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NEW MEXICO OIL CONSERVATION COMMISSION

30-031-2054
Form C-101
Revised 1-1-65

5A. Indicate Type of Lease	
STATE <input checked="" type="checkbox"/>	FEE <input type="checkbox"/>
5. State Oil & Gas Lease No.	
L - 5115	

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work		7. Unit Agreement Name	
b. Type of Well OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		8. Farm or Lease Name	
DRILL <input checked="" type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input type="checkbox"/>		State	
2. Name of Operator		9. Well No.	
WTR Comp Oil Co.		2	
3. Address of Operator		10. Field and Pool, or Wildcat	
P.O. Drawer H Cortez, Colorado 81321		W C	
4. Location of Well		12. County	
UNIT LETTER C LOCATED 350 FEET FROM THE North LINE		McKinley	
AND 1670 FEET FROM THE West LINE OF SEC. 16 TWP. 19N RGE. 6W NMPM			
21. Elevations (Show whether DF, RT, etc.)		19. Proposed Depth	19A. Formation
6842' G1	21A. Kind & Status Plug. Bond	4200'	Dakota
Individual	21B. Drilling Contractor	Diamond W Drilling	20. Rotary or C.T.
	22. Approx. Date Work will start		Rotary
	July 25, 1978		

23.

PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
10"	8 5/8"	28#	60'	cement to surface	
7"	5 1/2"	18#	2350'	110 sks	

Plan to drill a 10" hole and set 8 5/8" surface casing to 60' cement to surface. Drill a 7" hole to 2350' and test the Mesa Verde sandstones, run 5 1/2" casing and cement to surface, or 250' above any zone to be tested or water zones, reduce hole to 4 3/4" and test the Tocio SS, Gallup SS and the Dakota SS to a depth of 4250'.

Estimated tops - Cliffhouse 500'
Menefee 590'
Point Lookout 2200'
Gallup 3175'
Dakota 4200'

BEFORE EXAMINER CATANACH
OIL CONSERVATION DIVISION
DCCD EXHIBIT NO: 1d
CASE NO. 11515

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 James P. Steadley Title Co operator Date June 2, 1978

(This space for State Use)

APPROVED BY Frank S. Day TITLE DEPUTY COMMISSIONER DATE June 2, 1978

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.

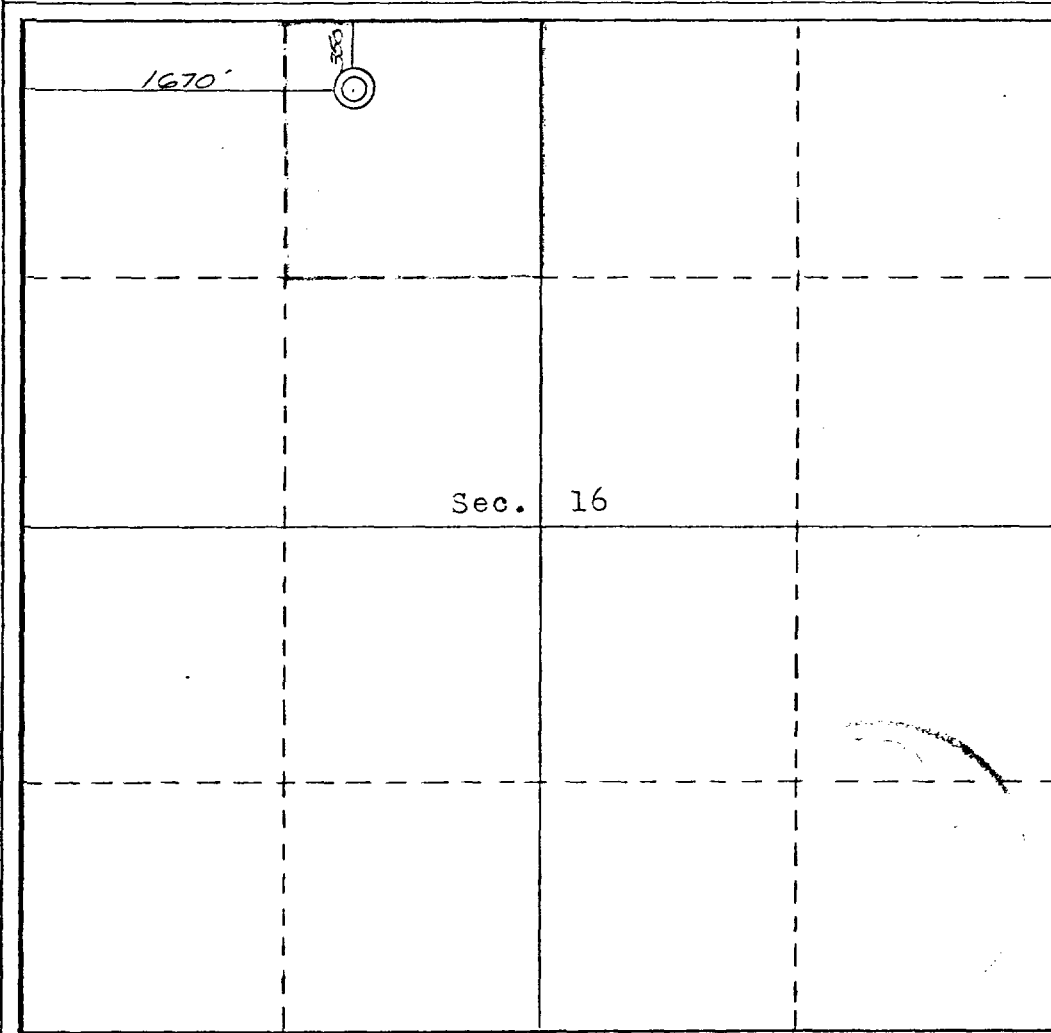
Operator WTR CORPORATION Oil Co.		Lease STATE		Well No. 1
Unit Letter C	Section 16	Township 19 North	Range 6 West	County McKinley
Actual Footage Location of Well: 250 feet from the North line and 1670 feet from the West line				
Ground Level Elev. 6842	Producing Formation Doleta	Pool Wildcat	Dedicated Acreage: 40 Acres	

