

CLEMMONS SUNBURST FEDERAL  
1980' FWL & FSL, Sec 13  
T9S, R32E, Lea Co NM

WORKOVER REPORT

Flying "M" Prospect  
TD: 9495' Canyon  
PBDT: 9710'/Canyon

- 4/2/86 Well dead. Rigged up swabbing unit & made 1 swab run. Well kicked off. Flowed and swabbed 65 bbls oil. Well died. Started swabbing water. Shut down. This a.m.: Fluid level 2200' from surface, no pressure. Did not flow over night. 1st run all water. Prep to swab.
- 4/3/86 Swabbed 105 bbl water in 8 hrs. Fluid level remained @ 2200' from surface. Released swabbing unit @ 3:00 p.m. & shut down. Prep to move pulling unit on location and check plug and packer.
- 4/4/86 Running CIBP on tubing. This afternoon going to set CIBP, pull out of the hole, pick up packer, go back in hole. Prepare to swab well back on 4/5/86. Picked up 5½" CIBP, went in hole, wouldn't set. POH, plug unscrewed. Picked up 2nd CIBP, WIH, set @ 8477'. POH! Picked up 5½" Model R packer & started in hole, shut down.
- 4/5/86 Finished running tubing. Set packer @ 8192'. First swab run fluid level 3200' from surface. Swabbed 60 bbl water, little gas and show of oil. Set choke on 20/64" and left open to tank.
- 4/7/86 Shut down Sunday - well did not flow any fluid. This a.m. flowing tubing pressure 0#, fluid level 3500' from surface with skim of oil. Prep to swab.
- 4/8/86 Swabbed total 60 bbl water with a skim of oil and little gas. Fluid level 7500' from surface. Set choke on 20/64" & shut down. This morning flowing tubing pressure 0#. Fluid level 4200' from surface. Skim of oil & little gas. Prep to swab.
- 4/9/86 Swabbed total 45 bbl water with a skim of oil and fair gas. Swabbed dry. Set choke on 20/64" and shut down.
- 4/10/86 Rigged up swabbing unit. Fluid level 4400' from surface. Trace oil. Swabbed 60 bbl water with trace of oil and fair gas. Shut in and shut down. This morning shut in tubing press 150#. Fluid level 5000' from surface. 20' free oil on top.
- 4/10/86(pm) Swabbed 40 bbls. water 3 bbls. oil. Set choke on 20/64". Shut down.
- 4/11/86 Well dead. 0 lbs. flowing tubing pressure. Fluid level 4800' from surface. 1000' of free oil on top of first run.

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TRANSPORTER	OIL	
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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-111  
Effective 1-1-65

Operator Manzano Oil Corporation (505-623-1996)		
Address P.O. Box 571/Roswell, NM 88202		
Reason(s) for filing (Check proper box)		Other (Please explain)
New Well <input checked="" type="checkbox"/>	Change in Transporter of: Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	Approval to move casinghead gas from this well must be submitted to Minerals Management Service <i>BLM</i>
Recompletion <input type="checkbox"/>		
Change in Ownership <input type="checkbox"/>		

If change of ownership give name  
and address of previous owner \_\_\_\_\_

DESCRIPTION OF WELL AND LEASE

Lease Name Clemmons Sunburst Federal	Well No. 1	Pool Name, Including Formation Wildcat Abo	Kind of Lease State, Federal or Fee Federal	Lease No. NM 60414
Location Unit Letter <u>K</u> ; <u>1980'</u> Feet From The <u>South</u> Line and <u>1980'</u> Feet From The <u>West</u> Line of Section <u>13</u> Township <u>9-S</u> Range <u>32-E</u> , NMPM, <u>Lea</u> County				

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Navajo Refining Company	Address (Give address to which approved copy of this form is to be sent) P.O. Box 159/Artesia, NM 88240					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Warren Petroleum Corporation	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1150/Midland, TX 79702					
If well produces oil or liquids, give location of tanks.	Unit <u>K</u>	Sec. <u>13</u>	Twp. <u>9-S</u>	Rge. <u>32-E</u>	Is gas actually connected? <u>No</u>	When <u>Unknown</u>

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	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded <u>3/6/85</u>	Date Compl. Ready to Prod. <u>5/30/85</u>		Total Depth <u>9495'</u>		P.B.T.D. <u>9170'</u>			
Elevations (DF, RKB, RT, GR, etc.) <u>4353.9 GR</u>	Name of Producing Formation <u>Abo</u>		Top Oil/Gas Pay <u>8284'</u>		Tubing Depth <u>8192'</u>			
Perforations <u>8284' - 8300' (Producing)</u> <u>8976' - 8996'</u>					Depth Casing Shoe			

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
<u>17-1/2"</u>	<u>13-3/8"</u>	<u>361'</u>	<u>350 Class C/Circ 75 sks</u>
<u>12-1/4"</u>	<u>8-5/8"</u>	<u>3606' (circ 40 sk)</u>	<u>=1500 Hall Lite &amp; Cl C</u>
<u>7-7/8"</u>	<u>5-1/2"</u>	<u>9170'</u>	<u>400 P07</u>

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)

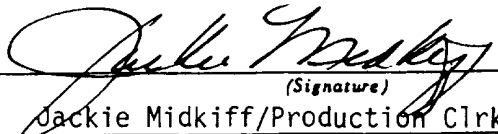
Date First New Oil Run To Tanks <u>5/30/85</u>	Date of Test <u>6/1/85</u>	Producing Method (Flow, pump, gas lift, etc.) <u>Flowing</u>	
Length of Test <u>24 hrs</u>	Tubing Pressure <u>230#</u>	Casing Pressure <u>N/A</u>	Choke Size <u>19/64"</u>
Actual Prod. During Test	Oil - Bbls. <u>240</u>	Water - Bbls. <u>0</u>	Gas - MCF <u>163</u>

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

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)  
Jackie Midkiff/Production Clrk  
(Title)  
6/1/85  
(Date)

OIL CONSERVATION COMMISSION

APPROVED JUN 17 1985, 19\_\_\_\_\_  
BY ORIGINAL SIGNATURE  
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.