

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPT
(Other instruction.
verse side)

FE*
re-

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

MM-016658

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Off

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Undesignated

11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA

Sec 13-75-35E MMPM

12. COUNTY OR PARISH 13. STATE

Roosevelt

New Mexico

1. OIL WELL ☐ GAS WELL ☒ OTHER **Dry**

2. NAME OF OPERATOR

Tom L. Ingram

3. ADDRESS OF OPERATOR

P. O. Box 1757 - Roswell, New Mexico 88201

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.
See also space 17 below.)
At surface

660' FSL & FEL

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

4196 6r

16. 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 on Well
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 any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Verbal approval to P&A as follows:

Set 25 sx cement plug 4165 - 4259

Cut 4 1/2 casing @ 3700 and pull

Set 25 sx cement plug in top 4 1/2

" " " " " @ 2200 (Top Salt)

" " " " " @ 370 (Base 8 3/8)

" 15 sx " " @ surface

Heavy Mud between plugs

Set Marker

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

SIGNED

TITLE

Operator

DATE **June 23, 1967**

(This space for Federal or State office use)

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:

APPROVED

JUN 26 1967

A. R. BROWN
DISTRICT ENGINEER

DATE

*See Instructions on Reverse Side

Instructions

General: This form is designed for submitting proposals to perform certain well operations, and reports of such operations when completed, as indicated, on Federal and Indian lands pursuant to applicable Federal law and regulations, and, if approved or accepted by any State, on all lands in such State, pursuant to applicable State law and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State office.

Item 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

Item 17: Proposals to abandon a well and subsequent reports of abandonment should include such special information as is required by local Federal and/or State offices. In addition, such proposals and reports should include reasons for the abandonment; data on any former or present productive zones, or other zones with present significant fluid contents not sealed off by cement or otherwise; depths (top and bottom) and method of placement of cement plugs; mud or other material placed below, between and above plugs; amount, size, method of parting of any casing, liner or tubing pulled and the depth to top of any left in the hole; method of closing top of well; and date well site conditioned for final inspection looking to approval of the abandonment.

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE

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

(See other in-

structions on

Form 9-330

Form 9-330

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WELL COMPLETION OR RECOMPLETION REPORT AND LOG

1a. TYPE OF WELL:		OIL WELL ☐	GAS WELL ☐	DRY ☒	Other ☐		
b. TYPE OF COMPLETION:		NEW WELL ☒	WORK OVER ☐	DEEP-EN ☐	PLUG BACK ☐	DIFF. RESVR. ☐	Other ☐
2. NAME OF OPERATOR						7. UNIT AGREEMENT NAME	
Tom L. Ingram						--	
3. ADDRESS OF OPERATOR						8. FARM OR LEASE NAME	
P. O. Box 1757 - Roswell, New Mexico						OFF	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*						9. WELL NO.	
At surface 660' FSL & FEL, Sec. 13-75-35E, N.M.P.M.						1	
At top prod. interval reported below Same						10. FIELD AND POOL, OR WILDCAT	
At total depth Same						Undesignated	
14. PERMIT NO.						12. COUNTY OR PARISH	
--						Roosevelt	
DATE ISSUED						13. STATE	
--						New Mexico	
15. DATE SPUDDED	16. DATE T.D. REACHED	17. DATE COMPL. (Ready to prod.)	18. ELEVATIONS (DF, RKB, RT, GR, ETC.)*		19. ELEV. CASINGHEAD		
9-30-66	10-11-66	10-24-66	4196 GF				
20. TOTAL DEPTH, MD & TVD	21. PLUG, BACK T.D., MD & TVD	22. IF MULTIPLE COMPL., HOW MANY*	23. INTERVALS DRILLED BY		ROTARY TOOLS		
4350'			Surface to TD		CABLE TOOLS		
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*						25. WAS DIRECTIONAL SURVEY MADE	
None						No	
26. TYPE ELECTRIC AND OTHER LOGS RUN						27. WAS WELL CORED	
Formation Density, Laterolog, Microlaterolog, Sonic						Yes	
28. CASING RECORD (Report all strings set in well)							
CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD		AMOUNT PULLED	
8-5/8"	24#	362	11"	200 sacks		Circulated	
4-1/2"	11.60#	4350'	7-7/8"	125 sacks		1116'	
29. LINER RECORD							
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	30. TUBING RECORD		
					SIZE	DEPTH SET (MD)	PACKER SET (MD)
31. PERFORATION RECORD (Interval, size and number)							
1 shot per foot - 4280, 4283, 4301, 4304, 4310, 4320 and 4324				32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
1 shot per foot - 4165, 4169, 4175, 4181, 4185, 4205, 4209, 4222, 4227, 4228, 4233, 4236				DEPTH INTERVAL (MD)			
				4280-4324			
				4280-4324			
				4165-4259			
				Acidized w/2000 gallons			
				Squeezed w/100 sacks cement			
				Acidized w/2500 gallons			
33.* PRODUCTION							
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)				WELL STATUS (Producing or shut-in)	
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)						TEST WITNESSED BY	
35. LIST OF ATTACHMENTS							
Logs, Core Description, Hole Deviation Survey							
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records							
SIGNED		TITLE		DATE		11-28-66	
Tom L. Ingram		Operator					