1. Outline the acreage dedicated to the subject well by colored pencil or hatchure 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.



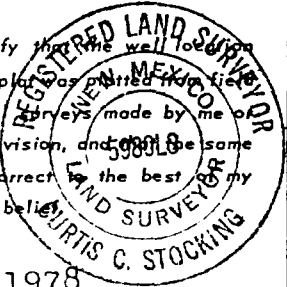
CERTIFICATION

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

James P. Woolley
James P. Woolley

Name operator
Position WTR
Company 6-2-78
Date

I hereby certify that the well location shown on this plat was verified from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my knowledge and belief.



Date Surveyed May 20, 1978
<i>Curtis C. Stocking</i> Registered Professional Engineer and/or Land Surveyor CURTIS C. STOCKING 5980 L.S. N.Mex. Certificate No.

AFFIDAVIT

State of New Mexico)
) SS.
McKinley County)

Before me the authority on this day personally appeared James P. Woosley of Drawer H Cortez, Colorado known to me to be a credible person of legal age who after being by me first duly sworn on oath deposes and says:

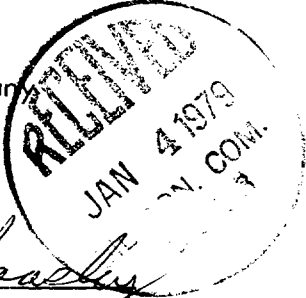
On 10-13-78 deviation tests were conducted by employees of WTR Oil Company Well # 2 located 350' FNL & 1670 FWL Sec. 16, T19N, R6W, NMPM, McKinley County, New Mexico

Technical Oil Tool Corporation equipment was used as follows:

1. First survey at approximate depth of 500' below the surface indicated a drift of 1/2° vertical.
2. Second survey at approximate depth of 1000' below the surface indicated a drift of 1° from vertical.
3. Third survey at approximate depth of 1500' below the surface indicated a drift of 3/4° from vertical.
4. Fourth survey at approximate depth of 2000' below the surface indicated a drift of 0° from vertical.
5. Fifth survey at approximate depth of 2340' below the surface indicated a drift of 1° from vertical.

The records of the above surveys are on file in the office of WTR Oil Company P.O. Drawer H Cortez, Colorado.

Affiant further states that he is duly authorized agent of WTR Oil Company co-owner and co-operator of the above named well.

