

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-116
Effective 1-1-65

DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

Operator Tom L. Ingram		CASINGHEAD GAS MUST NOT BE PLACED AFTER 11/4/79 UNLESS AN EXCEPTION TO R-4070 IS OBTAINED.
Address P. O. Box 1757, Roswell, NM 88201		
Reason(s) for filing (Check proper box) New Well <input checked="" type="checkbox"/> Change in Transporter of: Recompletion <input type="checkbox"/> Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Change in Ownership <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>		

If change of ownership give name
and address of previous owner

THIS WELL HAS BEEN PLACED IN THE POOL
DESIGNATED BELOW. IF YOU DO NOT CONCUR
NOTIFY THIS OFFICE.

II. DESCRIPTION OF WELL AND LEASE

Lease Name HINTON	Well No. 1	Pool Name, including Formation Bluitt San Andres Associated R-6170	Kind of Lease State, Federal or Fee Fee	Lease No.
Location Unit Letter A 660 Feet From The North Line and 660 Feet From The East Line of Section 22 Township 8-S Range 37-E, NMPM, Roosevelt 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"/> Permian Corporation	Address (Give address to which approved copy of this form is to be sent) P. O. Box 3119, Midland, TX 79702					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Warren Petroleum Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1589, Tulsa, OK 74102					
If well produces oil or liquids, give location of tanks.	Unit A	Sec. 22	Twp. 8-S	Rge. 37-E	Is gas actually connected? No	When Estimated by 10/1/79

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	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'tv.	Diff. Res'tv.
Date Spudded 3-3-76	Date Compl. Ready to Prod. 9-4-79		Total Depth 4930		P.B.T.D. 4913			
Elevations (DF, RKB, RT, GR, etc.) 4018 KB	Name of Producing Formation San Andres		Top Oil/Gas Pay 4753		Tubing Depth 4680			
Perforations 4753, 57, 61, 73, 77; 4806, 07, 11, 16, 17, 18, 19, 22, 28, 30, 31, 32, 44, 47	Is gas actually connected? No				When Estimated by 10/1/79			

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
11"	8 5/8"	365	350 (Circ)
7 7/8"	5 1/2"	4930	250
	2 3/8"	4680	

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)

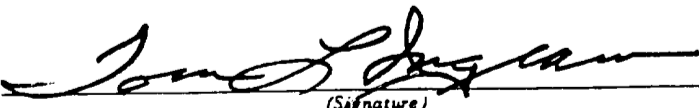
Date First New Oil Run To Tanks 9/4/79	Date of Test 9/4/79	Producing Method (Flow, pump, gas lift, etc.) Flow	
Length of Test 24 hrs	Tubing Pressure 800	Casing Pressure 1000	Choke Size 20/64
Actual Prod. During Test	Oil - Bbls. 25	Water - Bbls. 2	Gas - MCF 500

GAS WELL

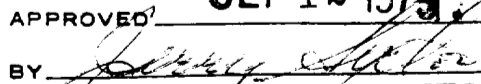
Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

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.


(Signature)
Operator
(Title)
9/10/79
(Date)

OIL CONSERVATION COMMISSION

APPROVED SEP 12 1979, 19
BY 
TITLE SUPERVISOR DISTRICT 1

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 multiple

RAILROAD COMMISSION OF TEXAS
OIL AND GAS DIVISION

Form W-12
(1-1-71)

INCLINATION REPORT (One Copy Must Be Filed With Each Completion Report.)		6. RRC District 8-A
		7. RRC Lease Number. (Oil completions only)
1. FIELD NAME (as per RRC Records or Wildcat) Bluitt San Andres Assoc.	2. LEASE NAME Hinton	8. Well Number 1
3. OPERATOR Tom L. Ingram		9. RRC Identification Number (Gas completions only)
4. ADDRESS P. O. Box 1757, Roswell, New Mexico 88201		10. County Roosevelt
5. LOCATION (Section, Block, and Survey) Section 22, T8S, R37E		