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

INSTRUCTIONS

General: This form is designed for submitting a complete and correct well completion report and log on all types of lands and leases to either a Federal agency or a State agency, or both, pursuant to applicable Federal and/or State laws and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State office. See instructions on items 22 and 24, and 33, below regarding separate reports for separate completions.

If not filed prior to the time this summary record is submitted, copies of all currently available logs (drillers, geologists, sample and core analysis, all types electric, etc.), formation and pressure tests, and directional surveys, should be attached hereto, to the extent required by applicable Federal and/or State laws and regulations. All attachments should be listed on this form, see item 35.

Item 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

Item 18: Indicate which elevation is used as reference (where not otherwise shown) for depth measurements given in other spaces on this form and in any attachments.

Items 22 and 24: If this well is completed for separate production from more than one interval zone (multiple completion), so state in item 22, and in item 24 show the producing interval, or intervals, top(s), bottom(s) and name(s) (if any) for only the interval reported in item 33. Submit a separate report (page) on this form, adequately identified, for each additional interval to be separately produced, showing the additional data pertinent to such interval.

Item 29: "Sacks Cement": Attached supplemental records for this well should show the details of any multiple stage cementing and the location of the cementing tool.

Item 33: Submit a separate completion report on this form for each interval to be separately produced. (See instruction for items 22 and 24 above.)

37. SUMMARY OF POROUS ZONES:

SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF: CORED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CUSHION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	GEOLOGIC MARKERS		
				NAME	MEAS. DEPTH	TRUE VERT. DEPTH
	0 200 2134 2280 2395 3530	200 2134 2280 2395 3530 4250	Surface sand and Collicite Red Beds and Sands Anhydrite Salt and Anhydrite Sand, Shale and Anhydrite Dolomite	Rustler Yates San Andres	2134 2395 3530	
			Set 25-sack plug 4165 to 4259, 25-sack plug in and out 4-1/2" at 1116', 25-sack plug at base of 8-5/8", 15-sack plug at surface and marker set. Mud used between plugs.			

DEC 6 10 55 AM '66

My Commission Expires: March 4, 1969

HOBBS OFFICE O. C. C.

DEC 6 10 55 AM '66

TOM L. INGRAM
NO. 1 OFF

CORE NO. 1: 4270-4350 - Recovered 80' Anhydrite and Dolomite with scattered bleeding oil and water.

Form 9-331
(May 1963)

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUNDY 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" for such proposals.)

SUBMIT IN TRIPL
(Other instructions
verse side)

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re

5. LEASE DESIGNATION
NM 016658

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
OFF

9. WELL NO.
1

10. FIELD AND POOL, OR WILDCAT

Todd-San Andres (Undesignate)

11. SEC. T., R., M., OR BLK. AND
SURVEY OR AREA

Sec. 13-75-35E

12. COUNTY OR PARISH
Roosevelt

13. STATE
New Mex.

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR
Tom L. Ingram

3. ADDRESS OF OPERATOR
P. O. Box 1757 - Roswell, New Mexico

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.)
680' FSL & FEL, Sec. 13-75-35E, N.M.P.M.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
4196 GL

14. PERMIT NO.
--

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

16. 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

WATER SHUT-OFF
FRACTURE TREATMENT
SHOOTING OR ACIDIZING
(Other)

SUBSEQUENT REPORT OF:

REPAIRING WELL
ALTERING CASING
ABANDONMENT*

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

Set 140 joints 4-1/2" 11.60W J-55 casing at 4350' with 125 sacks 50-50 Poz Mix. WOC 48 hours. Casing tested to 2000 psi for 30 minutes, held okay.

