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LAND OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION

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

5a. Indicate Type of Lease	
State <input checked="" type="checkbox"/>	Fee <input type="checkbox"/>
5. State Oil & Gas Lease No. LG 3219	

SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		7. Unit Agreement Name
2. Name of Operator Southern Union Exploration Company		8. Farm or Lease Name Susco State
3. Address of Operator Suite 1800, First International Bldg., Dallas, Texas 75270		9. Well No. 2
4. Location of Well UNIT LETTER <u>J</u> <u>1980</u> FEET FROM THE <u>South</u> LINE AND <u>1980</u> FEET FROM THE <u>East</u> LINE, SECTION <u>19</u> TOWNSHIP <u>9-S</u> RANGE <u>33-E</u> NMPM.		10. Field and Pool, or Wildcat Flying "M" San Andres
15. Elevation (Show whether DF, RT, GR, etc.) G.L. 4374.5		12. County Lea

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

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

- 10/26/78 - Moved in workover unit and pulled rods, pump and tubing.
- 10/28/78 - Reacidized old perms with 3000 gallons.
- 10/31/78 - Perforated lower section from 4390' to 98' and 4406' to 16'. (ISPF)
- 11/1/78 - Acidized using 3000 gallons.
- 11/5/78 - Hung well back to pump.

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

SIGNED Ronald H. Gutz TITLE Drilling & Production Engineer DATE November 9, 1978

APPROVED BY Jerry Sexton TITLE Dist. 1, Supr. DATE NOV 13 1978

CONDITIONS OF APPROVAL, IF ANY:

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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

I. Operator
Southern Union Exploration Company
Address
1800 First International Bldg., Dallas, Texas 75270
Reason(s) for filing (Check proper box)
New Well ☐ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☒ Condensate ☐
Other (Please explain)

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name SUSCO - State	Well No. 2	Pool Name, including Formation Flying "M" San Andres	Kind of Lease State, Federal or Fee State	Lease No. LG-3219
Location Unit Letter J 1980 Feet From The South Line and 1980 Feet From The East Line of Section 19 Township 9-S Range 33-E, NMPM, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate/Gas Company Mobil Oil Corporation	Address (Give address to which approved copy of this form is to be sent) P. O. Box 900, Dallas, Texas 75221					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Warren Petroleum Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1589, Tulsa, Oklahoma 74102					
If well produces oil or liquids, give location of tanks.	Unit P	Sec. 19	Twp. 9-S	Rge. 33-E	Is gas actually connected? Yes	When 11/4/77

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							
TUEING, 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 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

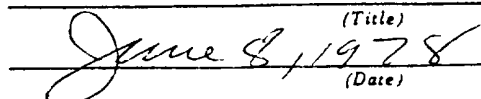
GAS WELL

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

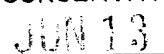
VI. CERTIFICATE OF COMPLIANCE


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


(Signature)
Chief Petroleum Engineer


(Date)

OIL CONSERVATION COMMISSION

APPROVED  19

BY 
Jerry Sexton

TITLE 
Dist. I. Supv.

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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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

1. Operator
Southern Union Exploration Company

Address
Suite 1800, First International Bldg., Dallas, Texas 75270

Reason(s) for filing (Check proper box) Other (Please explain)

New Well ☐ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐ Change Corporate Name
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐

If change of ownership give name and address of previous owner Southern Union Supply Company

II. DESCRIPTION OF WELL AND LEASE

Lease Name SUSCO - State	Well No. 2	Pool Name, Including Formation Flying "M" San Andres	Kind of Lease State, Federal or Fee State	Lease No. LG-3219
Location Unit Letter J 1980 Feet From The South Line and 1980 Feet From The East Line of Section 19 Township 9-S Range 33-E, NMPM, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Mobil Oil Corporation	Address (Give address to which approved copy of this form is to be sent) P. O. Box 900, Dallas, Texas 75221					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Cities Service	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 P	Sec. 19	Twp. 9-S	Rge. 33-E	Is gas actually connected? Yes	When 11/4/77

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)

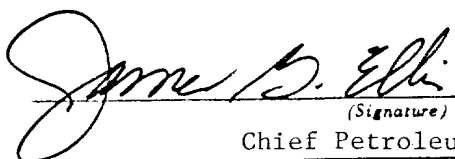
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL


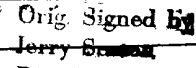
Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. CERTIFICATE OF COMPLIANCE

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


(Signature)
Chief Petroleum Engineer
(Title)
March 3, 1978
(Date)

OIL CONSERVATION COMMISSION

APPROVED  , 19
BY 
Dist. 1, State

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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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

