

**NEW MEXICO OIL CONSERVATION COMMISSION
WELL LOCATION AND ACREAGE DEDICATION PLAT**

Form O-105
Superseded O-100
Effective 1-1-66

All distances must be from the outer boundaries of the Section.

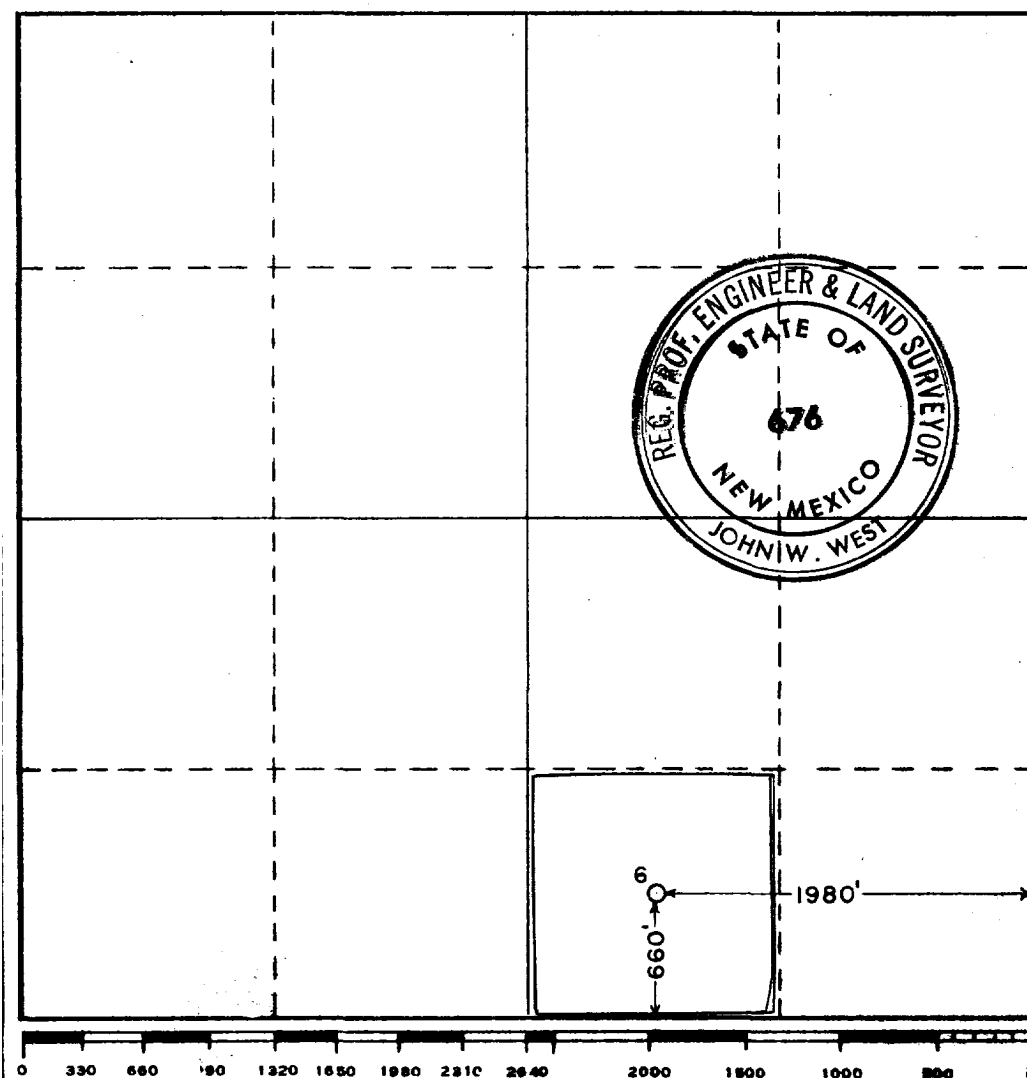
Operator KERN COUNTY LAND CO.			Lease FEDERAL 26		Well No. 6
Unit Letter O	Section 26	Township 7 SOUTH	Range 33 EAST	County ROOSEVELT	
Actual Footage Location of Well: 660 feet from the SOUTH line and 1980 feet from the EAST line					
Ground Level Elev.	Producing Formation SAN ANDRES	Pool CHAVEROO - SAN ANDRES	Dedicated Acreage 40-SW 1/4 of SE 1/4		

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 _____

☐ Yes ☐ No If answer is "yes," type of consolidation _____

If answer is "no," list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if necessary.) _____

No allowable will be assigned to the well until all interests have been consolidated (by communitization, unitization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interests, has been approved by the Commission.