RECORD OF INCLINATION

11. Measured Depth (feet)	12. Course Length (Hundreds of feet)	13. Angle of Inclination (Degrees)	14. Displacement per Hundred Feet (Sine of Angle X100)	15. Course Displacement (feet)	16. Accumulative Displacement (feet)
365	3.65	1.00	1.75	6.39	6.39
840	4.75	1.00	1.75	8.31	14.70
1,340	5.00	1.00	1.75	8.75	23.45
1,822	4.82	0.75	1.31	6.31	29.76
2,796	9.74	0.75	1.31	12.76	42.52
3,150	3.54	1.00	1.75	6.20	48.72
3,366	2.15	1.00	1.75	3.78	52.50
3,525	1.59	1.00	1.75	2.78	55.28
3,909	3.84	2.00	3.50	13.44	68.72
4,215	3.06	2.00	3.50	10.71	79.43
4,510	2.95	1.75	3.06	9.03	88.46
4,930	4.20	1.00	1.75	7.35	95.81

If additional space is needed, use the reverse side of this form.

17. Is any information shown on the reverse side of this form? ☐ yes ☒ no
18. Accumulative total displacement of well bore at total depth of 4,930 feet = 95.81 feet.
19. Inclination measurements were made in - ☐ Tubing ☐ Casing ☐ Open hole ☒ Drill Pipe
20. Distance from surface location of well to the nearest lease line _____ feet.
21. Minimum distance to lease line as prescribed by field rules _____ feet.
22. Was the subject well at any time intentionally deviated from the vertical in any manner whatsoever? no
- (If the answer to the above question is "yes", attach written explanation of the circumstances.)

INCLINATION DATA CERTIFICATION

I declare under penalties prescribed in Article 6036c, R.C.S., that I am authorized to make this certification, that I have personal knowledge of the inclination data and facts placed on both sides of this form and that such data and facts are true, correct, and complete to the best of my knowledge. This certification covers all data as indicated by asterisks (*) by the item numbers on this form.

Signature of Authorized Representative
Pat McCutchin
Name of Person and Title (type or print)
Pat McCutchin - Office Manager
Name of Company
Verna Drilling Company
Telephone: 806 894-4992
Area Code

OPERATOR CERTIFICATION

I declare under penalties prescribed in Article 6036c, R.C.S., that I am authorized to make this certification, that I have personal knowledge of all information presented in this report, and that all data presented on both sides of this form are true, correct, and complete to the best of my knowledge. This certification covers all data and information presented herein except inclination data as indicated by asterisks (*) by the item numbers on this form.

Signature of Authorized Representative
Tom L. Ingram
Name of Person and Title (type or print)
Tom L. Ingram
Operator
505 622-3630
Telephone: Area Code

Railroad Commission Use Only

Approved By: _____ Title: _____ Date: _____

**RAILROAD COMMISSION OF TEXAS
OIL AND GAS DIVISION**

Form W-12
(1-1-71)

INCLINATION REPORT (One Copy Must Be Filed With Each Completion Report.)		6. RRC District 8-A
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3. OPERATOR Tom L. Ingram		8. Well Number 1
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Pat M. McCutchin
 Signature of Authorized Representative
Pat McCutchin - Office Manager
 Name of Person and Title (type or print)
Verna Drilling Company
 Name of Company
 Telephone: 806 894-4992
 Area Code

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Tom L. Ingram
 Signature of Authorized Representative
Tom L. Ingram - Operator
 Name of Person and Title (type or print)
Tom L. Ingram
 Operator
 Telephone: 505 622-3630
 Area Code

