA FE SANTA FE, NEW MEXICO 87501 FILE 5a. Indicate Type of Lease U.S.G.S. Foo X State LAND OFFICE CORRECTED PLUG #1 5. State Oil & Gas Lease No. OPERATOR 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. Unit Agreement Name WELL (X 2. Name of Operator 8. Farm or Lease Name Enron Oil & Gas Company Moore 34 Com. 3. Address of Operator 9. Well No. P. O. Box 2267, Midland, Texas 79702 4. Location of Well 10. Field and Pool, or Wildcat 1980 Pitchfork Ranch (Wlfcp) north UNIT LETTER east **24S** 15. Elevation (Show whether DF, RT, GR, etc.) 12. County Lea 3401.6' GR Check Appropriate Box To Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: 6/18/87 PLUG AND ABANDON COMMENCE DRILLING OPHS. CASING TEST AND CEMENT JOB CHANGE PLANS 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. 1-28-88 - Set 60 sacks at 13,210 - tagged at 12,895'

·	ALTO THE THE STATE OF THE STATE		
•			
Batter Sellow Betty Gildon	TITLE - Regulatory Analyst	DATE_	2/19/88

#### STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

we, or corits Acceives	T	
DISTRIBUTION		
SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
OPERATOR		

CONDITIONS OF APPROVAL, IF ANY

## OIL CONSERVATION DIVISION

	DISTRIBUTION SANTA FE	N	SAN		BOX 20	88 XICO 87501			Form ;C-103 Revised .10	
	FILE U.S.G.S.				- 44 IA1 F	. 7.100 87301		5a. Indicate Type	of L.ease Fee	<u> </u>
	DERATOR							5, State Oil & Gar		LXI
<del></del>	(DO NOT USE THE	SUNDRY	NOTICES AND	O DEEPEN OR PI	.UG BACK T	O A DIFFERENT RES	ERVOIR.			III
•	OIL X	GAS WELL	OTHER-	OMM C-101) FO	SUCH PRO	POSALS.)		7. Unit Agreement	Name	7777
	ame of Operator			<del></del>				8. Farm or Lease	14ame	
	ron Oil & Ga	s Company					<del></del>	Moore 34 C	om.	
-	O. Box 2267,	Midland.	Texas 79702					9. Well No.		
	ocation of Well		10/100 / 5/102				<del></del>	10. Field and Poo	i, or Wildcat	<del></del>
	UNIT LETTERG	19	180 FEET PROM	THENO	rth	1980	) FEET FROM	Pitchfork	Ranch (Wl	fcp)
	THE East	LINE, SECTION	34,	COWNSHIP	245	RANGE34	E -			
17			~~~~	tion (Show whe		RT, GR, etc.)		12. County		111
$\overline{Z}$			7////	3401.6'			<del></del>	Lea	<u> </u>	7777
	NC		ppropriate Box rention to:	To Indica	te Natu			ner Data	6/18/87	
PERI	FORM REMEDIAL WORK		PLUG	HOGHABA DIN	RE-	AEDIAL WORK		ALTERI	NG CASING	
	PORARILY ASANDON		CHAN	IGE PLANS	<b>┌</b> ┤ .	AMENCE DRILLING OF	=	PLUG A	N3MNODHABA DN	ıτ [Δ]
				•	_	OTHER		·		_ 🗆
0	THER	<u> </u>	<del></del>							,
	Describe Proposed o		rations (Clearly sta	te all pertinen	details,	and give pertinent	dates, including	estimated date of s	tarting any pro	posed
1-2	28-88 - Set	: 35 sack r	oluq at 13.2°	10 to 12.	895 fe	et. ¥	*			
•	Set	: 25 sack p	olug at 12,3!	50'.						
			olug at 9350		oscin	a. co+ 25 c	nak nlua 6	624 +0 6440	foot	_
			olug from 521					624 to 6440		
	Set	: 35 sack p	olug 650 to !	550 feet					こっし	-
			olug at surfa		010			- 1 Car	ه مذیر	$^{\sim}$ $_{ m O}$
	Cut	, oii a wei	lded on dry-l	note matk	e: •		ţ	£22 , 0	3 521	9 23 0
	Casing R	Record Afte	er Plugging	•			ı	Fee Colo		
5	Size	Wt#/ft.	Put in W	ell (ft.)		Left in Wel	l (ft.)	<u>Hole size (</u>	<u>in.)</u>	
-	11-3/4"	47 & 42#	615			615		14-3/4"		
	8-5/8	32#	5233			5233		10-5/8"		
	5-1/2" 3-1/2" Liner	17#	13540 2161			7006 2161		7-7/8" 4-3/4"		
	5-1/2 Liner	10.30#	2101			2,01		. 5/ 1		
B. I	hereby certify that	he information a	bove is true and co	-		_				<del> · _ ·</del>
SNE	· Berting	reldon	) Betty Gild	on TITLE .	Regul	atory Analy	st	2/1	/88	
	RO	Ledle	9		IL &	GAS INSP	ECTOR		2 4'88	·
	VED BY							DATE		

STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT	
40. OF COPIES ACCEIVED OIL CONSERVATION DIVISION	••
DISTRIBUTION P. O. BOX 2088 SANTA FE	. Form C-103 Revised 10-1-78
SANTA FE, NEW MEXICO 87501	5a. Indicate Type of Lease
U.S.d.S.	State Fee X
OPERATOR	5. State Oil & Gas Lease No.
1111 2 5 1907 1911	
SUNDRY NOTICES AND REPORTS ON WELLS  THE THIS FORM FOR PROPOSALS TO BAILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR.  USE "APPLICATION FOR PERMIT -" (FORM: C-101) FOR SUCH PROPOSALS.)	
OIL GAB OTHER-	7. Unit Agreement Name
Name of Operator	8. Farm or Lease Name
Enron Oil & Gas Company	Moore 34 Com.
P. O. Box 2267, Midland, Texas 79702	1
i. Location of Well	10. Field and Pool, or Wildcat
UNIT LETTER G 1980 FEET FROM THE north LINE AND PEET FROM	Pitchfork Ranch (Wlfcp)
THE EAST LINE, SECTION 34 TOWNSHIP 24S RANGE NAMPH.	
15. Elevation (Show whether DF, RT, GR, etc.)	12, County
3401.6' GR	Lea
Check Appropriate Box To Indicate Nature of Notice, Report or Oth	ner Data
NOTICE OF INTENTION TO: SUBSEQUENT	REPORT OF:
PERFORM REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON COMMENCE DRILLING OPNS.  PULL OR ALTER CASING CHANGE PLANS CASING TEST AND CEMENT JOB	PLUG AND ABANDONMENT
OTHER	
OTHER	
17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including work) SEE RULE 1103.	estimated date of starting any proposed
Existing wolfcamp perfs 13,490 to 13,500 feet.	•
1. Circulate the hole with 9.8#/gal mud. Spot 35 sacks Cl H cmt from 1	3,210 to 12,900 feet.
2. Spot 25 sacks from 12,350 to 12,150 (top of wolfcamp 12,249).	•
3. Spot 2t sacks from 9350 to 9150 (top of Bone Spring)	
4. Cut and pull 5-1/2" casing; top of cement estimated at 7000 feet.	
5. Spot 35 sacks across cut.	
6. Spot 35 sacks across 8-5/8" casing shoe at 5260'.	10 mg 70 24
7. Spot 35 sacks from 650 to 550 feet.	5 NO MING CF 13 NG CA03
Q Snot 20 eacks at surface	OR THE C-103
9. Weld on dry-hole marker.	, Kills
8. I hereby certify that the information above is true and complete to the best of my knowledge and belief.	AC N
Betty Gildon Regulatory Analyst	6/18/87
DISTRICT 1 SUPERVISOR	JUN 2 3 1987
ONDITIONS OF APPROVAL IF ANY:	