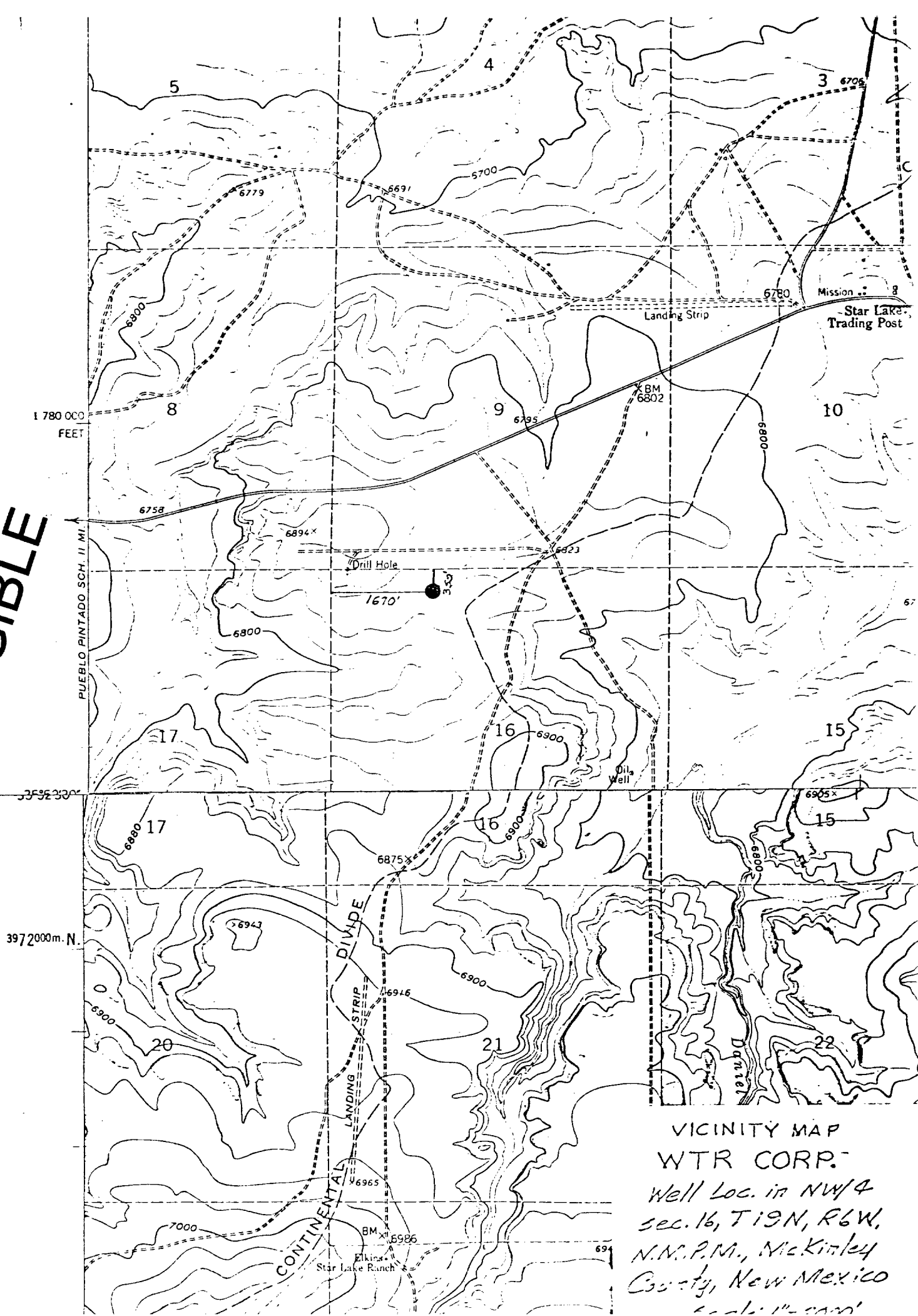

James P. Woosley
James P. Woosley
Co-Owner

SUBSCRIBED AND SWORN TO before me this the 3rd of January, 1978 A.D.

John A. Sanders
Notary Public

My Commission Expires: Sept 7 1981

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VICINITY MAP
WTR CORP.
Well Loc. in NW/4
Sec. 16, T19N, R6W,
N.M.P.M., McKinley
County, New Mexico
6-1-1960

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.