Railroad Commission Use Only

Approved By: _____ Title: _____ Date: _____

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LAND OFFICE	
OPERATOR	

**NEW MEXICO OIL CONSERVATION COMMISSION
WELL COMPLETION OR RECOMPLETION REPORT AND LOG**

Form C-105
Revised 11-1-76

1a. TYPE OF WELL		OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> DRY <input type="checkbox"/> OTHER _____		5a. Indicate Type of Lease State <input type="checkbox"/> Fee <input checked="" type="checkbox"/>	
b. TYPE OF COMPLETION NEW WELL <input checked="" type="checkbox"/> WORK OVER <input type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input type="checkbox"/> DIFF. RESVR. <input type="checkbox"/> OTHER _____				5. State Oil & Gas Lease No.	
2. Name of Operator Tom L. Ingram				7. Unit Agreement Name	
3. Address of Operator P. O. Box 1757, Roswell, NM 88201				8. Farm or Lease Name Hinton	
4. Location of Well UNIT LETTER <u>A</u> LOCATED <u>660</u> FEET FROM THE <u>North</u> LINE AND <u>660</u> FEET FROM THE <u>East</u> LINE OF SEC. <u>22</u> TWP. <u>8-S</u> RGE. <u>37-E</u> NMPM				9. Well No. 1	
				10. Field and Pool, or Wildcat Undesignated-SA	
				12. County Roosevelt	
15. Date Spudded 3-3-76	16. Date T.D. Reached 3-14-76	17. Date Compl. (Ready to Prod.)	18. Elevations (DF, RKB, RT, GR, etc.) 4018 KB	19. Elev. Casinghead	
20. Total Depth 4930	21. Plug Back T.D. 4913	22. If Multiple Compl., How Many	23. Intervals Drilled By Rotary Tools 0-TD	25. Was Directional Survey Made No	
24. Producing Interval(s), of this completion — Top, Bottom, Name 4753, 4847, San Andres				26. Type Electric and Other Logs Run SNP & DLL	
				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#	365	11	350	Circulated
5-1/2	15#	4930	7-7/8	250	
29. LINER RECORD					
SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN	
30. TUBING RECORD					
SIZE	DEPTH SET	PACKER SET			
2-3/8	4680	4680			
31. Perforation Record (Interval, size and number)			32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.		
4753, 57, 61, 73, 77; 0.48; 10 holes			DEPTH INTERVAL		
4806, 11, 19, 28, 32, 44, 47; 0.48; 7 holes			AMOUNT AND KIND MATERIAL USED		
4807, 16, 17, 18, 22, 30, 31; 0.48; 7 holes			4806-47 A/2500, Re A/7500		
			4753-77 A/5000		
33. PRODUCTION					
Date First Production		Production Method (Flowing, gas lift, pumping — Size and type pump)			Well Status (Prod. or Shut-in)
		Flowing			Shut-in
Date of Test	Hours Tested	Choke Size	Prod'n. For Test Period	Oil — Bbl.	Gas — MCF
2-1-78	4 hrs.	16/64		1	100
Flow Tubing Press.	Casing Pressure	Calculated 24-Hour Rate	Oil — Bbl.	Gas — MCF	Water — Bbl.
1000	1250				
34. Disposition of Gas (Sold, used for fuel, vented, etc.)					Test Witnessed By
No Contract					
35. List of Attachments Logs & Inclination Report (Both filed 3-17-77. See attached letter.)					
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.					
SIGNED <u>Tom L. Ingram</u>		TITLE <u>Operator</u>		DATE <u>2-21-78</u>	

INSTRUCTIONS

This form is to be filled with the appropriate District Office of the Commission not later than 30 days after the completion of any newly-drilled or deepened well. It shall be accompanied by a copy of all electrical and radio-activity logs run in 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 <u>2335</u>	T. Canyon _____	T. Ojo Alamo _____	T. Penn. "B" _____
T. Salt _____	T. Strawn _____	T. Kirtland-Fruitland _____	T. Penn. "C" _____
T. Salt _____	T. Atoka _____	T. Pictured Cliffs _____	T. Penn. "D" _____
T. Yates <u>2813</u>	T. Miss _____	T. Cliff House _____	T. Leadville _____
T. 7 Rivers _____	T. Devonian _____	T. Menefee _____	T. Madison _____
T. Queen _____	T. Silurian _____	T. Point Lookout _____	T. Elbert _____
T. Grayburg _____	T. Montoya _____	T. Mancos _____	T. McCracken _____
T. San Andres <u>4054</u>	T. Simpson _____	T. Gallup _____	T. Ignacio Qtzte _____
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. _____

OIL OR GAS SANDS OR ZONES

No. 1, from 4753 to 4847 No. 4, from _____ to _____

No. 2, from _____ to _____ No. 5, from _____ to _____

No. 3, from _____ to _____ No. 6, from _____ to _____

IMPORTANT WATER SANDS

Include data on rate of water inflow and elevation to which water rose in hole.

