

UNITED STATES DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R355.5.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG*

1a. TYPE OF WELL: OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> DRY <input type="checkbox"/> Other <input type="checkbox"/>		7. UNIT AGREEMENT NAME FEDERAL 26	
b. TYPE OF COMPLETION: NEW WELL <input checked="" type="checkbox"/> WORK OVER <input type="checkbox"/> DEEP-EN <input type="checkbox"/> PLUG BACK <input type="checkbox"/> DIFF. RESVR. <input type="checkbox"/> Other <input type="checkbox"/>		8. FARM OR LEASE NAME FEDERAL 26	
2. NAME OF OPERATOR KERN COUNTY LAND COMPANY		9. WELL NO. 7	
3. ADDRESS OF OPERATOR 418 FIRST STATE BANK BLDG MIDLAND TEXAS		10. FIELD AND POOL, OR WILDCAT CHAUVERON - SAN ANDRES	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 1980' FSL ÷ 660 FEL SEC 26 (UNIT I NE/4; SE/4) At top prod. Interval reported below At total depth		11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA 26 T 15 R 33 E NMPM	
14. PERMIT NO.		DATE ISSUED	
15. DATE SPUDDED 6-5-66		16. DATE T.D. REACHED 6-13-66	
17. DATE COMPL. (Ready to prod.) 6-18-66		18. ELEVATIONS (DF, RKB, RT, GE, ETC.)* 4335.5 G.L.	
20. TOTAL DEPTH, MD & TVD 4400		21. PLUG BACK T.D., MD & TVD 4363	
22. IF MULTIPLE COMPL., HOW MANY*		23. INTERVALS DRILLED BY T.D.	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 4140 - 4262 SAN ANDRES		25. WAS DIRECTIONAL SURVEY MADE No	
26. TYPE ELECTRIC AND OTHER LOGS RUN GAMMA RAY NEUTRON		27. WAS WELL CORED No	
28. CASING RECORD (Report all strings set in well)			
CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE
7"	20	1803	8 3/4
4 1/2"	9.5	4400	6 1/4
		CEMENTING RECORD	
		350 CIRC	
		350	
		AMOUNT PULLED	
29. LINER RECORD			
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*
		SCREEN (MD)	
		30. TUBING RECORD	
SIZE		DEPTH SET (MD)	
2 3/8		4148' K.B.	
		PACKER SET (MD)	
		4084	
31. PERFORATION RECORD (Interval, size and number) One 3/8" Hole @ 4140, 4150, 4160, 4165, 4178, 4200, 4214, 4229, 4234, 4257, 4262,		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
		DEPTH INTERVAL (MD)	
		4140- 4262	
		AMOUNT AND KIND OF MATERIAL USED	
		3000 GAL. 15% N.E. Acid	
		FRACED WITH 30,000 GALS.	
		LEASE CRUDE AND 20,000	
		20/40 SAND.	
33. PRODUCTION			
DATE FIRST PRODUCTION 6-13-66		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Flowing	
WELL STATUS (Producing or shut-in) Producing			
DATE OF TEST 6-18-66	HOURS TESTED 2	CHOKE SIZE 30/64	PROD'N. FOR TEST PERIOD →
OIL—BBL. 47.9	GAS—MCF. 22	WATER—BBL. 0	GAS-OIL RATIO 459
FLOW. TUBING PRESS. 140	CASING PRESSURE PKR.	CALCULATED 24-HOUR RATE →	OIL—BBL. 574.8
GAS—MCF. 264	WATER—BBL. 0	OIL GRAVITY-API (CORR.) 26.8	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) VENTED		TEST WITNESSED BY OWEN SMITH	
35. LIST OF ATTACHMENTS			
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records			
SIGNED B.B. Lambford Jr.		TITLE PETROLEUM ENGINEER DATE 6-20-66	

*(See Instructions and Spaces for Additional Data on Reverse Side)

mfp

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

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

Form O-104
Supersedes Old O-104 and O-110
Effective 1-1-67

JUN 21 12 58 PM '66

I. DEVIATION SURVEY ON REVERSE SIDE

KERN COUNTY LAND COMPANY

413 First State Bank Bldg. Midland, Texas

Reasons for filing (check proper box)

Change in Transporter of:

Oil ☐ Dry Gas ☐

Casinghead Gas ☐ Condensate ☐

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Well No. 7 Pool Name, including Formation Chavero-San Andres Kind of Lease Federal

State, Federal or Fee Federal

Unit Letter I 1980 Feet From The South Line and 660 Feet From The East

Range 33E Township 7S Range 33E N.M.P.M. Roosevelt County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐

The Permian Core Address (Give address to which approved copy of this form is to be sent) Box 8119 Midland Texas

Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐

CATMAN, INC. Address (Give address to which approved copy of this form is to be sent) P.O. Box 19598 Dallas, Texas

Is well produces oil or liquids, give location of tanks. Unit I Sec. 26 Twp. 7S 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	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
<u>6-5-66</u>	<u>6-18-66</u>	<u>4400</u>	<u>4565</u>					
Well	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
<u>CHAVEROO</u>	<u>SAN ANDRES</u>	<u>4140</u>	<u>4140</u>					
Perforations		Depth Casing Shoe						
<u>400, 4120, 4160, 4165, 4175, 4200, 4214, 4229, 4286, 4287, 4262</u>		<u>4400</u>						
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
<u>12 1/4"</u>	<u>7"</u>	<u>1300'</u>	<u>350</u>					
<u>6 1/2"</u>	<u>4 1/2"</u>	<u>4400'</u>	<u>350</u>					
	<u>2 3/8"</u>	<u>4140' K.B.</u>						

V. TEST DATA AND REQUEST FOR ALLOWABLE (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)

OIL WELL

Date First New Oil Run To Tanks 6-18-66 Date of Test 6-18-66 Producing Method (Flow, pump, gas lift, etc.) Flow

Length of Test 2HR Tubing Pressure 140 Casing Pressure PER. Choke Size 30/64

Actual Prod. During Test 47.9 Oil-Bbls. 47.9 Water-Bbls. 0 Gas-MCF 22

GAS WELL

Actual Prod. Test-MCF/D Length of Test Bbls. Condensate/MMCF Gravity of Condensate

Testing Method (pitot, back pr.) Tubing Pressure Casing Pressure 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.

B. B. Landford Jr.
(Signature)
Petroleum Engineer
(Title)

6-20-66

OIL CONSERVATION COMMISSION

APPROVED _____, 19____
BY _____
TITLE _____

This form is to be filed in compliance with N.M.C. 1106.

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 Sections I, II, III, and VI only for changes of owner, transporter or other such change of condition.