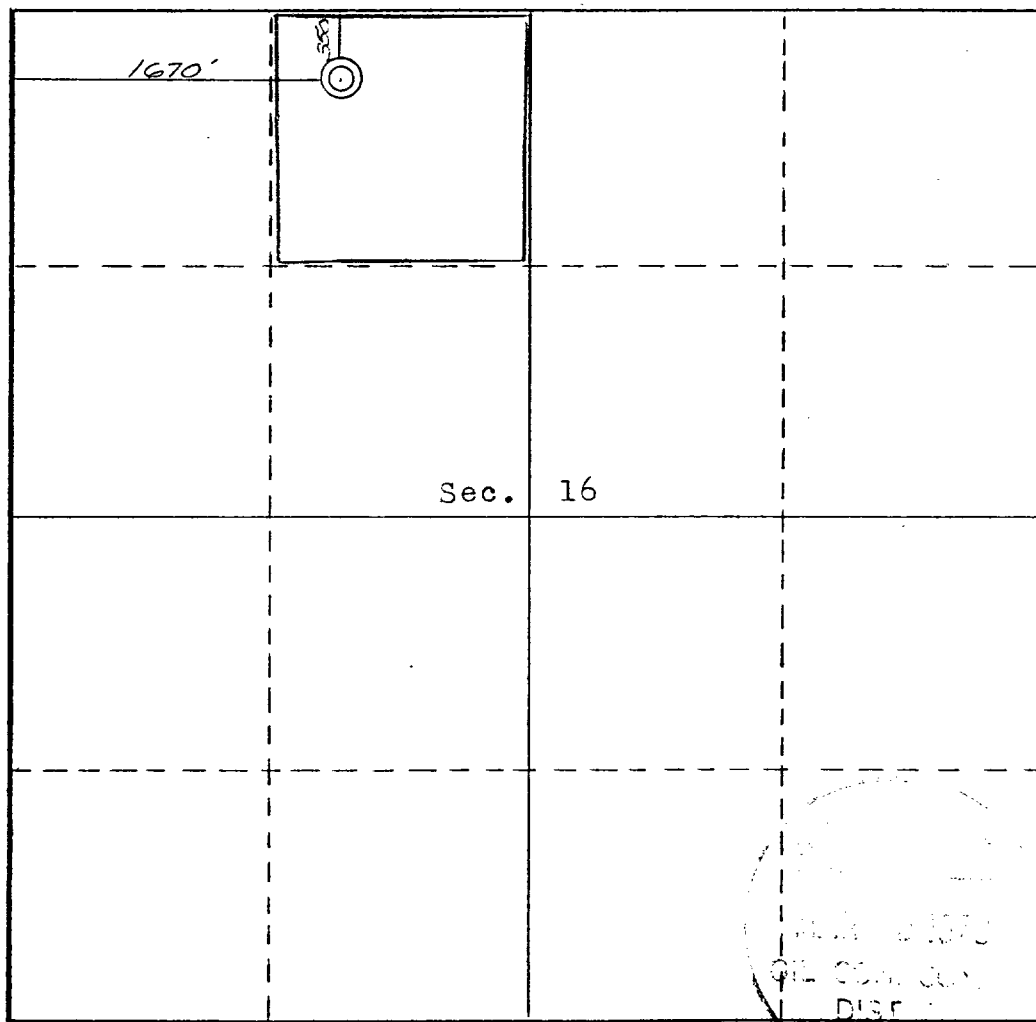
Operator WTR CORPORATION - Oil Company			Lease STATE		Well No. 2
Unit Letter C	Section 16	Township 19 North	Range 6 West	County McKinley	
Actual Footage Location of Well: 250 feet from the North line and 1670 feet from the West line					
Ground Level Elev. 6842	Producing Formation Mesa Verde		Pool Indefinite		Dedicated Acreage: 80 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.

James F. Vossley

Name
operator

Position
WTR

Company
6-2-78

Date
James F. Vossley

I hereby certify that the information 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.



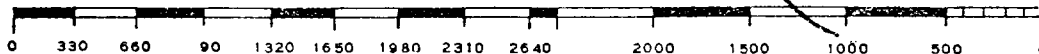
May 20, 1978

Date Surveyed
Curtis C. Stocking
Registered Professional Engineer
and/or Land Surveyor

CURTIS C. STOCKING

5980 L.S. N.Mex.

Certificate No.