No. 1, from _____ to _____ feet

No. 2, from _____ to _____ feet

No. 3, from _____ to _____ feet

No. 4, from _____ to _____ feet

FORMATION RECORD (Attach additional sheets if necessary)

From	To	Thickness in Feet	Formation	From	To	Thickness in Feet	Formation
0	275	275	Surface sds & caliche				
275	2335	2060	Red beds, sands				
2335	2380	45	Anhydrite				
2380	2813	433	Salt & anhydrite				
2813	4054	1241	Sand, shale, anhydrite				
4054	4930	876	Dolomite				

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HOBBS, N. M.

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LAND OFFICE		
OPERATOR		

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

5a. Indicate Type of Lease	
State <input type="checkbox"/>	Fee <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.	

SUNDRY 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 -" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- <input type="checkbox"/>		7. Unit Agreement Name
2. Name of Operator TOM L. INGRAM		8. Farm or Lease Name HINTON
3. Address of Operator POB 1757, ROSWELL, NEW MEXICO 88201		9. Well No. #1
4. Location of Well UNIT LETTER <u>A</u> <u>660</u> FEET FROM THE <u>North</u> LINE AND <u>660</u> FEET FROM THE <u>East</u> LINE, SECTION <u>22</u> TOWNSHIP <u>8-S</u> RANGE <u>37-E</u> NMPM.		10. Field and Pool, or Wildcat Bluitt San Andres Assoc
15. Elevation (Show whether DF, RT, GR, etc.) 4900		12. County Lea

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input type="checkbox"/>
OTHER <input type="checkbox"/>	OTHER <u>Testing</u> <input checked="" type="checkbox"/>
PLUG AND ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
CHANGE PLANS <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

4/1/76 thru 3/14/77: Recovering load and small amount of gas. This is being done on an intermittent basis, allowing well to build up pressure and then flow load.

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED Tom Ingram TITLE Operator DATE 3/15/77

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

MAR 22 1977

**RAILROAD COMMISSION OF TEXAS
OIL AND GAS DIVISION**

Form W-12
(1-1-71)



INCLINATION REPORT <small>(One Copy Must Be Filed With Each Completion Report.)</small>			6. RRC District 8-A
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5. LOCATION (Section, Block, and Survey) Section 22, T8S, R37E		10. County Roosevelt	

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--	---

Railroad Commission Use Only:

Approved By: _____ Title: _____ Date: _____

* Designates items certified by company that conducted the inclination surveys.

RECEIVED

MAY 1, 1977

U.S. DEPARTMENT OF COMMERCE
BUREAU OF ECONOMIC ANALYSIS

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OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION

Form 1-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

5a. Indicate Type of Lease
State ☐ Fee ☒
5. State Oil & Gas Lease No.

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1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name
2. Name of Operator TOM L INGRAM	8. Farm or Lease Name HINTON
3. Address of Operator POB 1757, ROSWELL, NEW MEXICO 88201	9. Well No. #1
4. Location of Well UNIT LETTER A 660 FEET FROM THE North LINE AND 660 FEET FROM THE East LINE, SECTION 22 TOWNSHIP 8-S RANGE 37E N.M.P.M.	10. Field and Pool, or Wildcat Bluitt San Andres Assoc
15. Elevation (Show whether DF, RT, GR, etc.) 4900	12. County Lea

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input checked="" type="checkbox"/>	OTHER <input type="checkbox"/>

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

3/14 thru 3/31/76: Total Depth 4930. Ran 5½" 15# J-55 csg. to 4930 and cemented with 250 sx. WOC 96 hrs. Tested csg. & shoe to 2000 psi for 30 minutes. Held ok. Perforated 4806-47 and 4753-77 with 2 shots per foot. Acidized with 15,000 gals. Now swabbing.