CERTIFICATION	
I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.	
Name <i>Ronald H. Gansley</i>	Position <i>Dist. Prod. Supt.</i>
Company <i>Kern County Land Co.</i>	
Date <i>4-1-66</i>	
I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my knowledge and belief.	
Date Surveyed MARCH 31, 1966	
Registered Professional Engineer and/or Land Surveyor <i>John W. West</i>	
Certificate No. NEW MEX. L.S. 676	

DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUNDRY NOTICES, 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" for such proposals.)

1. NAME OF OPERATOR Tom Brown Drilling Company		5. LEASE DESIGNATION AND SERIAL NO. NMA 0109907 A	
2. NAME OF OPERATOR Tom Brown Drilling Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) 1080' FSL Sec 26 Unit 0 SW 1/4 SE 1/4		7. UNIT AGREEMENT NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) 1080' FSL Sec 26 Unit 0 SW 1/4 SE 1/4		8. FARM OR LEASE NAME Federal 26	
9. PERMIT NO.		9. WELL NO. 6	
10. ELEVATIONS (Show whether SP, RT, GS, etc.) 4346.7' G.L.		10. FIELD AND POOL, OR WELL NO. 26 TTS RESE 111893	
11. COUNTY OR PARISH Garrett		12. COUNTY OR PARISH Garrett	

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

(NOTE: Report results of multiple completion, fracture completion or recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting and proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and the pertinent to this work.)

12:30 PM 5-31-66 Completion: Tom Brown Drilling Company

**215-66 Cemented 61 Jts 7" 20" CASING AT 1820' WITH 250 SC
3000 + 8% GEL AND 100 SC INCLOR W/2 1/2 GALL 2.
plug down 1:45 AM. CEMENT CIRCULATED.
TESTED CASING TO 1000 PSI HELD O.K.**

18. I hereby certify that the foregoing is true and correct

SIGNED

TITLE

DATE

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

APPROVED

MAY 25 1966

J. L. GORDON
ACTING DISTRICT ENGINEER

UNITED STATES DEPARTMENT OF THE INTERIOR
BUREAU OF GEOLOGICAL SURVEY

MAU31 PR 2 09 PM '66

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" for such proposals.)

1. NAME OF WELL: WELL NO. 1

2. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also page 17 below.)
AT SURFACE: Section 1, Township 3N, Range 10E, T10AS

3. LEASE DESIGNATION AND DATE: Section 1, Township 3N, Range 10E, T10AS

4. UNIT AGREEMENT NO.: Section 1, Township 3N, Range 10E, T10AS

5. FARM OR LEASE NO.: Section 1, Township 3N, Range 10E, T10AS

6. WELL NO.: Section 1, Township 3N, Range 10E, T10AS

7. FIELD AND POOL OR WELLS: Section 1, Township 3N, Range 10E, T10AS

8. SUBS. TO BE DRILLED, RE-DRILLED, OR PLUGGED: Section 1, Township 3N, Range 10E, T10AS

9. COUNTY OR PARCEL NO.: Section 1, Township 3N, Range 10E, T10AS

10. SURVEY OR MAP: Section 1, Township 3N, Range 10E, T10AS

11. ELEVATIONS (Show whether DT, RT, GS, CS.)
AT SURFACE: Section 1, Township 3N, Range 10E, T10AS

12. COUNTY OR PARCEL NO.: Section 1, Township 3N, Range 10E, T10AS

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

NOTICE OF INTENTION TO:

WATER SHUT-OFF ☐
FRACTURE TREATMENT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
(Other) ☐

PULL OR ALTER CASING ☐
MULTIPLE COMPLETION ☐
ABANDON* ☐
CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐
FRACTURE TREATMENT ☐
SHOOT OR ACIDIZING ☐
(Other) ☐

REPAIRING WELL ☐
ALTERING CASING ☐
ABANDONING* ☐

(Note: Report results of multiple completion or well completion or recompletion report and not both.)

13. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting and completing work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all sections and angles pertinent to this work.)

WELL NO. 1 to 1000'. Cement 7" casing to surface with 1000' cement plug 8 1/2" O.D. TAIL IN WITH 1000' NEAR TO SURFACE. TEST Casing to 1000 PSI. Cement 7" casing to 1000' hole to 6100' T.D. Run logs, cement 7" casing to 6100' with 1000' cement plug 8 1/2" O.D. cemented at contact. TAIL IN WITH 1000' INCH SATURATED CEMENT. TEST Casing to 2000 PSI. 2 1/2" CEMENTS AND STIMULATE FOR COMMERCIAL PRODUCTION.

I hereby certify that the foregoing is true and correct

SIGNED

(This space for Federal or State office use)

TITLE

DISTRICT ENGINEER

DATE

5-25-66

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

APPROVED

*See Instructions on Reverse Side

MAY 25 1966

ACTING DISTRICT ENGINEER