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

Form O-105
Revised 10-68

5a. Indicate Type of Lease
State ☒ Fee ☐
5. Title Oil & Gas Lease No.
L-5115
7. Unit Agreement Date
8. Farm or Lease Name
State
9. Well No.
2
10. Field and Pool, or Equivalent
Wildcat
11. County
McKinley

1. TYPE OF WELL
OIL WELL ☒ GAS WELL ☐ DRY ☐ OTHER
2. TYPE OF COMPLETION
NEW WELL ☒ WORK OVER ☐ DEEPEN ☐ PILE BACK ☐ DIFF. RETVR. ☐ OTHER
3. Name of Operator
WTR Oil Company
4. Address of Operator
P.O. Drawer H, Cortez, Colorado 81321
5. Location of Well

UNIT LETTER C LOCATED 350 FEET FROM THE North LINE AND 1670 FEET FROM
West LINE OF SEC. 16 TWP. 19N RGE. 6W NMPM

15. Date Spudded Aug. 15, 1978 16. Date T.D. Reached Sept. 12, 1978 17. Date Compl. (Ready to Prod.) Oct. 25, 1978 18. Elevations (DF, RKB, RT, GR, etc.) 6842 GL 19. Elev. Casinghead 6843
20. Total Depth 2384 21. Plug Back T.D. 2343 22. If Multiple Compl., How Many none 23. Intervals Drilled By Rotary Tools Cable Tools 0-2384
24. Producing Interval(s), of this completion - Top, Bottom, Name 2153 - 2172 Menefee 25. Was Directional Survey Made yes
26. Type Electric and Other Logs Run Density; Induction Electric; Mud log; Cement Bond log. 27. Was Well Cored no

23. CASING RECORD (Report all strings set in well)

CASING SIZE	WEIGHT LB./FT.	DEPTH SET	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
7"	23#	44'	9"	10 sks	none
4 1/2"	9.5#	2287'	6 1/4"	260 sks	none

23. LINER RECORD

SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN

30. TUBING RECORD

SIZE	DEPTH SET	PACKER SET

31. Perforation Record (Interval, size and number)

2153 - 2166 - 3 holes/ft.
2170 - 2172 - 3 holes/ft

32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

DEPTH INTERVAL	AMOUNT AND KIND MATERIAL USED
2153 - 2172	12,500 lb - 20-40 sand
	12,500 lb - 10-20 sand
	18,990 gals total gel water

33. PRODUCTION
Date First Production Nov. 20, 1978 Production Method (Flowing, gas lift, pumping - Size and type pump) Pumping unit (D - 25 National) Well Status (Prod. or Shut-in) Prod.
Date of Test Nov. 21, 1978 Hours Tested 24 Choke Size open Prod'n. Per Test Period 33 Oil - Bbl. 53,660 Gas - MCF 10 Water - Bbl. 42 Gas - Oil Ratio
Flow Tubing Press. 30 lbs. Casing Pressure 30 lbs. Calculated 24-Hour Rate 33 Oil - Bbl. 53,660 Gas - MCF 10 Water - Bbl. 42 Oil Gravity - API (Corr.)
34. Disposition of Gas (Sold, used for fuel, vented, etc.) used for fuel, vented Test Witnessed By Pat Woosley
35. List of Attachments Well, well head, pumping unit, separator and tank.

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NEW MEXICO OIL CONSERVATION COMMISSION

1
SUNDARY NOTICES AND REPORTS ON WELLS
Oil and Gas
State of New Mexico

WELL NO. ☒ X
L-5115
State
2
Wildcat
McKinley

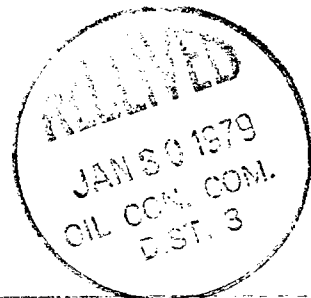
SUNDARY NOTICES AND REPORTS ON WELLS
DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO OPEN OR PLUG BACK TO A DIFFERENT RESERVOIR.
SEE APPLICATION FOR PERMIT "A" (FORM C-101) FOR SUCH PROPOSALS.
1. TYPE OF OPERATOR
OIL WELL ☒ X
2. NAME OF OPERATOR
WTR OIL COMPANY
3. ADDRESS OF OPERATOR
P.O. Drawer H, Cortez, Colorado 81321
4. LOCATION OF WELL
UNIT LETTER C 350 FEET FROM THE North LINE AND 1670 FEET FROM
THE West LINE SECTION 16 TOWNSHIP 19 N RANGE 6W NMPM
5. Elevation (Show whether DE, RT, GR, etc.)
6842 GL

15. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO:
PERFORM REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐
PULL OR ALTER CASING ☐
OTHER ☐
PLUG AND ABANDON ☐
CHANGE PLANS ☐
SUBSEQUENT REPORT ON:
REMEDIAL WORK ☐
COMMENCE DRILLING OPER. ☒ X
CASING TEST AND CEMENT JOB ☒ X
OTHER ☐

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates including estimated dates of completion of proposed work) SEE RULE 1109.