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED Tom L Ingram TITLE Operator DATE 4/7/76

APPROVED BY [Signature] TITLE Supervisor DATE APR 9 1976

CONDITIONS OF APPROVAL, IF ANY:

NO. OF COPIES RECEIVED	
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SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

5a. Indicate Type of Lease	
State <input type="checkbox"/>	Fee <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.	

SUNDRY 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 -" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- <input type="checkbox"/>		7. Unit Agreement Name
2. Name of Operator TOM L. INGRAM		8. Farm or Lease Name Hinton
3. Address of Operator POB 1757		9. Well No. 1
4. Location of Well UNIT LETTER A 660 FEET FROM THE North LINE AND 660 FEET FROM THE East LINE, SECTION 22 TOWNSHIP 8S RANGE 37E NMPM.		10. Field and Pool, or Wildcat Bluitt San Andres Assoc
15. Elevation (Show whether DF, RT, GR, etc.) 4008 GR		12. County Lea

16.

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>

SUBSEQUENT REPORT OF:

REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input checked="" type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
CASING TEST AND CEMENT JOB <input checked="" type="checkbox"/>	OTHER <input type="checkbox"/>

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1703.

Commenced drilling on 3/3/76.

3/4/76 Set 8-5/8" 24# J-55 csg. @ 365' and cemented with 350 sx. of Cl. C cement with 2% Cal. Chloride. Circulated approximately 50 sx. WOC 18 hrs. Tested csg. & shoe to 600 psi for 30 min. Held ok.

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED Tom L. Ingram TITLE Operator DATE 3/11/76

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

NO. OF COPIES RECEIVED	
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SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-101
Revised 1-1-65

5A. Indicate Type of Lease	
STATE <input type="checkbox"/>	FEE <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.	

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work		7. Unit Agreement Name	
b. Type of Well OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		8. Farm or Lease Name HINTON	
2. Name of Operator TOM L. INGRAM		9. Well No. 1	
3. Address of Operator POB 1757, ROSWELL, NEW MEXICO 88201		10. Field and Pool, or Wildcat Undesignated	
4. Location of Well UNIT LETTER A LOCATED 660 FEET FROM THE North LINE AND 660 FEET FROM THE East LINE OF SEC. 22 TWP. 8-S RGE. 37E NMPM		12. County Lea	
19. Proposed Depth 4900		19A. Formation San Andres	20. Rotary or C.T. RT
21. Elevations (Show whether DF, RT, etc.) 4008 GR	21A. Kind & Status Plug. Bond Statewide	21B. Drilling Contractor Verna	22. Approx. Date Work will start 3-1-76

PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
11	8-5/8	24#	350	300	Circulate
7-7/8	5 1/2	15.5#	4900	250	3000

Drill to total depth, log, run casing, perforate, stimulate and complete.

Blow-out Preventor: Schafer 10" Series 900 Double

APPROVAL VALID
FOR 90 DAYS UNLESS
DRILLING COMMENCED,
EXPIRES 5-16-76

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. GIVE BLOWOUT PREVENTER PROGRAM, IF ANY.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

Signature Tom L. Ingram Title OPERATOR Date 2/12/76

(This space for State Use)

APPROVED BY Jerry L. Lott TITLE COMMISSIONER DATE 2/12/76

CONDITIONS OF APPROVAL, IF ANY:

RECEIVED

FEB 1 1975

FBI - CONSIDERATION OF COMM.