Com

Set
circ

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

SIGNED Martha J. West

TITLE Clerk

18. I hereby certi

SIGNED m

(This space for

APPROVED BY
CONDITIONS O

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

See Instructions on Reverse Side

Instructions

perform certain well operations, and reports of such operations when completed, as indicated, on Federal and Indian lands pursuant to applicable regulations, and, if approved or accepted by any State, on all lands in such State, pursuant to applicable State law and regulations. Any need and subsequent reports of abandonment should include such special information as is required by local Federal and/or State offices. local, area, or regional procedure, or otherwise; depths (top and bottom) and method of placement of cement plugs; mud or other material placed below, between and Item 4: If there are looking to approval of the abandonment. Consult local State or Federal office.

Item
In

on Federal
applicable
regard to
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significant
een and
well site

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

STANDARD INSTRUCTIONS
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R1425.

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. TYPE OF WORK DRILL ☒ DEEPEN ☐ PLUG BACK ☐		5. LEASE DESIGNATION AND SERIAL NO. NM 016858	
b. TYPE OF WELL OIL WELL ☒ GAS WELL ☐ OTHER ☐		6. IF INDIAN, ALLOTTEE OR TRIBE NAME -	
2. NAME OF OPERATOR Tom L. Ingram		7. UNIT AGREEMENT NAME -	
3. ADDRESS OF OPERATOR P. O. Box 1757 - Roswell, New Mexico		8. FARM OR LEASE NAME OFF	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.) At surface 660' FSL & FEL, Sec. 13, T-7-S, R-35-E, N.M.P.M. At proposed prod. zone Same		9. WELL NO. 1	
14. DISTANCE IN MILES AND DIRECTION FROM NEAREST TOWN OR POST OFFICE* 4 miles northeast of Milnesand, New Mexico		10. FIELD AND POOL, OR WILDCAT Toda-San Andres (Undesignated)	
15. DISTANCE FROM PROPOSED* LOCATION TO NEAREST PROPERTY OR LEASE LINE, FT. (Also to nearest drlg. line, if any) 660'		11. SEC., T., E., M., OR BLK. AND SURVEY OR AREA Sec. 13-75-35E	
16. NO. OF ACRES IN LEASE 2385.72		12. COUNTY OR PARISH Roosevelt	
17. NO. OF ACRES ASSIGNED TO THIS WELL 80		13. STATE New Mexico	
18. DISTANCE FROM PROPOSED LOCATION* TO NEAREST WELL, DRILLING, COMPLETED, OR APPLIED FOR, ON THIS LEASE, FT. 6000'		19. PROPOSED DEPTH 4500'	
20. ROTARY OR CABLE TOOLS Rotary Tools		21. APPROX. DATE WORK WILL START* September 29, 1966	
22. ELEVATIONS (Show whether DF, RT, GR, etc.)			

PROPOSED CASING AND CEMENTING PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	QUANTITY OF CEMENT
11"	8-5/8"	24#	350	250
7-7/8"	4-1/2"	9.5#	4500	250

Drill to 4500', log and if productive set casing, perforate, stimulate and complete.

Operator will drill this well under Glen F. Featherstone's bond.

Designation of Operator is attached.

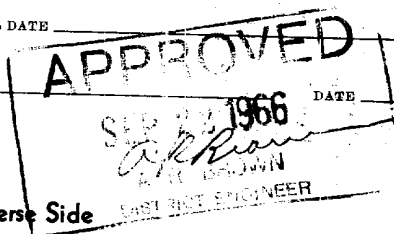
Blowout Preventer: 900 series

IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM: If proposal is to deepen or plug back, give data on present productive zone and proposed new productive zone. If proposal is to drill or deepen directionally, give pertinent data on subsurface locations and measured and true vertical depths. Give blowout preventer program, if any.

24. SIGNED Tom L. Ingram TITLE Operator DATE Sept. 21, 1966

(This space for Federal or State office use)

PERMIT NO. _____ APPROVAL DATE _____
APPROVED BY _____ TITLE _____
CONDITIONS OF APPROVAL, IF ANY: _____



*See Instructions On Reverse Side

Instructions

General: This form is designed for submitting proposals to perform certain well operations, as indicated, on all types of lands and leases for appropriate action by either a Federal or a State agency, or both, pursuant to applicable Federal and/or State laws and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State office.

Item 1: If the proposal is to redrill to the same reservoir at a different subsurface location or to a new reservoir, use this form with appropriate notations. Consult applicable State or Federal regulations concerning subsequent work proposals or reports on the well. Consult local

Item 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

Item 14: Needed only when location of well cannot readily be found by road from the land or lease description. A plat, or plats, separate or on this reverse side, showing the roads to, and the surveyed location of, the well, and any other required information, should be furnished when required by Federal or State agency offices.

Items 15 and 18: If well is to be, or has been directionally drilled, give distances for subsurface location of hole in any present or objective production zone.