Spudded a 9" hole on August 15, 1978 and set 44' of 7" casing and displaced neat cement to surface with 10 sks.

Tested surface pipe and cement by pressuring to 1200 P.S.I. and holding for 2 hours (no pipe movement and no leak off).



18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.
SIGNED James J. Woodberg TITLE Co-operator DATE 01/29/79
Original Signed by FRANK T. CHAVEZ
APPROVED BY TITLE DATE
CONDITIONS OF APPROVAL, IF ANY:

INDICATE FORMATION TOPS IN CONFORMANCE WITH GEOGRAPHICAL SECTION OF STATE

Southeastern New Mexico

Northwestern New Mexico

T. Anix	T. Canyon	T. Oil Adobe	T. Penn. "H"
T. Salt	T. Strawn	T. Fruitland Fruitland surface	T. Penn. "C"
T. Salt	T. Arroyo	T. Picture Cliff 532	T. Penn. "D"
T. T. River	T. Mesa	T. Cliff House 1740	T. Leadville
T. T. River	T. Devonian	T. Menefee 1858	T. Madison
T. Green	T. Silurian	T. Point Lookout 2194	T. Elliott
T. Graystone	T. Montoya	T. Mancos	T. McCracken
T. San Andres	T. Simpson	T. Gallup	T. Ignacio Quartz
T. Glorieta	T. McKee	T. Base Greenhorn	T. Granite
T. Pueblo	T. Ehrenburger	T. Dakota	T.
T. Phacary	T. Gr. Wash	T. Morrison	T.
T. Tebl	T. Granite	T. Todillo	T.
T. L. and F.	T. Delaware Sand	T. Entrada	T.
T. Abo	T. Bone Springs	T. Wingate	T.
T. Wolfcamp	T.	T. Chule	T.
T. Penn.	T.	T. Permian	T.
T. Cisco (Hough C)	T.	T. Penn. "A"	T.

OIL OR GAS SANDS OR ZONES

No. 1, from 532 to 570	No. 4, from 1096 to 1113
No. 2, from 840 to 890	No. 5, from 1580 to 1786
No. 3, from 1045 to 1064	No. 6, from 2034 to 2056
	2163 to 2172
	2196 to 2226

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.
No. 4, from	to	feet.

FORMATION RECORD (Attach additional sheets if necessary)

From	To	Thickness in Feet	Formation	From	To	Thickness in Feet	Formation
Surface	532	532	Fruitland				
532	837	305	Picture Cliff and Chacra				
837	1740	903	Lewis				
1740	1858	118	Cliff House				
1858	2193	335	Menefee				
2193	T D	150	Point Lookout				