I. Operator
Southern Union Supply Company
Address
1800 First International Bldg., Dallas, Texas 75270
Reason(s) for filing (Check proper box)
New Well ☐ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☒ Condensate ☐
Other (Please explain)

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name SUSCO - State	Well No. 2	Pool Name, Including Formation Flying "M" San Andres	Kind of Lease State, Federal or Fee State	Lease No. LG-3219
Location: Unit Letter J ; 1980 Feet From The South Line and 1980 Feet From The East Line of Section 19 Township 9-S Range 33-E , NMPM, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Mobil Oil Corporation	Address (Give address to which approved copy of this form is to be sent) P. O. Box 900, Dallas, Texas 75221					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Cities Service	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 P	Sec. 19	Twp. 9-S	Rge. 33-E	Is gas actually connected? Yes	When 11/4/77

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)

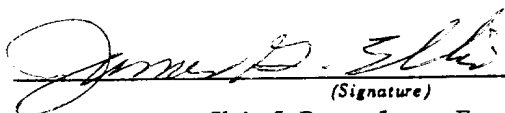
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

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

VI. CERTIFICATE OF COMPLIANCE

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


(Signature)

Chief Petroleum Engineer

(Title)

December 7, 1977

(Date)

OIL CONSERVATION COMMISSION

APPROVED , 19

BY

TITLE

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

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

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

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Form C-105
Revised 1-1-65

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

5a. Indicate Type of Lease	
State <input checked="" type="checkbox"/>	Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.	
LG - 3219	

1a. TYPE OF WELL		7. Unit Agreement Name	
OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> DRY <input type="checkbox"/> OTHER <input type="checkbox"/>			
b. TYPE OF COMPLETION		8. Farm or Lease Name	
NEW WELL <input checked="" type="checkbox"/> WORK OVER <input type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input type="checkbox"/> DIFF. RESVR. <input type="checkbox"/> OTHER <input type="checkbox"/>		SUSCO STATE	

2. Name of Operator		9. Well No.	
Southern Union Supply Company		2	
3. Address of Operator		10. Field and Pool, or Wildcat	
First Internatioanl Bldg. Dallas, Texas 75270		Under. Flying M-S.A.	

4. Location of Well		12. County	
UNIT LETTER <u>J</u> LOCATED <u>1980</u> FEET FROM THE <u>South</u> LINE AND <u>1980</u> FEET FROM <u>East</u>		Lea	
THE <u>East</u> LINE OF SEC. <u>19</u> TWP. <u>9-S</u> RGE. <u>33E</u> NMPM			

15. Date Spudded	16. Date T.D. Reached	17. Date Compl. (Ready to Prod.)	18. Elevations (DF, RKB, RT, GR, etc.)	19. Elev. Casinghead
8/29/77	9/10/77	9/29/77	4385.5 KB	
20. Total Depth	21. Plug Back T.D.	22. If Multiple Compl., How Many	23. Intervals Drilled By	24. Producing Interval(s), of this completion - Top, Bottom, Name
4500	4460		Rotary Tools ALL	San Andres, Slaughter Zone 4332-4372

25. Was Directional Survey Made		26. Type Electric and Other Logs Run		27. Was Well Cored	
Yes		Sidewall Neutron, Forxo-Guard, Gamma Ray		Yes	

28. CASING RECORD (Report all strings set in well)					
CASING SIZE	WEIGHT LB./FT.	DEPTH SET	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
8 5/8"	24	1850	12 1/2	900 sks	
4 1/2"	10.5	4500	7 7/8	1370 sks	

29. LINER RECORD				30. TUBING RECORD			
SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN	SIZE	DEPTH SET	PACKER SET
					2 3/8"	4369	

31. Perforation Record (Interval, size and number)		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
4332, 4333, 4334, 4336, 4344, 4345, 4346, 4348, 4354, 4355, 4356, 4357, 4358, 4359, 4360, 4361, 4362, 4368, 4370, 4372 One shot each		DEPTH INTERVAL 4332-72 AMOUNT AND KIND MATERIAL USED 4000 gallons acid	

33. PRODUCTION							
Date First Production		Production Method (Flowing, gas lift, pumping - Size and type pump)				Well Status (Prod. or Shut-in)	
9/30/77		Pumping				Producing	
Date of Test	Hours Tested	Choke Size	Prod'n. For Test Period	Oil - Bbl.	Gas - MCF	Water - Bbl.	Gas - Oil Ratio
10/1/77	24			35	25	5	714
Flow Tubing Press.	Casing Pressure	Calculated 24-Hour Rate	Oil - Bbl.	Gas - MCF	Water - Bbl.	Oil Gravity - API (Corr.)	
			35	25	5	22.5	

34. Disposition of Gas (Sold, used for fuel, vented, etc.)		Test Witnessed By	
Vented. Gas Contract Pending. Well on 60 day test.		M. D. Boggs	

35. List of Attachments

36. I hereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief.		
SIGNED <u>James D. Ellis</u>	TITLE <u>Chief Petroleum Engineer</u>	DATE <u>10/7/77</u>

INSTRUCTIONS

This form is to be filed with the appropriate District Office of the Commission 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 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 Rule 1105.