@ 15364'

Submit to Appropriate District Office State Lease - 4 copies Fee Lease - 3 copies

## State of New Mexico Energy, Minerals and Natural Resources Department

Form C-102 Revised 1-1-89

#### **OIL CONSERVATION DIVISION**

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

DISTRICT I P.O. Box 1980, Hobbs, NM 88240

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

#### WELL LOCATION AND ACREAGE DEDICATION PLAT

All Distances must be from the outer boundaries of the section

Juit Letter Section 34 Township 24-S 34-E NMPM Lea  Actual Footage Location of Well:  1980 feet from the North line and 1980' feet from the East line	Operator Bru	ce A	. Wi	LY16	ank	s C	o.		Lease	Moor	e "3	84" c	OTIL.		well 140.
Seman Foctage Location of Well:  1980 feet from the North line and 1980' feet from the East line Front level Elev. Producing Formation Pool Land Service of the Control of	Unit Letter		n		,	ship							<del></del>	County	y
1.980 nest from the North line and 1.980.1 feet from the East increased and consisting formation and the state of the stat	<u> </u>	1					4-5	· · · · · · · · · · · · · · · · · · ·	<u> </u>	34-	<u></u>		NMI	PM	Lea
Problem   Producing Formation   Pool   Patech Forth Remeh   Wolfcamp   320   Acres	7			NT	<u>1</u>			line and	7 /	2001			Sant San		aat in
1. Cultims the acreage dedicated to the subject well by colored pentil or hardness marks on the jets before  2. If more than one lesse is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).  3. If more than one lesse of different ownership is dedicated to the well, have the interest of all owners been consolidated by communitization, multitations, frore-pooling, etc.?  Yes No. If neares is "yes" type of consolidation Communitization, unnitization, force-d-pooling, or otherwise)  This form if necessary.  No allowable will be assigned to the well until all interests have been consolidated (by communitization, unnitization, forced-pooling, or otherwise)  OPERATOR CERTIFICATION  I hareby certify that the information contained hybran for trays find planning and interest, has been approved by the Division.  OPERATOR CERTIFICATION  I hareby certify that the information contained hybran for trays find planning to the best of the plan was plated from field notes of the planning and that the same is true an correct to the best of my knowledge and builty.  Date Surveyor  Surveyor Certificate No.  Certificate No.  Certificate No.	Ground level Elev.		Pro	oducing	Form	ution		line and		<del>180.</del>	1001	10:4	tea in	m use r.	Dedicated Acreage:
1. Outline the acrosps dedicated to the subject well by colored pencil or hashness 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 interest of all owners been consolidated by communitization, unitization, force-pooling, etc.?    Yes	339	6'	Wo1	fcar	np				]	Pite	hfor	h Ra	ach W	olfca	mp 320 Acres
3. If more than one lease of different ownership is dedicated to the well, have the interest of all owners been consolidated by communitization, unitization, force-pooling, ed.?  Yes   No   If sunder is "yos" type of consolidation   Community   1-2-at-1011   It sunder is "yos" its the owners and truct descriptions which have solutally been consolidated. (Dis inverse lide of 2-at-1011   It is not in 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 until, eliminating such interest, has been approved by the Division.  OPERATOR CERTIFICATION   I have by carrify that this information of the provided of the same in true an output of the provided of the same is true an output of the best of my browledge on builty   Signature   Surveyor   Date    Surveyor Certificate No.	1. Outlin	ne the acr	eage de	dicated t	to the	subject	well	by colored per	cil or h	schure r	narks on	the plat be	low.		
unitization, force-pooling, etc.?  Yes No Hanswer is "yos" the two women and tract descriptions which have scatally been consolidated. (Use reverse file of Lection.  It suffers is "yos" list the owners and tract descriptions which have scatally been consolidated. (Use reverse file of Lection.  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 interest, has been approved by the Division.  OPERATOR CERTIFICATION  I hereby certify that the information of the production of the	2. If mo	re than or	e lease	is dedic	ated to	o the w	reli, ou	uline each and	identify	the ow	nership d	nereof (bo	th as to wo	rking intere	est and royalty).
If another is "no" list the owners and tract descriptions which have schally been consolidated. (Use "Wester is large" 2 of 1 of		ation, for		ing, etc.?	<b>?</b>		_					f all owne	rs been con	solidated b	y communitization,
this form if necessary.  No allowable will be assigned to the well until all interests have been consolidated (by communitization, interest, carrier and interest, has been approved by the Division.  OPERATOR CERTIFICATION  I haveby carrify that the information contained threin for true, for all promptes to the best of for fundation of true, for all promptes to the best of for fundation of true, for the position  Bruce A. Willbanks (Company  Morrie 34 Com. "I  SURVEYOR CERTIFICATION  I haveby carrify that the well location show on this plat was plotted from field notes of actual surveys made by me or under memory or the plat was plotted from field notes of actual surveys made by me or under memory or the plat was plotted from field notes of actual surveys made by me or under memory or the plat was plotted from field notes of actual surveys made by me or under memory or the plat was plotted from field notes of actual surveys made by me or under memory or the plat was plotted from field notes of actual surveys made by me or under memory or the plat was plotted from field notes of actual surveys made by me or under memory or the plat was plotted from field notes of actual surveys made by me or under memory or the plat was plotted from field notes of actual surveys made by me or under memory or the plat was plotted from field notes of actual surveys made by me or under memory or the plat was plotted from field notes of actual surveys made by me or under memory or the plat was plotted from field notes of actual surveys made by me or under memory or the plat was plotted from field notes of actual surveys made by me or under memory or the plat was plotted from field notes of actual surveys medically memory or the plat was plotted from field notes of actual surveys medically memory or the plat was plotted from field notes of actual surveys medically memory or the plat was plotted from field notes of actual surveys medically memory or the plat was plotted from field notes of actual surveys memory or the plat was plotted	If another	Yes	list the		No and te	] set desi	f ansv	ver is "yes" ty; ne which have	e of cor actually	nsolidati / been c	oneolidate	A GO	muni	tizat	ion
OPERATOR CERTIFICATION  I hereby cerify that the information  contained herein for true and compilete to the best of my proposition on this plat was plotted from field notes on the plat was plotted from field notes on this plat was plotted from field notes on the plat was plated from field notes on the plat was plated from field notes on the plated from field notes on th	this form	n if necce	ssary.												
I hereby certify that the information contained free made of grayed and compilete to the best of projecting and best of the best of projecting and best of the best of projecting and best of the best												munitizati	on, unitizal	tion, forced	-pooling, or otherwise)
I hereby certify that the information contained free made of grayed and compilete to the best of projecting and best of the best of projecting and best of the best of projecting and best of the best			-											OPI	ERATOR CERTIFICATION
Signature  William L. Cellins  Printed Name  Anthorizon Agrul.  Position  Bruce A. Willbanks ( Company  Moore '34' Con. "11  SURVEYOR CERTIFICATION  I hereby certify that the well location show on this plat was plotted from field notes of actual survey made by me or under me supervision, and that the same is true an correct to the best of my knowledge and belief.  Date Surveyed  Signature & Seal of Professional Surveyor  Certificate No.								1						[ ]	hereby certify that the information d. Herein in true and complete to the
Position Bruce A. Willbanks (Company   Moore '34' Com. **1  SURVEYOR CERTIFICATION  I hereby certify that the well location show on this plat was plotted from field notes of actual surveys made by me or under m supervison, and that the same is true and correct to the best of my knowledge and belief.  Date Surveyed  Signature & Seal of Professional Surveyor  Certificate No.											i I				1/2. X All/1/-
Position Bruce A. Willbanks (Company    More 34 Com. **I  SURVEYOR CERTIFICATION  I hereby certify that the well location show on this plat was plotted from field notes of actual surveys made by me or under my supervison, and that the same is true an correct to the best of my knowledge and belief.  Date Surveyed  Signature & Seal of Professional Surveyor  Certificate No.							ł	Š	900				and the state of t		fame
Company    Listing Way boose   Maorie 34 Con. #1    SURVEYOR CERTIFICATION    I hereby certify that the well location show on this plat was plotted from field notes of actual surveys made by me or under mapervison, and that the same is true and correct to the best of my knowledge and belief.  Date Surveyed    Signature & Seal of Professional Surveyor    Certificate No.											 	— — —		Position	
Eiching West book Moore '34' Cont. "I  SURVEYOR CERTIFICATION  I hereby certify that the well location show on this plat was plotted from field notes of actual surveys made by me or under m supervison, and that the same is true and correct to the best of my knowledge ambelief.  Date Surveyed  Signature & Seal of Professional Surveyor  Certificate No.			1					Ì	r		_ /9	80'-		Company	!
SURVEYOR CERTIFICATION  I hereby certify that the well location show on this plat was plotted from field notes of actual surveys made by me or under on supervison, and that the same is true an correct to the best of my knowledge an belief.  Date Surveyed  Signature & Seal of Professional Surveyor  Certificate No.			1					Existing Moore '34	g Welle Con.	boer WI			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Date '	
on this plat was plotted from field notes of actual surveys made by me or under me supervison, and that the same is true and correct to the best of my knowledge and belief.  Date Surveyed  Signature & Seal of Professional Surveyor  Certificate No.		·						<del></del>			 			SUF	RVEYOR CERTIFICATION
supervison, and that the same is true and correct to the best of my knowledge and belief.  Date Surveyed  Signature & Seal of Professional Surveyor  Certificate No.														on this	plat was plotted from field notes of
Date Surveyed  Signature & Seal of Professional Surveyor  Certificate No.			1				Contament.							superviso correct	on, and that the same is true and
Professional Surveyor  Certificate No.			]											1 -	rveyed
Certificate No.			-¦ 							<del></del> -	<del> </del>			Signatur Profession	e & Seal of
			1												•
0 330 660 990 1320 1650 1980 2310 2640 2000 1500 1000 500 0			<u> </u>						an pagagan yang b	A COUNTY OF				Certifica	te No.
	0 330 660	990 1	320	1650	1980	2310	2640	200	0	1500	1000	500	0		

