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HOBBS OFFICE C.C.C.

MAY 19 7 49 AM '66

Form C-105
Revised 1-1-65

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OPERATOR	

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. K-1276
7. Unit Agreement Name
8. Farm or Lease Name STATE D B
9. Well No. 5
10. Field and Pool, or Wildcat CHAUEROO SAN ANDRES

1a. TYPE OF WELL OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> DRY <input type="checkbox"/> OTHER <input type="checkbox"/>
b. TYPE OF COMPLETION NEW <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"/>
2. Name of Operator Pan American Petroleum Corp.
3. Address of Operator Box 68, Hobbs, NM 88240
4. Location of Well UNIT LETTER F LOCATED 1980 FEET FROM THE NORTH LINE AND 1980 FEET FROM THE WEST LINE OF SEC. 25 TWP. 7-S RGE. 33-E NMPM

15. Date Spudded 4-21-66	16. Date T.D. Reached 4-30-66	17. Date Compl. (Ready to Prod.) 5-2-66	18. Elevations (DF, RKB, RT, GR, etc.) 4330 RDB	19. Elev. Casinghead -
20. Total Depth 4415'	21. Plug Back T.D. 4385	22. If Multiple Compl., How Many	23. Intervals Drilled By O-TD	24. Producing interval(s), of this completion - Top, Bottom, Name 4182-4350 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	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
8 5/8	24	442'	11"	250	
4 1/2	4.5	4415'	7 7/8"	800	

29. LINER RECORD				30. TUBING RECORD		
SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN	SIZE	DEPTH SET
					2 3/4	4354

31. Perforation Record (Interval, size and number) 4182-85, 4207-10, 17-19, 31-45, 32-54, 65-67, 73-74, 86-96, 99-430', 03-05, 35-50 w/2JS PF	32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC. DEPTH INTERVAL 4182-4350 2000 gal acid 7 gal, 30000 gal, 40,500 # sand 3000 # BEADS 4335-50 1000 gal acid
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33. PRODUCTION Date First Production 5-12-66		Production Method (Flowing, gas lift, pumping - Size and type pump) FLOWING		Well Status (Prod. or Shut-in) PRODUCING	
Date of Test 5-12-66	Hours Tested 7	Choke Size 14/64	Prod'n. For Test Period →	Oil - Bbl. 54	Gas - MCF 51
Flow Tubing Press. 250	Casing Pressure 425	Calculated 24-Hour Rate →	Oil - Bbl. 186	Gas - MCF 176	Water - Bbl. 0
34. Disposition of Gas (Sold, used for fuel, vented, etc.) VENT				Oil Gravity - API (Corr.) 25.5	

35. List of Attachments NONE	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.
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TITLE Area Supr DATE 5-13-66

0-4 NMCC-N
1-NMCC
1-NMCC
1-NMCC
1-NMCC

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 _____	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 <u>2240</u>	T. Miss _____	T. Cliff House _____	T. Leadville _____
T. 7 Rivers _____	T. Devonian _____	T. Menefee _____	T. Madison _____
T. Queen <u>2940</u>	T. Silurian _____	T. Point Lookout _____	T. Elbert _____
T. Grayburg _____	T. Montoya _____	T. Mancos _____	T. McCracken _____
T. San Andres <u>3420</u>	T. Simpson _____	T. Gallup _____	T. Ignacio Qtzite _____
T. Glorieta _____	T. McKee _____	Base Greenhorn _____	T. Granite _____
T. Paddock _____	T. Ellenburger _____	T. Dakota _____	T. _____
T. Blinberry _____	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
0	1584	1584	Red Bed				
1584	2865	1281	Salt, Anhy				
2865	3198	333	Anhy. Shale Stks				
3198	3720	522	Anhy				
3720	4415	695	Dolo				

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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
(DEVIATIONS - BACK SIDE)

I. Operator: San American Petroleum Corp
Address: Box 68, Hobbs, N M 88240
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: <u>STATE D13</u>	Well No.: <u>5</u>	Pool Name, Including Formation: <u>CHAUEROO SAN ANDRES</u>	Kind of Lease: <u>State, Federal or Fee STATE</u>
Location: Unit Letter: <u>F</u> ; <u>1980</u> Feet From The <u>NORTH</u> Line and <u>1980</u> Feet From The <u>WEST</u> Line of Section: <u>25</u> , Township: <u>7-S</u> , Range: <u>33-E</u> , NMPM, <u>ROOSEVELT</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"/> <u>THE PERMIN CORP (TRUCKS)</u>	Address (Give address to which approved copy of this form is to be sent) <u>Box 3119, Midland Texas</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: <u>D</u> Sec.: <u>25</u> Twp.: <u>7</u> Rge.: <u>33</u>	Is gas actually connected? <u>No</u> 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'v. <input type="checkbox"/>	Diff. Res'v. <input type="checkbox"/>
Date Spudded: <u>4-21-66</u>	Date Compl. Ready to Prod.: <u>5-2-66</u>		Total Depth: <u>4415'</u>		P.B.T.D.: <u>4385'</u>			
Pool: <u>CHAUEROO</u>	Name of Producing Formation: <u>SAN ANDRES</u>		Top Oil/Gas Pay: <u>4182'</u>		Tubing Depth: <u>4354'</u>			
Perforations: <u>4182-85, 4207-10, 17-19, 31-45, 52-54, 65-67, 73-74, 86-96, 99-4301, 03-05, 85-50</u>					Depth Casing Shoe: <u>4415'</u>			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
<u>11"</u>	<u>8 5/8"</u>		<u>442'</u>		<u>250</u>			
<u>7 7/8"</u>	<u>4 1/2"</u>		<u>4415'</u>		<u>800</u>			

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: <u>5-12-66</u>	Date of Test: <u>5-12-66</u>	Producing Method (Flow, pump, gas lift, etc.): <u>Flow</u>	
Length of Test: <u>7 hr</u>	Tubing Pressure: <u>250</u>	Casing Pressure: <u>425</u>	Choke Size: <u>14/64"</u>
Actual Prod. During Test: <u>54</u>	Oil-Bbls.: <u>54</u>	Water-Bbls.: <u>0</u>	Gas-MCF: <u>51</u> (950 GOR 25.5 CF)

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.

013-NMOC-4
1-013P
1-NSW
1-SUSP
1-RR4

(Signature)
AREA Supt

(Title)
5-13-66
(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 Sections I, II, III, and VI only 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

DEVIATIONS

DEPTH	DEGREES OFF
442	$\frac{1}{4}$
962	$\frac{1}{2}$
1461	$\frac{1}{4}$
1838	1 -
2333	1 $\frac{1}{4}$
2811	"
3258	1 $\frac{3}{4}$
3512	1 $\frac{1}{2}$
3951	1 -
4188	1 -
4415	$\frac{3}{4}$

The above are true to the best of my knowledge.

Area Superintendent.

Sworn to this date, the 13th day of May, 1966.

Barbara Sue Hunter

Notary Public in and for LEA Co. N.M.

My Commission Expires 2-5-70