INDICATE FORMATION TOPS IN CONFORMANCE WITH GEOGRAPHICAL SECTION OF STATE

Southeastern New Mexico

Northwestern New Mexico

T. Anhy _____ 1840	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 _____ 2386	T. Miss _____	T. Cliff House _____	T. Leadville _____
T. 7 Rivers _____ 2496	T. Devonian _____	T. Menefee _____	T. Madison _____
T. Queen _____ 2870	T. Silurian _____	T. Point Lookout _____	T. Elbert _____
T. Grayburg _____ 3254	T. Montoya _____	T. Mancos _____	T. McCracken _____
T. San Andres _____ 3608	T. Simpson _____	T. Gallup _____	T. Ignacio Qtzte _____
T. Glorieta _____	T. McKee _____	Base Greenhorn _____	T. Granite _____
T. Paddock _____	T. Ellenburger _____	T. Dakota _____	T. _____
T. Blinebry _____	T. Gr. Wash _____	T. Morrison _____	T. _____
T. Tubb _____	T. Granite _____	T. Todilto _____	T. _____
T. Drinkard _____	T. Delaware Sand _____	T. Entrada _____	T. _____
T. Abo _____	T. Bone Springs _____	T. Wingate _____	T. _____
T. Wolfcamp _____	T. _____	T. Chinle _____	T. _____
T. Penn. _____	T. _____	T. Permian _____	T. _____
T. Cisco (Bough C) _____	T. _____	T. Penn. "A" _____	T. _____

FORMATION RECORD (Attach additional sheets if necessary)

From	To	Thickness in Feet	Formation	From	To	Thickness in Feet	Formation
Surface	647	647	Ogalalla				
647	1658	1011	Triassic				
1658	1840	182	Dewey Lake				
1840	2386	546	Anhydrite				
2386	2496	110	Yates				
2496	2870	374	7 Rivers				
2870	3254	384	Queen				
3254	3608	354	Grayburg				
3608	4176	568	San Andres				
4176	4325	149	Pi Marker				
4325	4500		Slaughter Zone				
4500			Total Depth				

INCLINATION REPORT

OPERATOR Southern Union Supply Company ADDRESS 1st Int. Bldg. Suite 1800, Dallas, Texas 75270
 LEASE NAME Susco State #2 WELL NO. 2 FIELD _____
 LOCATION Section 19, T-9S, R-33E, Lea County, New Mexico

DEPTH	ANGLE INCLINATION DEGREES	DISPLACEMENT	DISPLACEMENT ACCUMULATED
504	1/4	2.2176	2.2176
801	1/2	2.5839	4.8015
1274	3/4	6.1963	10.9978
1649	3/4	4.9125	15.9103
1850	1	3.5175	19.4278
2340	1 3/4	14.9450	34.3728
2693	1 3/4	10.7665	45.1393
2985	2	10.1908	55.3301
3332	2	12.1103	67.4404
3785	2	15.8097	83.2501
4280	1	8.6625	91.9126
4500	3/4	2.8820	94.7946

I hereby certify that the above data as set forth is true and correct to the best of my knowledge and belief.

CACTUS DRILLING COMPANY

Garlin Taylor
 TITLE Garlin Taylor, Admn. Asst.

AFFIDAVIT:

Before me, the undersigned authority, appeared Garlin Taylor known to me to be the person whose name is subscribed herebelow, who, on making deposition, under oath states that he is acting for and in behalf of the operator of the well identified above, and that to the best of his knowledge and belief such well was not intentionally deviated from the true vertical whatsoever.

Garlin Taylor
 AFFIANT'S SIGNATURE

Sworn and subscribed to in my presence on this the 14th day of September, 1977

MY COMMISSION EXPIRES MARCH 1, 1980

SEAL

James L. Poyish
 Notary Public in and for the County
 of Lea, State of New Mexico

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

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-55

I.

Operator Southern Union Supply Company	
Address First International Bldg.	
Reason(s) for filing (Check proper box)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Other (Please explain) CASINGHEAD GAS MUST NOT BE FLARED AFTER 12/1/77 UNLESS AN EXCEPTION TO R-4070 IS OBTAINED.	