#### DISTRIBUTION NEW MEXICO OIL CONSERVATION COMMISSION Form C-104 SANTA FE REQUEST FOR ALLOWABLE Supersedes Old C-104 and FILE Effective 1-1-65 AND U.S.G.S. AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS LAND OFFICE TRANSPORTER **OPERATOR** PRORATION OFFICE Operator Enron Oil & Gas Company Address P. O. Box 2267, Midland, Texas 79702 Reason(s) for Isling (Check proper box) Other (Please explain) MAN As love late Change in Transporter of: Recompletion Dry Gas Change Operator Name Change in Ownership X Condensate Casinghead Gas If change of ownership give name HNG OIL COMPANY, P. O. Box 2267, Midland, Texas 79702 and address of previous owner II. DESCRIPTION OF WELL AND LEASE ell No. Pool Name, Including Formation Moore 34 Com. Pitchfork Ranch Wolfcamp State, Federal or Fee Fee Location 1980 Unit Letter G 1980 Feet From The <u>north</u> Line and east Feet From The Line of Section Township 24S Range 34E , NMPM, III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oll Address (Give address to which approved copy of this form is to be sent) Enron Oil Trading & Transp., Inc. P. O. Box 20108, Shreveport, LA 71120 Address (Give address to which approved copy of this form is to be sent) or Dry Gas P. O. Box 2521, Houston, Texas 77001 Is gas actually connected? When Transwestern Pipeline Company Sec. Twp. P.ge. If well produces oil or liquids, give location of tanks. 34 34 12/20/84 Yes If this production is commingled with that from any other lease or pool, give commingling order number: IV. COMPLETION DATA Oil Well Gas Well New Well Workover Same Resty, Diff. Res Deepen Plug Back Designate Type of Completion - (X) Total Depth Date Spudded Date Compl. Ready to Prod. P.B.T.D. Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation Top Oil/Gas Pay Tubing Depth Depth Casing Shoe Perforations TUBING, CASING, AND CEMENTING RECORD HOLE SIZE CASING & TUBING SIZE SACKS CEMENT DEPTH SET (Test must be after recovery of total volume of load oil and must be equal to or exceed top allow able for this depth or be for full 24 hours) V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL Date First New Oil Run To Tanks Date of Test Producing Method (Flow, pump, gas lift, etc.) Tubing Pressure Casing Pressure Choke Size Length of Test Oil-Bbls. Water - Bbls. Gas - MCF Actual Prod. During Test GAS WELL Actual Prod. Test-MCF/D Length of Test Bbis. Condensate/MMCF Gravity of Condensate Casing Pressure (Shut-in) Testing Method (pitot, back pr.) Tubing Pressure (Shut-in) Choke Size **M**AR 2 4 198 APPROVED 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.

#### VI. CERTIFICATE OF COMPLIANCE

(Signature) Betty Gildon,

Regulatory Analyst

(Title) (Date)

CONSERVATION COMMISSION

Lease N

County

DISTRICT 1 SUPERVISOR TITKE

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a nawly drilled or despenwell, 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 silowable on new and recompleted wells.