FEB 25, 1975

**NEW MEXICO OIL CONSERVATION COMMISSION
WELL LOCATION AND ACREAGE DEDICATION PL.**

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

All distances must be from the outer boundaries of the Section

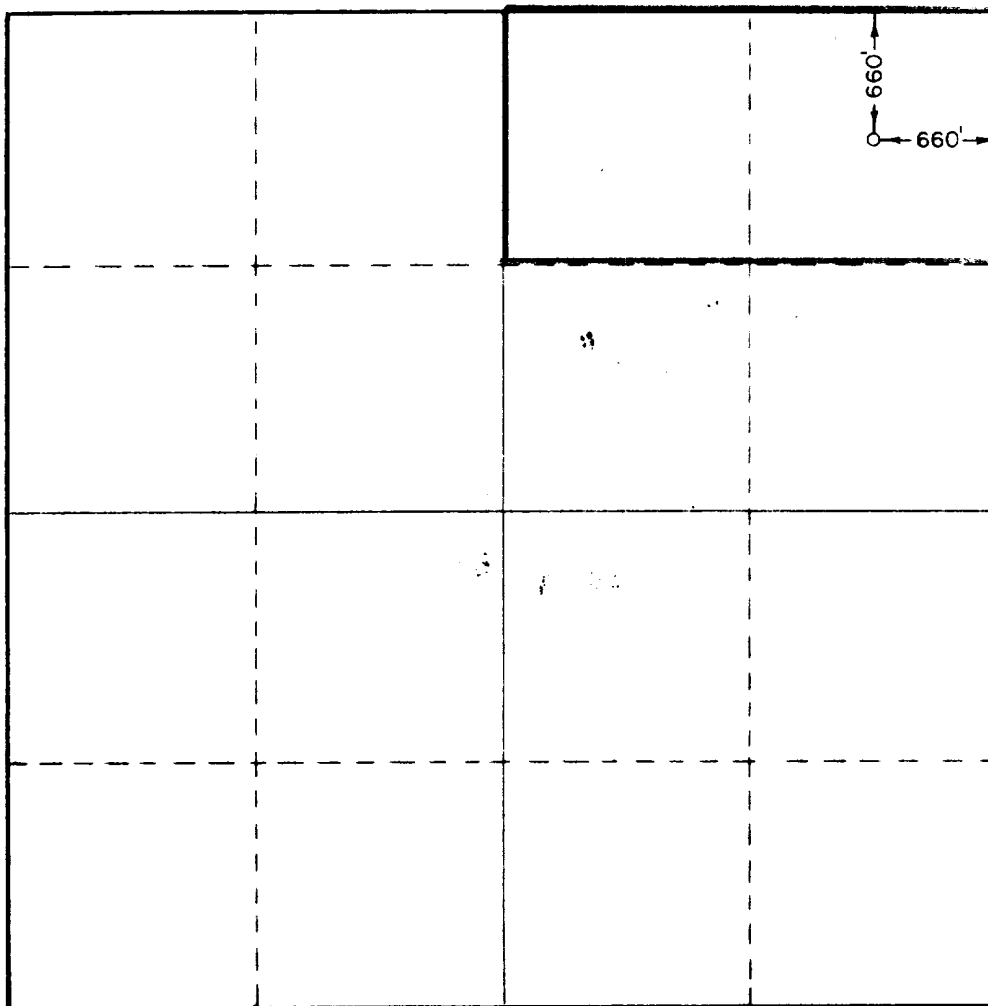
Operator Tom L. Ingram			Lease Hinton		Well No. 1
Tract Letter A	Section 22	Township 8 South	Range 37 East	County Roosevelt	
Actual Footage Location of Well: 660 feet from the North line and 660 feet from the East line					
Ground Level Elev 4008.6	Producing Formation SAN ANDRES		Pool BLUITT SAN ANDRES		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.



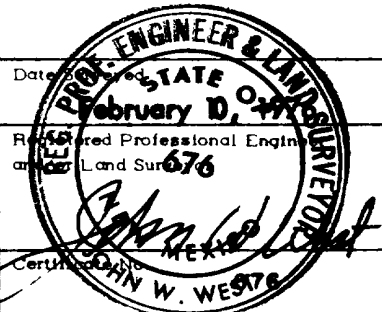
CERTIFICATION

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.

Name
TOM L. INGRAM
Position
Tom L. Ingram
Company
TOM L. INGRAM

Date
FEBRUARY 12, 1976

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.



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

RECEIVED

FEB 16 1976

OIL CONSERVATION COMM.
BOBBS, N. M.

173