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Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

#### State of New Mexico Energy, Minerals and Natural Resources Department

DISTRICT II P.O. Drawer DD, Astesia, NM 88210

OIL CONSERVATION DIVISION P.O. Box 2088

DISTRICT III

Santa Fe, New Mexico 87504-2088

I.	REQ		_			AUTHORIZ TURAL GA				
Operator Operator		10 102	MOEN	JATI OI	L AND NA	TOTIAL	Wall	API No.		
RW Oil Company							30	0-005-01	112	
Address c/o Oil Reports & Ga	s Servi	ces. In	ıc 1	P. O.	Box 755.	Hobbs. N	лм 8824°	Ī		
Reason(s) for Filing (Check proper box,		, <u>, , , , , , , , , , , , , , , , , , </u>	,			et (Please expla				
New Well		Change in			•	166	2/1/06			
Recompletion	Oil Casinghe		Dry Ga Conden	_	1	Effective	3/1/89	,		
If change of operator give name	Самири	#0 O#5 [	COBOCE							
and address of previous operator										<del></del>
II. DESCRIPTION OF WELL	L AND LE	· <del>· · · · · · · · · · · · · · · · · · </del>	T	·····		·				
Zimmerman "A"		Well No.			ing Formation			of Lease (Beasant or Fe		ease No.
Location		1	Capi	rock Q	ueen	<del></del>				
Unit Letter M	:3	30	_ Foot Fr	om The	South Lin	e and990	) F	eet From The	West	Line
Section 21 Towns	thip 14S		Range	31E	, N	мрм,	Cha	ives		County
III. DESIGNATION OF TRA	NSPORTI			D NATI	RAL GAS					
Name of Authorized Transporter of Oil Navajo Refining Comp	XX	or Conder	name .		li .	e address to wh				ni)
Name of Authorized Transporter of Cas			or Dry	Gas 🗍		Box 159, me address to wh				nt)
•										
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.		ls gas actuall	y connected?	When	?		
If this production is commingled with th	M M	ber lease or	145	31E	No No	her	1			
IV. COMPLETION DATA	m iioni any o	INC. MARC OF	proc, gr.	e comming	hing order main		<del></del>			
Designate Time of Completio	• (%)	Oil Well		Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Designate Type of Completio		pi. Ready to	) Prod		Total Depth	<u> </u>	L.,,	P.B.T.D.	1	<u> </u>
Date Spudded	Date Con	ipi. Romiy u	o riou.		Total Dopas			P.B.1.D.		
Elevations (DF, RKB, RT, GR, etc.)	Name of I	Producing Fo	ormation		Top Oil/Gas	Pay		Tubing Dep	th	
Perforations	1							Depth Casin	ig Shoe	
	•	TUBING,	CASI	NG AND	CEMENTI	NG RECOR	D			
HOLE SIZE	CA	ISING & TU	JBING S	NZE		DEPTH SET			SACKS CEME	ENT
					ļ			-		
					<del> </del>			<u> </u>		
V. TEST DATA AND REQUI										
OIL WELL (Test must be after	Date of To		of load o	oil and mus		exceed top allo ethod (Flow, pu			for full 24 hour	<u>'s.)</u>
Date Fair New Oil Rull 10 1alix	Date Of 1	Ç OL			1 roading ivi	· · · · · · · · · · · · · · · · · · ·		,		
Length of Test	est Tubing Pressure			Casing Pressu	ire		Choke Size			
Actual Prod. During Test Oil - Bbls.				Water - Bbls.			Gas- MCF			
GAS WELL								<del> </del>		
Actual Prod. Test - MCF/D	Length of	Test			Bbls. Conden	sate/MMCF		Gravity of C	Condensate	
Testing Method (pitot, back pr.)	Tubing Pr	essure (Shut	t-in)	,	Casing Press	ure (Shut-in)	-	Choke Size		
VI. OPERATOR CERTIFI				ICE	(	OIL CON	ISFRV	ATION	DIVISIO	)N
I hereby certify that the rules and reg Division have been complied with an										_
is true and complete to the best of m					Date	Approve	d	APK	2 8 1989	<u> </u>
Monne Hell	,				By_			Orig. Sign	ed by	
Signature Donna Holler Printed Name		A	gent Title					Geolog	ist	
4/27/89		(505)	393-		Title					
Date		Tek	phone N	Ю.	1)					

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.