Fill out only Sections I. II. III, and VI for changes of owner all name or number, or transporter, or other such change of condition

Separate Forms C-104 must be filed for each pool in multipl

Separate Forms C-104 must be filed for each pool in multiple completed wells.

(Date)

Chore Size

LHGY AND MIDH HALS DEPARTME		RVATION DIVISION	form C-104 Revised 10-1-70
CHET MIGHTION  SANTAFE  FILE		O. DOX 2088 NEW MEXICO 87501	
LAND OFFICE TRANSPORTER DIL	REQUES	T FOR ALLOWABLE	
OPENATOR  PAONATION OFFICE  Operator	AUTHORIZATION TO T	AND RANSPORT OIL AND NATURAL GAS	
HNG OIL COMPANY			
P. O. Box 2267, Mi	dland, Texas 79702		~
Reason(s) for liling (Check prop.	Change in Transporter of:	Other (Please explain)	
Recompletion	· · · · · · · · · · · · · · · · · · ·	Dry Gos For Your infor	mation.
Change in Ownership	Castnghead Gas	Condensate	
If change of ownership give na and address of previous owner		1	1811 Yr., og 184
DESCRIPTION OF WELL A	AND LEASE	R 7763	The second second second
Lease Name	Well No. Pool Name, Inclu	ding Formation Wildcat Kind of Lea	Leose
Moore 34 Com.	1 Pitchfork	Ranch Wolfcamp Stote, Fede	ral or Fee Fee
C	1980 Say From The porth	Line and1980Feet From	n The east
Unit Letter G	TOO FEEL FROM THE HOTELI	Line andPeet From	n The Cast
Line of Section 34	Township 24S Rang	е 34E , NMPM, Le	a Cou
DESIGNATION OF TRANSI	PORTER OF OIL AND NATURA of Oil [X] or Condensate []		oved copy of this form is to be sent)
The Permian Corpor			
Name of Authorized Transporter of	of Casinghead Gas X or Dry Gas	Address (Give address to which appr	xas 77001 oved copy of this form is so be sent)
Trnaswestern Pipel	ine Company Unit   Sec.   Twp.   Ro	Box 2521, Houston, Te	
If well produces oil or liquids, give location of tanks.	G 34 24S	34F Yes	12/20/84
If this production is commingle COMPLETION DATA	d with that from any other lease or	pool, give commingling order number:	
Designate Type of Comp	letion - (X)	ell New Well Workover Deepen	Plug Back   Same Res'v. Diff. F
()ate Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
Lievations (DF, RKB, RT, GR, et	te.j Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
Perforations			Depth Casing Shoe
		AND CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
THE THE TAX A STEEL A STEEL THE TAX A STEEL TH	T FOR ALLOWARIE		
TEST DATA AND REQUEST OIL WELL		be after recovery of total volume of load of size depth or be for full 24 hours)	i and must be equal to or exceed top t
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas l	ift, etc.)
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bhis.	Water - Bbis.	Gas-MCF
GAS WELL Actual Frod, Tool-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
		- Total deliveries and miles of	C. C. Condensate

Tubing Presewe (Shut-in)

Betty Gildon

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)

(Title)

(Dole)

Regulatory Analys

January 16, 1985

Testing Method (pitot, back pr.)

A. CERTIFICATE OF COMPLIANCE

OIL CONSERVATION DIVISION

APPROVEC ĐΥ

Cosing Pressure (Shut-in)

DISTRICT 1 SUPERVISOR

This form is to be filed in compliance with MULE 1104.

If this is a request for allowable for a newly drilled or deepens well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with MULK 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells,

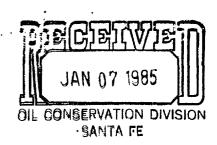
Fill out only Sections 1, II, III, and VI for changes of owner well name or number, or transporter, or other such change of condition Separate Forms C-104 must be filed for each pool in multiple completed wells.

ENERGY AND MINERALS DEPARTMENT	OIL CONSERV	ATION DIVISION	
DISTRIBUTION	P. O. Bo		form C-103
SANTA FE		W MEXICO_87501	Revised 10-1
FILE	5,112	W WEXICO 8/301	Sa. Indicate Type of Lease
U.S.G.S.		<b>-</b> 1. 2	
LAND OFFICE		of a continuous space of a same	State Fee X
OPERATOR			5. State Oil & Gus Lease No.
	· <del></del>		· · · · · · · · · · · · · · · · · · ·
SUNDRY N	OTICES AND REPORTS OF	N WELLS	
USE "APPLICATION I	FERMIT -" IFORM C-1011 FOR 3	UCH PROPOSALS.)	
OIL GT GAS	•	C. I. C	7; Unit Agreement Name
were X were L	OTHER-	·	
Name of Operator			8. Form or Lease Name
HNG OIL COMPANY	· · · · · · · · · · · · · · · · · · ·	•	Moore 34 Com.
Address of Operator	T 70702		9. Well No.
P. 0. Box 2267, Midland,	lexas /9/02	<u> </u>	1
Location of Well	•		10. Field and Pool, or Wildcat
UNIT LETTER G 198	80 FEET FROM THE north	1980	Pitchfork Ranch /Wlfc
THE east LINE, SECTION_	34 TOWNSHIP 24	S 34E	NMAN ANNINININININININININININININININININ
	15. Elevation (Show wheth	er DF, RT, GR, etc.)	12. County
	3401.6' GR		Lea
6. Check App	propriate Box To Indicate	Nature of Notice Repo	or Other Data
NOTICE OF INTE		· .	SEQUENT REPORT OF:
			72452.11 N.C. 511. 51.
SERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING
EMPORARILY ABANDON		COMMENCE DRILLING OPHS.	$\overline{}$
PULL OR ALTER CASING	CHANGE PLANS	CASING TEST AND CEMENT JO	PLUE AND ABANDONMENT
			ION TO TUBING SIZE REPORTED
A-45.			COMPLETION FORM C-105
7. Describe Proposed or Completed Operat	ions (Clearly state all pertinent d	etails, and give pertinent dates	, including estimated date of starting any propo
work) SEE RULE 1103.	<b>2</b>		<u>,                                    </u>
milder got at 12 210 fact	should be 2-7/8".		
Tubing set at 13,210 feet	should be 2-1/6.		The second secon
	. •	· .	
	•	•	
	• •		
•		,	
•			
	•	•	
			·
			•
. I hereby certify that the information abo	ve is true and complete to the bes	t of my knowledge and belief.	
<b>(</b> ).			
Karra Dian-	Betty Gildon	Regulatory Analyst	1/16/85
ene Wetter Aldon	Detry Gilden Tires		DATE
7)			100.00
1/101.11.1		NSTRICT 1 SUPERVISOR	<b>JAN 1 8 198</b>
PROVED BY	TITLE_	ADIRICI I SUITE	DATE