ILLEGIBLE

DISTRIBUTION		NEW MEXICO OIL CONSERVATION COMMISSION		Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65	
SPECIAL		REQUEST FOR ALLOWABLE		B.K.	
FILE		AND		API 30-031-20543	
U.S.G.S.		AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS			
LAND OFFICE					
TRANSPORTER		OIL			
		GAS			
OPERATOR					
PRODUCTION OFFICE					
Operator WTR Oil Company					
Address P.O. Drawer H, Cortez, Colorado 81321					
Reason(s) for filing (Check proper box)				Other (Please explain)	
New Well <input checked="" type="checkbox"/>				Change In Transporter of:	
Recompletion <input type="checkbox"/>				Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>	
Change In Ownership <input type="checkbox"/>				Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	
Change of ownership give name and address of previous owner					
DESIGNATION OF WELL AND LEASE					
Lease Name State		Well No. 2		Pool Name, including Formation Wildcat Menefee MV	
				Kind of Lease State, Federal or Fee	
				Lease No. L-5115	
Location					
Unit Letter C 350 Feet From The North Line and 1670 Feet From The West					
Line of Section 16 Township 19N Range 6W NMPM, McKinley County					
DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS					
Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>			Address (Give address to which approved copy of this form is to be sent)		
K. E. McDougald Corp.			P.O. Box 309, Moab, Utah 84532		
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.			Is gas actually connected? When		
Unit C Sec. 16 Twp. 19N Rge. 6W					
If this production is commingled with that from any other lease or pool, give commingling order number:					
COMPLETION DATA					
Designate Type of Completion - (X)		Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/>		New Well <input checked="" type="checkbox"/> Workover <input type="checkbox"/> Deepen <input type="checkbox"/> Plug Back <input type="checkbox"/> Same Res'v. <input type="checkbox"/> Diff. Res'v. <input type="checkbox"/>	
Date Spudded August 15, 1978		Date Compl. Ready to Prod. October 25, 1978		Total Depth 2384	
Elevations (DF, RKB, RT, GR, etc.) 6842 GL		Name of Producing Formation Menefee		Tubing Depth 2161	
Perforations 2153 - 2166 2170 - 2172				Depth Casing Shoe 2287	
TUBING, CASING, AND CEMENTING RECORD					
HOLE SIZE		CASING & TUBING SIZE		DEPTH SET	
9"		7"		44	
6 1/4"		4 1/2"		2287	
		2 3/8"		2161	
TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)					
Date First New Oil Run To Tanks November 20, 1978		Date of Test November 21, 1978		Producing Method (Flow, pump, gas lift, etc.) Pumping (D-25 National Unit)	
Length of Test 24 hours		Tubing Pressure 30 lbs.		Casing Pressure 30 lbs.	
Actual Prod. During Test 43		Oil - Bbls. 33 Bbls.		Water - Bbls. 10	
				Choke Size Open	
				Gas - MCF 53,660	
GAS WELL					
Actual Prod. Test - MCF/D		Length of Test		Bbls. Condensate/MCF	
Testing Method (pitot, back pr.)		Tubing Pressure (Shut-in)		Casing Pressure (Shut-in)	
				Choke Size	
CERTIFICATE OF COMPLIANCE					
OIL CONSERVATION COMMISSION					
APPROVED MAR 5 1979					
BY Original Signed by A. R. Kendrick					
SUPERVISOR DIST. #3					
TITLE					
This form is to be filed in compliance with RULE 1104.					
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.					
All sections of this form must be filled out completely for allowable on new and recompleted wells.					
Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.					
Separate Forms C-104 must be filed for each pool in multiply completed wells.					

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TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-119
Effective 1-1-65

Woosley State #2
C-16-19N-6W

Operator WTR Oil Company	
Address P.O. Drawer H, Cortez, Colorado 81321	
Reason(s) for filing (Check proper box)	
New Well <input type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input checked="" type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE	
State	Well No. 2
Pool Name, Including Formation Wildcat Menefee	
Kind of Lease State, Federal or Fee	Lease No. 1-5115
Location	
Unit Letter C : 350 Feet From The North Line and 1670 Feet From The West	
Line of Section 16 Township 19N Range 6W, NMPM, McKinley County	

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS	
Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Giant Refinery	P.O. Box 256, Farmington, New Mexico 87401
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 Sec. Twp. Rge.
C 16 19N 6W	Is gas actually connected? When

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

COMPLETION DATA	
Designate Type of Completion - (X)	Oil Well Gas Well New Well Workover Deepen Plug Back Same Res'v. Diff. Res'v.
Date Spudded	Date Compl. Ready to Prod.
Total Depth	P.B.T.D.
Elevations (DF, RKB, RT, CR, 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

TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
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

CERTIFICATE OF COMPLIANCE

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

James P. Woosley
(Signature)
Co-operator
(Title)
March 15, 1979
(Date)

OIL CONSERVATION COMMISSION
APPROVED MAR 16 1979
BY Original Signed by A. R. Kendrick
TITLE SUPERVISOR DIST. 3

This form is to be filed in compliance with RULE 1104.
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.
All sections of this form must be filled out completely for allowable on new and recompleted wells.
Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.
Separate Forms C-104 must be filed for each pool in multiply completed wells.

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TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

Operator Woosley Oil Company	
Address Post Office Drawer 1480, Cortez, Colorado 81321	
Reason(s) for filing (Check proper box)	
New Well <input type="checkbox"/>	Change In Transporter of:
Recompletion <input type="checkbox"/>	Oil <input checked="" type="checkbox"/>
Change In Ownership <input checked="" type="checkbox"/>	Casinghead Gas <input type="checkbox"/>
	Dry Gas <input type="checkbox"/>
	Condensate <input type="checkbox"/>
Other (Please explain)	

If change of ownership give name and address of previous owner WTR Oil Company, Post Office Drawer LL, Cortez, Colorado 81321

DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
State	2	Star Mesaverde	State, Federal or Fee State	#L05115
Location				
Unit Letter C	350	Feet From The North	Line and 1670	Feet From The West
Line of Section 16	Township 19N	Range 6W	NMPM, McKinley	County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
Inland Corporation	P. O. Box 1528, Farmington, New Mexico 87499	
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 C	Sec. 16
	Twp. 19N	Pge. 6W
Is gas actually connected?	When	

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

COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
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

TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

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

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

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OIL CON. DIV.