Item 22: Consult applicable Federal or State regulations, or appropriate officials, concerning approval of the proposal before operations are started.

NEW MEXICO OIL CONSERVATION COMMISSION
WELL LOCATION AND ACREAGE DEDICATION PLAT

Form C-102
Supersedes C-128
Effective 1-4-65

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

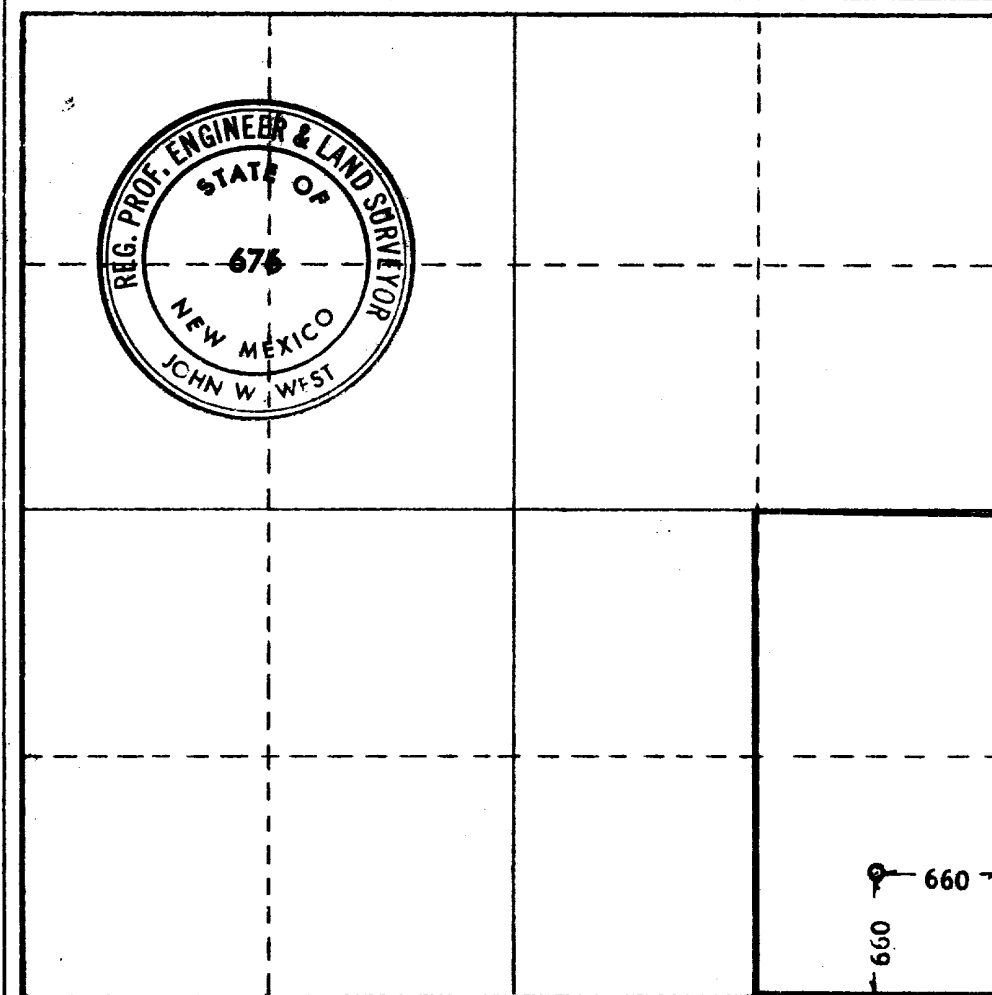
Operator TOM L. INGRAM			Lease OFF			SEP 27 10 17 AM '66			Plat No. 1			
Unit Letter P	Section 13	Township 7 SOUTH		Range 35 EAST	County ROOSEVELT COUNTY							
Actual Footage Location of Well:												
660		feet from the SOUTH		line and 660		feet from the EAST		line				
Ground Level Elev.		Producing Formation San Andres			Pool Todd (Undesignated)			Dedicated Acreage: 80 Acres				

1. Outline the acreage dedicated to the subject well by colored pencil or hachure 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 _____

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.

Tom L. Ingram

Name

TOM L. INGRAM

Position

Operator

Company

TOM L. INGRAM

Date

September 19, 1966

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

9-16-66

Registered Professional Engineer and/or Land Surveyor

John W. West

Certificate No.

676

0 330 660 990 1320 1650 1980 2310 2640 2970 3300 3630 3960 4290 4620 4950 5280 5610 5940 6270 6600