#### NEW MEXICO OIL CONSERVATION DIVISION

#### P. O. BOX 1980

#### HOBBS, NEW MEXICO 86240



This is to notify the (	Oil Conservation Division that connection for the purchase
of gas from the HNG Oil Co.	Operator
Moore "34"	#1 Well Unit
34-24S-34E <b>S.</b> T.R.	Pitchfork Ranch (Wolfcamp)
Transwestern Name of purchaser	was made onDecember 20. 1984
	Transwestern Pipeline Company Company
	Representative Rodney C. Burke
	. Ti+1a

cc: Operator

New Mexico Oil Conservation Commission Oil & Gas Conservation Division P. O. Box 2088
Santa Fe, NM 87501

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DISTRIBUTION		_	•							·		
SANTA FE			NEW	AFXICO	OIL CON	ISERVATIO	א כמ	DMMISSION		5a. Ind	Icate T	'yre of Lease
FILE		WELL				DMPLETIC				Sta	te 📋	Fee X
U.S.G.S.		""	. COMI LL	. 11014 0	// //LC	JIMI	11 1	LI OK I F	110 200	5. State	e Oil &	Gus Lease No.
LAND OFFICE	<del></del>	1				<u> </u>	~	محالسه لسم	ساری رسید اساسان اس	┨ ``		
OPERATOR		-				180	3.1	rtigita	17/7=-	1119	7777	THITTITI
OFERATOR		_}				157				MIII	////	
<del></del>			<del> </del>				<u> </u>			(7777)	7777	
la. TYPE OF WELL						[1]	UO	77-1 is	lâa li	7. Unit	Agree:	ment Rame
	0	<u>ኒ. [X]</u>	GAS Well		DRY 🔲	OTHER_			16 7			
b. TYPE OF COMPLE			WELL		UM 1		33.00	The same of the sa	ن سيدسه،	8. Farr	n or Le	use Name
NEW V WO			PLUG		IFF	OIL C	NAS	EFIVA (1)	Y WIVISH	UN Mo	ore	34 Com.
2. Name of Operator	R L DEE	PEN	BACK	L  R1	ESVR.	OTHER		SANTA F	<u> </u>	9. Well		
	B 6.11/		_			4				3. "612		
HNG OIL COMP/	ANY									ž.		
3. Address of Operator										10. Fie	eld and	Pool, or Wildcat
P. O. Box 226	57. Midlar	id, Te	xas 797	02					. *	Pitch	afork	Ranch Wolfcam
4. Location of Well								<del></del>		17777	7XX7	7/18/18/8/8/8/
						•		• • •		VIX	<i>\$</i> ₹\$\$	XXXXXXXXXX///
C		1000			north		1	1980			////	
UNIT LETTER	LOCATED	1900	FEET F	ROM THE _	1101 61	LINE AND			FEET FROM		////	
							11	11111	77777	7 12. 00	unty	-4444444444444444444444444444444444444
THE east LINE OF	34		245	E. 34E			///	///////	//////	N 1	.ea	
15. Date Spudded	16 Date T.D.	Heacher	d 17 Date	Compl. (h	NMPM	Prod 1 12	Flour	ulong (III)	DEO DT			Con Continuit and
	3								NND, N1,	UM, etc.)		
2-13-84	4-17-		9	<del></del>				1.6' GR			<u> </u>	3401.6'
20. Total Depth	i		T.D.	22.	If Multipl Many	e Compl., Ho	w ·	23. Interve Drilled		ry Tools	ŕ	Cable Tools
15,376'		14,	365'		1414117			Diffied		Χ	l f	· •
24. Producing Interval(	s), of this comp	letion -	Top, Botton	, Name				<u> </u>	·		25.	. Was Directional Survey
	-											Made
10 400 10 4	500 /Nolf										ĺN	lo.
13,490 - 13,5 26. Type Electric and C	OTTOW) DUC	camp)			<del></del>				_			lo
								•			27. Was	Well Coted
Comp. Neutro	n-Formatio	on Den	ısity, D	ual In	ductio	on SFL						No
28.			CAS	ING REC	ORD (Rep	ort all string:	s set	in well)				*
CASING SIZE	WEIGHT L	B./ET	DEPTH		1	E SIZE			NTING RE	COBO		AMOUNT PULLED
11-3/4"	47# & 4				<del></del>		25/					
•		+211		51	<del> </del>	3/4"		O HLC &				Circulated
8-5/8"	32#		523	<u>3'                                      </u>	10-	5/8"	12	50 HLW 8	8 8 bb1	slurr	'y C1	ass C
	1							thre	ough 1-	-inch		Circulated
5-1/2"	17#		1354	0'	7-	7/8"	760	O TLW &				-
29.		LINER	RECORD		<u> </u>	7_0	•	30.			DECO	<u> </u>
		<del></del>		T	i	<del></del>			<del></del>	TUBING		
SIZE	TOP		ОТТОМ	SACKS		SCREEN		SIZE		EPTH SE	Т	PACKER SET
3-1/2"	13209	1 15	370	250	CIH	<b>-</b> .		1-1/2"	13,	209'	ŀ	13,209'
				1								
31. Perforation Record	(Interval, size o	nd numb	er)	<del></del>		32.	ACII	D SHOT E	PACTURE	CENEN	T SOLIS	EZE, ETC.
	,		•		•							
10 107 10	222 (12	2411)				DEPTH						MATERIAL USED
15,167 - 15,	222 (12,	. 34")				<u>15167</u>	<u>- !</u>	5248				+ 35' cmt on to
15,228 - 15,						13490	- 1;	3500	2500 g	jals 7-	-1/2%	6 MS acid
13,490 - 13,	500 (20,	.35")										
-	•										<del></del>	
33,					PROD	UCTION			<u> </u>			
Date First Production	I Den		test ed (l'In			ing - Size an		<del></del> -		T		
9-17-84	1.0			ting, gas	eeje, panap	ing - Size an	a typ	e pumpj	*.	Well	status ( C	(Prod. or Shut-in) Shut-in
9-17-04		<u>г</u> г	lowing									Siuc- III
Date of Test	Hours Tested	C	hoke Size	Fred'n.		Oil — Bbl.		Gas - MCF	Wa	ter – Bbl.	. 7	Gas - Oil Ratio
9-18-84	24		14/64"	Test I	eriod	168		462	1	0		2,750
Flow Tubing Press.	Casing Press	ure C	alculated 24	- Cil - I	<u>-</u> !	Gas - N	JCF	<u> </u>	iter – Bbl.			ravity - API (Corr.)
1300	sealed		our Hate	1		1		1	– 65			•
	I			•					· · · · · · · · · · · · · · · · · · ·		L	1.0
34. Disposition of Gas	(Sola, used for )	luct, veni	led, etc.)						Te	st Witness	sed By	
Vented							_		-			
35. List of Attachments									<del></del>	<del></del>		
Logs, C-104	•							•				
36. I hereby certify that	the information	shows:	on buth side	s of this i	arm is ter	e and some	10.00	the burt of		dan m. 11	uli nZ	
	()		with attl.	,		c one compte	i t- 10)	iac ocst of	my snowle	age ana o	ench	
$\mathcal{G}_{i}$	Xiva	5									0.10	nn /0/l
SIGNED 130±tto	Helkon	<u>Beltt</u>	ty Gildo	n 📆	TLE Re	gulatory	An	alvst		DATE .	9/7	20/84
	<del></del>			1		<u></u>				DAIE.		