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

CERTIFICATE OF COMPLIANCE

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

WOOSLEY OIL COMPANY,

By: James P. Woosley
James P. Woosley, Operator
Frederick J. Gorman, SEC.
(Title)

August 26, 1983

(Date)

OIL CONSERVATION COMMISSION

APPROVED SEP 1 1983, 19

BY Original Signed by FRANK T. CHAVEZ

TITLE SUPERVISOR DISTRICT #3

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

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

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

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

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

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	GAS
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NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

Operator Woosley Oil Company	
Address Post Office Drawer 1480, Cortez, Colorado 81321	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input checked="" type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of ownership give name
and address of previous owner _____

I. DESCRIPTION OF WELL AND LEASE

Lease Name State	Well No. 2	Pool Name, including Formation Star Mesa Verde	Kind of Lease State, Federal or Fee	Lease No. L05115
Location Unit Letter C ; 350 Feet From The North Line and 1670 Feet From The West				
Line of Section 16 Township 19N Range 6W, NMPM, McKinley County				

I. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Gary Energy Corporation	P.O. Box 159, Bloomfield, New Mexico 87413					
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 C	Sec. 16	Twp. 19N	Rge. 6W	Is gas actually connected?	When

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

I. 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

I. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

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

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

OIL CON. DIV.
DIST. 3

GAS WELL

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

I. CERTIFICATE OF COMPLIANCE

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

WOOSLEY OIL COMPANY

By: Freda L. Yeomans
(Signature)

Freda L. Yeomans - Office Manager

(Title)

November 28, 1984

(Date)

OIL CONSERVATION COMMISSION

APPROVED Frank J. [Signature] , 19

BY Supervisor

TITLE SUPERVISOR DISTRICT # 3

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

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

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

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

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

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TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

Operator Woosley Oil Company	
Address P.O. Drawer 1480, Cortez, Colorado 81321	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input checked="" type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name State	Well No. 2	Pool Name, Including Formation Star Mesa Verde	Kind of Lease State, Federal or Fee State	Lease No. L-5115
Location Unit Letter C ; 350 Feet From The North Line and 1670 Feet From The West				
Line of Section 16 Township 19N Range 6W , NMPM, McKinley County				

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> The Permian Corporation Permian (Eff. 9/1/85)	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1183, Houston, Texas 77251-1183
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 C Sec. 16 Twp. 19N Rge. 6W
Is gas actually connected?	When

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

COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
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

TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

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

OIL CON. DIV. I

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

I. CERTIFICATE OF COMPLIANCE

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

Robert J. [Signature]
Office Manager
September 23, 1985
(Date)

OIL CONSERVATION COMMISSION
APPROVED SEP 25 1985
BY Frank J. [Signature]
TITLE SUPERVISOR DISTRICT # 3

This form is to be filed in compliance with RULE 1104.
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.
All sections of this form must be filled out completely for allowable on new and recompleted wells.
Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.
Separate Forms C-104 must be filed for each pool in multiply completed wells.

OIL CONSERVATION DIVISION

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

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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator <u>Woolley Oil Company</u>		Well API No. <u>State # 2</u>
Address <u>PO Drawer 1480 Cortez, Colorado 81321</u>		
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 checked="" type="checkbox"/> Dry Gas <input type="checkbox"/>	
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 <u>State</u>	Well No. <u>2</u>	Pool Name, Including Formation <u>Star Mesa Verde</u>	Kind of Lease <u>State, Federal or Fee</u>	Lease No. <u>L-5115</u>
Location				
Unit Letter <u>C</u> : <u>350</u> Feet From The <u>North</u> Line and <u>1670</u> Feet From The <u>West</u> Line				
Section <u>16</u> Township <u>19 N</u> Range <u>6 W</u> NMPM, <u>McKinley</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
<u>Giant Refining Co.</u>	<u>PO Box 256 Farmington NM 87499</u>	
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	Sec.	Twp.
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 - MCF	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.

James P. Woolley
Signature
James P. Woolley operator
Printed Name
10-18-1990 303-565-8245
Date Telephone No.

OIL CONSERVATION DIVISION

OCT 19 1990

Date Approved

By Bill D. Shum

SUPERVISOR DISTRICT 12

Title

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

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