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name SUSCO STATE	Well No. 2	Pool Name, Including Formation Undes. Flying "M"-S.A.	Kind of Lease State, Federal or Fee	State	Lease No. LG-3219
Location					
Unit Letter J ; 1980 Feet From The South Line and 1980 Feet From The East					
Line of Section 19 Township 9-S Range 33E , NMPM, Lea County					

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Mobil Oil Corporation	Address (Give address to which approved copy of this form is to be sent) Dallas, Texas	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> Not Yet Contracted	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 P	Sec. 19
	Twp. 9S	Rge. 33E
	Is gas actually connected? No	
	When	

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

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well <input type="checkbox"/>	New Well <input checked="" type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Res'tv. <input type="checkbox"/>	Diff. Res'tv. <input type="checkbox"/>
Date Spudded 8/29/77	Date Compl. Ready to Prod. 9/29/77		Total Depth 4500'		P.B.T.D. 4460'			
Elevations (DF, RKB, RT, GR, etc.) 4385.5 KB	Name of Producing Formation San Andres		Top Oil/Gas Pay 4332		Tubing Depth 4369			
Perforations 4332, 33, 34, 36, 44, 45, 46, 48, 54, 55, 56, 57, 58, 59, 60, 61, 62, 68, 70, 72 One shot 1 foot					Depth Casing Shoe 4500			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE 12 1/2 7 7/8	CASING & TUBING SIZE 8 5/8 4 1/2		DEPTH SET 1850 4500		SACKS CEMENT 900 1370			

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

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

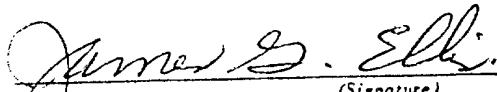
Date First New Oil Run To Tanks 9/30/77	Date of Test 10/1/77	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 HRS	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls. 35	Water - Bbls. 5	Gas - MCF 25

GAS WELL

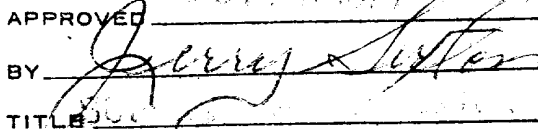
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. CERTIFICATE OF COMPLIANCE

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


(Signature)
Chief Petroleum Engineer
(Title)
10/7/77
(Date)

OIL CONSERVATION COMMISSION

APPROVED  , 19
BY
TITLE

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

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

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

Fill out 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.

NO. OF COPIES RECEIVED	
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LAND OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-102
Supersedes Old
C-102 and C-107
Effective 1-1-62

5a. Indicate Type of Lease
State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.
LG-3219

SUNDRY NOTICES AND REPORTS ON WELLS

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

OIL WELL <input checked="" type="checkbox"/>	GAS WELL <input type="checkbox"/>	OTHER <input type="checkbox"/>	7. Unit Agreement Name
Name of Operator			8. Firm or Lease Name
Southern Union Supply Company			SUSCO-State
Address of Operator			9. Well No.
1306 Gihls Tower West - Midland, Texas 79701			2
Location of Well			10. Field and Pool, or Wildcat
UNIT LETTER J, 1980' FEET FROM THE South LINE AND 1980 FEET FROM			Undes., Flying M-SA
THE East LINE, SECTION 19 TOWNSHIP 9-S RANGE 33-E NMPM.			
15. Elevation (Show whether DF, RT, CR, etc.)			12. County
4374.5' GR			Lea

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

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

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

8-29-77 Spud well

8-30-77 Ran 44 joints 8 5/8", 24#, K-55, STC Casing (1838.68'). Set at 1850.78' RKB. Cemented with 700 sacks Howco Lite followed by 200 sacks Class "C" with 2% CaCl₂. Cement Circulated. WOC 18 hrs. Pressure test to 1000 psi for 30 minutes. Held OK.

9-11-77 Ran 4 1/2", 10.50#, K-55 STC Casing (4,481.66'). Set @ 4500.29' RKB. Cemented first stage with 320 sacks Class "C" - Circ. through DV Tool - DV Tool opened with 1400 psi. Pressure test on first stage to 1000 psi for 30 minutes. Held OK. Cemented second stage with 1200 sacks Howco Lite. Pressure test second stage to 1000 psi for 30 minutes. Held OK. Circulated ± 75 sacks. WOC 18 hrs. Released rig.

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

ED <u>J. W. Mullory</u>	TITLE <u>Agent</u>	DATE <u>9-21-77</u>
Orig. Signed by <u>Jerry Sexton</u>		
LOVED BY <u>Dist 1, Supv.</u>	TITLE	DATE <u>9-21-1977</u>
DITIONS OF APPROVAL, IF ANY:		