This form is to be filed with the appropriate District Office of the Commission not later than 26 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 shart also be reported. For multiple completions, Items 30 through 34 shall be reported for each zone. The form is to be filed in quintuplicate except on state land, where six copies are required. See Hule 1105.

		South	heastern New Mexico		Northwestern New Mexico					
T. Anhy	•		Cherry T. Canyon	6360	T. Oin A	lamo		T.	Penn. "B"	
-			T. Strawn	13690					Penn. "C"	
			T. Atoka						Penn. "D"	
T. Yate	s	·	T. Leonard			Cliff House				
T. 7 Riv	ers		T. Devonian		T. Menef	ee		т.	Madison	
T. Quee	n		T. Silurian		T. Point	Lookout .		т.	Elbert	<u>.                                    </u>
T. Grayl	burg		T. Montoya		T. Mane c	os		T.	McCracken	
T. San A	Andres		T. Simpson	14205	T. Gallu	p	<del></del>	т.	Ignacio Qtzte	
T. Glori	eta	<del> </del>	Morrow Lime						Granite	
T. Padd	lock	<del></del>	Morrow Clas	le 15077						
			TMorrow Sha							
			T. Granite	ESCO						
			T. Delaware Sar							
T. Abo.		12249	T. Bone Springs	and 10358	T. Winga	te		Т.		
T. Wolfe	ion Mrk		$\frac{1.30 \text{ B.S. Sa}}{3}$		T. Chinle	e		т.		
					T. Permi	an	<del></del>	T.		
T Cisco	(Bough C	·) ———	Tonerry our					1.		
No. i, froi	m Morro	w .151	67 to 15222	OIL OR GAS	No. 4, fro	w Vol	fcamp	13490	<sub>ьь</sub> 13500	. d4+++a++++
lo. 2. fror	mMorre	152	28 to 15234		No. 5, fro	m			to	
	1414 1 4.4.4	เพ. เจ.	4X 13670							
	Morro		toto	IMPORTAN	F WATER		************************************	·	to	
nclude da Vo. 1, fror	ata on rate	of water	•	IMPORTAN	WATER	SANDS	fcct.	***************************************		*******
nclude da Vo. 1, fror Vo. 2, fror	ata on rate	of water	inflow and elevation to	IMPORTAN	WATER	SANDS	fcet.	••••••		*********
nclude da No. 1, fror No. 2, fror No. 3, fror	ata on rate	of water	inflow and elevation to	IMPORTAN	I WATER	SANDS	feet. feet.	************		••••••••••••••••••••••••••••••••
include da No. 1, fron No. 2, fron No. 3, fron	ata on rate	of water	inflow and elevation to	IMPORTANT	MATER in hole.	SANDS	fcet. fcet. fcet.	••••••••		••••••••••••••••••••••••••••••••
nclude da Vo. 1, fror Vo. 2, fror Vo. 3, fror	ata on rate	of water	inflow and elevation to	IMPORTAN	MATER in hole.	SANDS	fcet. fcet. fcet.	••••••••		••••••••••••••••••••••••••••••••
nclude da Vo. 1, fror Vo. 2, fror Vo. 3, fror	ata on rate	of water	inflow and elevation to	IMPORTANT which water rose	MATER in hole.	SANDS	fcet. fcet. fcet.	••••••••		••••••••••••••••••••••••••••••••
nclude da No. 1, fror No. 2, fror No. 3, fror No. 4, fror	n No	of water One Thickness in Feet	inflow and elevation to  to  to  to  FORMATION F	IMPORTANT which water rose	MATER in hole.	SANDS	feetfeet. necessar	y)	Formation	••••••••••••••••••••••••••••••••
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nclude da No. 1, fror No. 2, fror No. 3, fror No. 4, fror  From  0 2633 3806 4950	To 2633 3806 4950 5260	Thickness in Feet 2633 1173 1144 310 303 882	formation to	IMPORTANT which water rose  D	odditional From 13782 13920 14092 14150 14850 14933	sheets if 13920 14092 14150 14850 14933 15051	feetfeetfeetfeet. Thickness in Feet 138 172 58 700 83 118	Lime, Lime, Lime, Lime, Chert	Formation Chert, Shale Shale Shale	
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• ,	INCL (One Copy M	INATION I	REPORT	:	(Oil completions on
ELD NAME Pitchfor	rk Ranch (Wolfcamp)	1 -	Moore 34 Com.		å. hell Number
PERATOR	COMPANY				9. inentification Number (Cas completions of
2255	<del></del>			•	- Fee
P. O. B	ox 2267, Midland,	Texas 79702	· · · · · · · · · · · · · · · · · · ·		10. Cousty
	tter G, 1980' FNL,	1980' FEL, Sec.	34, T24S, R34E		Lea, NM
•	•	RECORD O	F INCLINATION	Υ	
Measured Depth (feet)	12. Course Length (Flundreds of feet)	13. Angle of Inclination (Degrees)	14. Displacement per Hundred Feet (Sine of Angle \$100)	15. Course Displacement (feet)	15. Accumulative . Displacement (feet)
754	754	1 3/4	1.13	9.88	9.88
1075	321	3/4	1.31	1 4.21	14.09
1555	1. 480		1 1.75	8.40	22.49
2048	493	1 1	1.75	8.63	31.12.
<del>-</del> 2664 .	1 616	3/4	1.31	8.07	39.19
3152	l <i>-</i> 488	1 1	1.75	8.54	47.73
3586	434	1	1.75	7.60	55.33
3894	308	1 1-1/2	2.62	8.07	63.40
4511	1 617	1 2	1 3.49	21.53	84.93
5392	881	1 5	8.72	76.82	1 161.75
5517	1 125	4-1/2	7.85	1 9.81	1 171.56
5828	311	1 4-1/2	7.85	1 24.41	1 195.97
6142 ·	314	1 4-3/4	1 8.28	26.00	1 221.97
6362	1 220	4-1/2	. 1 7.85	1 17.27	239.24
6610	248	1 4	1 6.98	17.31	1 256.55
• 6857	1 247	1 4-3/4	8.28	1 20.45	277.00
Is any inform Accumulative Inclination m Distance from	space is needed, use the ation shown on the rever a total displacement of w easurements were made a surface location of wel ance to lease line as pro-	se side of this form?  cell bore at total depti  for Tubing  It to the nearest lease	cof: 557.94  Casing	feet =15,344	Drill Pipe 660 feet
			m the vertical in any man		
			ten explanation of the cir-		
(II The sursale	to the spoke dreamon !	,	ten tapinitedii di tire eti		• • • • • • • • • • • • • • • • • • • •
ELINATION DA	ATA CERTIFICATION		OFERATOR CERTI	FICATION	
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11.	. 21	•		Ve	
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שמוה כן אוואם	azed Representative		Signature of Authori	zec Representative	
Administ	rative Manager		_	n, Regulatory Ana	lyst
se of Person at	ne This/ (type or print)		Name of Person and	Title (type or print)	
PARKER I	DRILLING COMPANY		HNG OIL COMP	'ANY	
rphene:				915 686-37	14
	Case		Telephone:		<del></del>
•	•	CL.	ecribed and Carry	.5	
		of No	scribed and Sworn B september,  one B. Whatle	1984	ONY B. WHITLEY Into Public, State of Tours Information Explore June 27, 1998
	4			-	

