

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 ☒ GAS WELL ☐ DRY ☐ Other _____

b. TYPE OF COMPLETION:

NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other _____

2. NAME OF OPERATOR

SUNDANCE OIL COMPANY

3. ADDRESS OF OPERATOR

Suite 510, 1776 Lincoln Street, Denver, CO 80203

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)

At surface 1980' FSL, 1980' FEL, Unit J

At top prod. interval reported below

At total depth

Same

14. PERMIT NO.

DATE ISSUED

6/21/79

15. DATE SPUDDED

7/12/79

16. DATE T.D. REACHED

7/21/79

17. DATE COMPL. (Ready to prod.)

8/31/79

18. ELEVATIONS (DF, RKB, RT, GR, ETC.)*

4462' GL

19. ELEV. CASINGHEAD

Same

20. TOTAL DEPTH, MD & TVD

4375'

21. PLUG, BACK T.D., MD & TVD

4340'

22. IF MULTIPLE COMPL.,
HOW MANY*

Single

23. INTERVALS
DRILLED BY

ROTARY TOOLS

All

CABLE TOOLS

None

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*

4185-4247', P-2 zone of the San Andres Formation

25. WAS DIRECTIONAL
SURVEY MADE

Yes

26. TYPE ELECTRIC AND OTHER LOGS RUN

Schlumberger SNP

27. WAS WELL CORED

No

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	1775	12 1/4"	500 sx	None
4 1/2"	10.5	4375	7 7/8"	300 sx	None

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					2 3/8"	4248'	N/A

31. PERFORATION RECORD (Interval, size and number)

4292-4300' w/2 spf	4210-12' w/2 spf
4309-13' w/2 spf	4243-47' w/2 spf
4185-90' w/2 spf	
4194-4200' w/2 spf	

32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
4292-4313'	5000 gal. 20%NE+50ball sealers
4185-4247'	5000 gal. 20%NE+36ball sealers

33.* PRODUCTION

DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)				WELL STATUS (Producing or shut-in)	
8/31/79		Pumping				Producing	
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
8/31/79	24 hrs.	N/A	→	155	111	15	716:1
FLOW, TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)	
N/A	N/A	→	155	111	15		

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)

Sold to Cities Service Company

TEST WITNESSED BY

Jim Akin

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

Richard O. Dimit

TITLE Vice President, Production DATE September 13, 1979

*(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.	38. GEOLOGIC MARKERS		
				NAME	MEAS. DEPTH	TRUE VERT. DEPTH
O.C.D. HOBBS, OFFICE	RECEIVED SEP 18 1974			Rustler	1772'	
				Salado	1795'	
				San Andres	3376'	
				Pi Marker	3932'	
				P-1	4080'	
				P-2	4160'	
				P-3	4274'	

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	GAS	
OPERATOR		
PRORATION OFFICE		

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-111
Effective 1-1-65

Operator SUNDANCE OIL COMPANY	
Address Suite 510, 1776 Lincoln Street, Denver, CO 80203	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well ☒	Change in Transporter of:
Recompletion ☐	Oil ☐ Dry Gas ☐
Change in Ownership ☐	Casinghead Gas ☐ Condensate ☐

If change of ownership give name
and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name Cone Federal	Well No. 15	Pool Name, including Formation Tomahawk, San Andres	Kind of Lease State, Federal or Fee Federal	Lease No. 15019
Location Unit Letter J ; 1980 Feet From The South Line and 1980 Feet From The East Line of Section 31 Township 7S Range 32E , NMPM, Roosevelt County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐ Koch Oil Company	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1158, Breckenridge, TX 76024					
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐ Cities Service Company	Address (Give address to which approved copy of this form is to be sent) P.O. Box 300, Tulsa, OK 74102					
If well produces oil or liquids, give location of tanks.	Unit A	Sec. 31	Twp. 7S	Rge. 32E	Is gas actually connected? Yes	When 8/31/79

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 ☒	Gas Well ☐	New Well ☒	Workover ☐	Deepen ☐	Plug Back ☐	Same Res'v. ☐	Diff. Res'v. ☐
Date Spudded 7/12/79	Date Compl. Ready to Prod. 8/31/79		Total Depth 4375		P.B.T.D. 4340			
Elevations (DF, RKE, RT, GR, etc.) 4462' GL "	Name of Producing Formation San Andres		Top Oil/Gas Pay 4185		Tubing Depth 4248			
Perforations 4292-4300', 4309-13', 4185-90', 4194-4200', 4210-12', 4243-47'					Depth Casing Shoe 4375			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12 1/4"	8 5/8"		1775		500 SX			
7 7/8"	4 1/2"		4375		300 SX			

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)

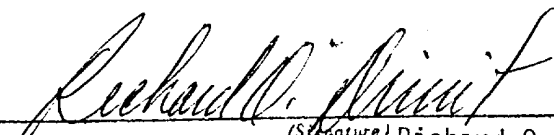
Date First New Oil Run To Tanks 8/31/79	Date of Test 8/31/79	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24 hrs.	Tubing Pressure N/A	Casing Pressure N/A	Choke Size N/A
Actual Prod. During Test 170 bbls.	Oil - Bbls. 155	Water - Bbls. 15	Gas - MCF 111

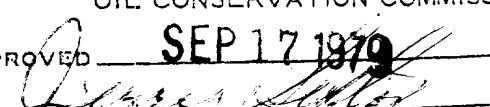
GAS WELL

Actual Prod. Test-MCF/D N/A	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, 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) Richard O. Dimit
Vice President, Production
(Title)
September 13, 1979
(Date)

OIL CONSERVATION COMMISSION
APPROVED  SEP 17 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.



KENNETH D. REYNOLDS - ARTESIA
LESLIE K. EVERTSON - ROSWELL

DRILLING CO., INC. - OIL WELL DRILLING CONTRACTORS

P. O. Box 2055 ROSWELL, NEW MEXICO 8820
TELEPHONES: ARTESIA 505/746-6751
ROSWELL 505/623-5070

July 23, 1979

Sundance Oil Company
1776 Lincoln Street Suite 510
Denver, Colorado 80203

Re: Cone Federal #15

Gentlemen:

The following is a Deviation Survey of the above well located
in Roosevelt County, New Mexico:

491' - $1\frac{1}{2}^{\circ}$	2766' - $1\frac{1}{4}^{\circ}$
924' - $3\frac{3}{4}^{\circ}$	3023' - 1°
1017' - $3\frac{3}{4}^{\circ}$	3353' - 1°
1514' - 1°	3817' - 1°
1775' - $3\frac{3}{4}^{\circ}$	4094' - $3\frac{3}{4}^{\circ}$
2267' - $1\frac{1}{2}^{\circ}$	4375' - $3\frac{3}{4}^{\circ}$ T.D.

Yours very truly,

WEK DRILLING CO., INC.

Arnold Newkirk

STATE OF NEW MEXICO)
COUNTY OF CHAVES)

The foregoing was acknowledged before me this 23rd day
of July, 1979 by Arnold Newkirk.

My Commission Expires:

April 9, 1980

Notary Public