TONY B. WHITLEY

RECORD OF INCLINATION (Continued from the

et)	12. Course Length (Humareds of Isel)	*13. Antie of locations)	14. Displacement per Humored Feet (Sinc of Angle X100)	15. Course Displacement (1ext)	IL Accommanded
980	1 123	1 4-3/.4	8.28	1 10.18	287.18
198	1 218	1 4-3/4	8.28	18.05	305.23
379	1 181	1 4-3/4	1 8.28	1 14.99	. 1 320.22
705	1 326	_1_5	8.72	1 28.42	1 348.64
921	216	1 4-1/2	7.85	1 16.96	1 365.60
3417	1 496	1 3-1/2	6.10	1 30.26	1 395.86
628	1 211	1 3-1/4	5.67	1 11.96	407.82
070	1 442	1 1-3/4	3.05	1 13.48	i 421.30
614	1 544 ~	1 1-1/4	2.18	11.86	1 433.16
605	1 991	1	1.75	1 17.34	1 450.50
110	505	1-1/4	1 2.18	1 11.01	1 461.51
735	1 625	1-1/2	1 2.62	1 16.38	477.89
2600	865	1-1/4	1 2.18	18.86	1 496.75
3540	1 940	1-1/4	1 2.18	1 20.49	1 517.24
295	l 755 ·		1 1.75	1 13.21	530.45
125	1 830	1-1/2	2.62	1 21.75	552.20
344	i 219	1-1/2	2.62	1 5.74	557.94
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:s:	<del></del>	<del></del>	· · · · · · · · · · · · · · · · · · ·		
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ision for each well drilled or deepened with rotary tools or when, as a result of any operation, the course of the well is d. No inclination survey is required on wells that are drilled and completed as dry holes that are plugged and abandone: ation surveys are required on re-entry of abandoned wells.) Inclination surveys must be made in accordance with the ons of Statewide Rule

port shall be filed in the District Office of the Commission for the district in which the well is drilled; by attaching one each appropriate completion for the well. (except Plugging Report)

maission was require the submittal of the original chans, graphs, or discs, resulting from the surveys.

es, se levite estates first Please ION IANTATE

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

# REQUEST FOR ALLOWABLE

OPERATOR PROBATION OFFICE	AUTHORIZATION TO TRANS	AND SPORT OIL AND NATURAL (	GAS
HNG OIL COMPANY			
P. O. Box 2267, Midland	, Texas 79702		
Reason(s) for filing (Check proper box	,	Other (Plegis expla	in) _
New Well	Change in Transporter ol:	FLARED AF	GAS MUST NOT THE
Recompletion	OII Dry C	HI UNLESS AN	EXCEPTION TO R-4070
Change in Ownership	Casinghead Gas Conde	IS OBTAINE	)
If change of ownership give name and address of previous owner	2	· · · · · · · · · · · · · · · · · · ·	
DESCRIPTION OF WELL AND		deat	
Moore 34 Com.	Well No.   Pool Name, Including I	D	of Lease Lease
Location	1 TECHFOIK	Nation-Wolfcamp State	Federal or Fee Fee -
Unit Letter G : 19	980 Feet From The north Li	ine and 1980 Fee	From The <u>east</u>
Line of Section 34 Tov	waship 245 Range	34E , NMPM,	Lea Coun
	TER OF OIL AND NATURAL GA	AS	-
Name of Authorized Transporter of Ott	- <del>-</del>	)	h approved copy of this form is to be sent)
The Permian Corporation		P. O. Box 1183, Ho	uston, lexas //001 happroved copy of this form is to be sent)
Transwestern Pipeline C		P. O. Box 2521, Ho	
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. G 34 24S 34E	Is gas actually connected?	When
If this production is commingled with COMPLETION DATA	th that from any other lease or pool,		
Designate Type of Completion	on – (X) X	New Well Workover Dee	
Date Spudded 2-13-84	Date Compl. Ready to Prod. 9-17-84	Total Depth	P.B.T.D.
Elevations (DF, RKB, RT, GR, etc.)	name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
3401.6' GR	Wolfcamp	13,490'	1-1/2" at 13,209'
Perforations 13,490' to 13,500'			Depth Casing Shoe 13,540'
	T	D CEMENTING RECORD	
14-3/4"	CASING & TUBING SIZE	615	250 HLC & 165 C1 C
10-5/8"	8-5/8"		350 HLW & 8 bb1 C1 C thru 1"
7-7/8"	5-1/2"	13540	760 TLW & 450 C1 H
4-3/4"	3-1/2" Liner	15370 TOL: 13209	250 C1 H
TEST DATA AND REQUEST FO	able for this de	epth or be for full 24 hours)	pad oil and must be equal to or exceed top all
Date First New Oil Run To Tanks 9-17-84	9-18-84	Producing Method (Flow, pump,	, gas lift, etc.)
Length of Test	Tubing Pressure	Flowing Casing Pressure	Choze Size
24 hours	1300	Sealed	14/64"
Actual Prod. During Test	он-выв.	Water - Bbls.	Gdi - MCF 462
L		ЛУ	1 402
GAS WELL	¥	···	
Actual Frod. 7 • • 1 • MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Teeting brethod (pirot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (Shut-in)	Choke Size
CERTIFICATE OF COMPLIANC	E .	OIL CONSE	RVATION DIVISION
I hereby certify that the rules and re	egulations of the Oll Conservation	APPROVED SEP	2 7 1984
Division have been complied with	and that the information given	- Gerra Las	る ·
above is true and complete to the	best of my knowledge and bellef,	TITLE DISTRICT I SE	IDERVISOR
		TITLE DISTRICT 1 SC	N. BIT A 10-0-1
$\mathcal{D}$ $\mathcal{A}$	Betty Gildon	17	ed in compliance with BULE 1104.
Detty Allow		well, this form must be ac	r allowable for a newly drilled or deepen companied by a tabulation of the deviati
Regulatory Analyst		tests taken on the well in	accordance with NULE 111.  Irin must be filled out completely for allo
September 20, 1984		able on new and recompted	ted wells.  I. II, III, and VI for changes of own neporter, or other such change of conditions.
{Date	•/	Well name or number, or tra	melouser or other ench cheuffe of country

Separate Forms C-104 must be filed for each pool in multip

DISTRIBUTION  BANTA FE	OIL CONSERVATION P. O. BOX 2088 SANTA FE, NEW MEX			Form C-103 Revised 10-1-7
U.S.O.S. LAND OFFICE OPERATOR	•		State Oil &	ype of Lease Fee X Gus Lease No.
USE "APPLICATION FOR	TICES AND REPORTS ON WELL	S DIFFERENT RESERVOIR. ALS.1	7, Unit Agreer	ment Name
Name of Operator	IER-	·	8. Form or Le	· -
Address of Operator	70.700		Moore 34	Com.
. 0. Box 2267, Midland, Tex	as /9/02		10. Field and	Pool, or Wilders
UNIT LETTER G 1980	north	1980		Ranch Wolfcam
THEEASTLINE, SECTION	34 TOWNSHIPR	34E	мрм.	
	15. Elevation (Show whether DF, RT, 3401.6' GR	GR, etc.)	12. County Lea	
		NCE DRILLING OPNS.	PLU 	THEMMOONABLA CHA DI
OTHER	CHANGE PLANS CASING	PB to Wolfe	amp	[X
OTHER  Describe Proposed or Completed Operations  work) SEE RULE 1103.	CHANGE PLANS CASING	PB to Wolfe	amp	[X
OTHER  Describe Proposed or Completed Operations  work) SEE RULE 1903.  Morrow perforations -	CHANGE PLANS CASING	PB to Wolfci	amp  Iding estimated date  4 & 15,238-24	of starting any proposed (18, .32")
Describe Proposed or Completed Operations work) SEE RULE 1703.  Morrow perforations - Acidized with 4000 ga 1/2 BWPH.  8/7/84 - Set CIPB at	change plans casing oth oth case (Clearly state all pertinent details, and :	PB to Wolfca  PB to Wolfca  give pertinent dates, inclu  4") and 15,228-3  - 0-200 Mcf/day  op. Press tested	amp  ding estimated date  4 & 15,238-24  heading with  to 3000#.	of starting any proposed (18, .32")
Describe Proposed or Completed Operations work) SEE RULE 1703.  Morrow perforations - Acidized with 4000 ga 1/2 BWPH.  8/7/84 - Set CIPB at	Change Plans Casine oth  (Clearly state all pertinent details, and  15,167 to 15,222 (12, .3 1s. 7.5% MS acid. 5-19-84	PB to Wolfca  PB to Wolfca  give pertinent dates, inclu  4") and 15,228-3  - 0-200 Mcf/day  op. Press tested	amp  ding estimated date  4 & 15,238-24  heading with  to 3000#.	of starting any proposed (18, .32")
Describe Proposed or Completed Operations work) SEE RULE 1703.  Morrow perforations - Acidized with 4000 ga 1/2 BWPH.  8/7/84 - Set CIPB at	Change Plans Casine oth  (Clearly state all pertinent details, and  15,167 to 15,222 (12, .3 1s. 7.5% MS acid. 5-19-84	PB to Wolfca  PB to Wolfca  give pertinent dates, inclu  4") and 15,228-3  - 0-200 Mcf/day  op. Press tested	amp  4 & 15,238-24  heading with  to 3000#.  - 13,500'.	of starting any proposed (18, .32")
Describe Proposed or Completed Operations work) SEE RULE 1703.  Morrow perforations - Acidized with 4000 ga 1/2 BWPH.  8/7/84 - Set CIPB at	Change Plans Casine oth  (Clearly state all pertinent details, and  15,167 to 15,222 (12, .3 1s. 7.5% MS acid. 5-19-84	PB to Wolfc.  PB to Wolfc.  give pertinent dates, inclu  4") and 15,228-3  - 0-200 Mcf/day  op. Press tested hots/ft. 13,490	amp  4 & 15,238-24  heading with  to 3000#. ' - 13,500'.	of starting any proposed (18, .32")
Describe Proposed or Completed Operations work) SEE RULE 1903.  Morrow perforations - Acidized with 4000 ga 1/2 BWPH.  8/7/84 - Set CIPB at	Change Plans Casine oth  (Clearly state all pertinent details, and  15,167 to 15,222 (12, .3 1s. 7.5% MS acid. 5-19-84	PB to Wolfca  PB to Wolfca  give pertinent dates, inclu  4") and 15,228-3  - 0-200 Mcf/day  op. Press tested hots/ft. 13,490  RECEIVED	amp  4 & 15,238-24  heading with  to 3000#.  - 13,500'.	of starting any proposed (18, .32")

OIL'S GAS INSPECTOR

AUG 29 1984

STATE OF NEW ME								
ENERGY AND MINERALS DE		OIL CONS		TION DI	VICION			
ue, er turies acceives	<del> </del>	OIL CONS			VISION			Famm C-102 -
DISTRIBUTION	<del>  -   -  </del>		. О. ВО			•		Form C-103 - Revised 10-1-78
SANTA FE	<del>   </del>	SANTA FE	E, NEW	MEXICO	87501			
U.S.O.S.	<del>                                     </del>						5a. Indicate Ty	
LAND OFFICE	<del>   </del>			•			State	Fee X
OPERATOR	1-1-1						5, State Oil & C	ias Lease No.
<u> </u>			•			!		:,
(DO NOT USE THIS FOR	SUNDRY NOTICE	ILL OR TO DEEPEN	OR PLUG B	WELLS	RENT RESERVO	ia.		
OIL GAS WELL	OTHER-						7. Unit Agreeme	int Name
, Name of Operator							8. Farm or Leas	se Name
HNG OIL COMPANY				•		······································	Moore 34	Com
, Address of Operator	<del></del>				. ~ N/~~ .		9. Well No.	COM.
P. O. Box 2267,	Midland, Texas	79702						7
Location of Well		<del></del>		······································		<del></del>	10. Field and F	ool, or Wildcat
G	1980	•	north		1000		L	Ranch /Morrow/
UNIT LETTER		ET FROM THE	ווטו נוו	LINE AND	1980	_ FEET FROM	7777777	Ranch / NOTTOW/
east	3/1		246		245			
THE LI	NE, SECTION34	TOWNSHIP _		NANGE _	34E	—— НМРМ.		
mmmm	mmm	F1		DE PT CP		<del></del>		<del>14444444</del>
	//////////////////////////////////////	Elevation (Show		Dr, KI, GK, E			12. County	
<u> </u>	711111111	3401.6' 6	ıK				<u>Lea</u>	
	Check Appropriat E OF INTENTION				su <sub>B</sub>	SEQUENT	REPORT OF	3/20/84
PERFORM REMEDIAL WORK	•	PLUG AND ABAN	100H	REMEDIAL WO	ORK		ALTE	RING CASING
TEMPORARILY ABANDON				COMMENCE DE	RILLING OPHS.		PLUG	AND ABANDONMENT
PULL OR ALTER CASING		CHANGE PLANS		CASING TEST	AND CEMENT J	as X	•	
	•			OTHER				LJ
OTHER			U					•
7. Describe Proposed or Con	-1 1 0 (C1-	-111.		ila and since				
4-18-84 - 3-1/2"	Liner set at	15,370'. To	op of 1	liner at	13,209'.	C-75 1	0.3# cemen	
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	•							
		•						
						•		

Regulatory Analyst

NITLE REGULATORY Analyst

NITLE DISTRICT 1 SUPERVISOR

DATE APR 26 1984