RECEIVED

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HOBBS OFFICE

Submit 5 Copies
Appropriate District Office
DISTRICT 1
P.O. Box 1980, Hobbs, NM 88240

### State of New Mexico Energy, Minerals and Natural Resources Department

Form C-104 Revised 1-1-89 See Instructions at Bottom of Page

DISTRICT II P.O. Drawer DD, Artesia, NM 88210

# OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III
1000 Rio Brazos Rd., Aziec, NM 87410 REQUEST FOR ALLOWABLE AND AUTHORIZATION

Operator		O IHAI	NSPORT C	IL AND N	ATURAL G				
•							API No.		
RW Oil Company Address	·					3-6	<del></del>		
c/o Oil Reports & G	as Service	s. Inc.	. Box 75	5 Hobbe	NIM OOO	4.7			
Reason(s) for ruing (Check proper t	eax)	27 11.0	1 DOX 13		thet (Please exp				
New Well		•	ransporter of:	,	•	·			
Recompletion Change in Operator	Oil		Ory Gas	<u> </u>	Effectiv	ve 2-1-8	19		
Change in Operator XX  If change of operator give name	Casinghead	Gas [ C	condensate	<u> </u>					
and address of previous operator	Bisco Oil	Company	, Box 75	5, Hobbs	NM 8824	11			
II. DESCRIPTION OF WE	LL AND LEA	SE							
Lease Name			ool Name, Inch	ding Formation		Kind	of Lesse		Lease No.
Zimmerman "A"		3	Caprock	Queen			X Pessonal air Fo		
Location	220			Carrella	0.0				
Unit LetterM	:330	, F	eet From The	South Li	ne and9		eet From The	Wes	t Lin
Section 21 Tow	vnaship 145	5 10	ange 311	ε .			<b>1</b>		
	- I		ange 51.	, , ,	IMPM,		haves		County
III. DESIGNATION OF TR	ANSPORTER	OF OIL	AND NAT	URAL GAS					
Name of Authorized Transporter of C	NI 🖂 '	or Condensal	e	Address (Gi	ve address to w	hich approve	d copy of this	form is to be s	ent)
Texas-New Mexico Pi	oeline Comp			P.O. Bo	x 2528,H	lobbs, N	M 88240	)	
Name of Authorized Transporter of C	annighead Gas	¤	Dry Gas	Address (Gi	ve address to w	hich approve	copy of this j	form is to be s	eni)
If well produces oil or liquids,	Unit   S	oc. IT	wp. Rg	t. Is gas actual	1				
give location of tanks.	м		145 31		No	Whei	1 7		
If this production is commingled with									
IV. COMPLETION DATA									
Designate Type of Complete	ion - 00	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res v
Date Spudded	Date Compl.	Ready to De	<u> </u>	Total Depth	<u> </u>	<u> </u>	<u> </u>	1	1
•	- Campa	Acety to Fr	· ·	Total Depth			P.B.T.D.		
Elevations (DF, RKB, RT, GR, etc.)	Name of Proc	lucing Form	ation	Top Oil/Gas	Pay		Tubing Dep		
Perforations							. doing Dep	<b>u</b> ,	
renorations							Depth Casin	g Shoe	
	77.7	PING C	A STAIC A ANTE	(TE) (E) (TE)	NG PEGOR				
HOLE SIZE	CASI	IG & TUBI	NG SIZE	CEMENTI	DEPTH SET	<u>D</u>		14010 0514	
				<del>-</del>	DEFIN SET			SACKS CEMI	ENI
V. TEST DATA AND REQU	FST FOR AL	LOWAR	E						
	er recovery of total			t he equal to or	exceed top allo	wahla fan thii		6.11.24 1	\
Date First New Oil Run To Tank	Date of Test	,,,,		Producing Me	shod (Flow, pu	mp, gas lift, e	ic.)	or juli 24 hour	3.)
							•		
Length of Test	Tubing Pressu	re		Casing Pressu	re		Choke Size		
Actual Prod. During Test	Oil - Bbls.			Water - Bbls.			Car MCE	· ·	
Troub Daing 10th	Oil - Bbis.			Water - Boil			Gas- MCF		
GAS WELL				.1			L		
Actual Prod. Test - MCF/D	Length of Test	1	·	Bbls. Condens	min A A A A C E				
				Bois. Coddedi	REMINICE		Gravity of Co	ondensate	
esting Method (pitot, back pr.)	Tubing Pressu	re (Shut-in)		Casing Pressu	re (Shut-in)		Choke Size		
I. OPERATOR CERTIF									
I hereby certify that the rules and re-	gulations of the Oil	Conservatio	o .		IL CON	SERVA	ATION E	DIVISIO	N
Division have been complied with an is true and complete to the best of m	ig that the informative knowledge and b	son given at elief.	ove	ii _		٨	DD 0 ~	1000	
		•		Date	Approved	<u> </u>	PR 27	1282	
Maxin Dolle	1								
Signature				By_	ORIGIN	LAL SIGNE	D BY JERR	Y SEXTON	
Donna Holler Printed Name		Age Tid				-	SUPERVIS		
4-17-89	505-	-393-27		Title_					•
Date		Telephon	a No	H					

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.

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THE COLD SHOW COME CONTRACT COLD CONTRACT CONTRA

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## STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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DISTRIBUTI	ON		
BANTA FE			
FILE			_
U.S.G.A.			
LAND OFFICE		1-1	
THANSPORTER	OIL		
	GAS		
OPERATOR			
PRORATION OFF	HC E		

#### OIL CONSERVATION DIVISION P. O. BOX 2088 SANTA FE, NEW MEXICO 87501

Form C-104 Revised 10-01-78 Format 06-01-83 Page 1

Separate Forms C-104 must be filed for each pool in multiply completed wells.

REQUEST FOR ALLOWABLE AND

Bisco Oil Company    Address	-	I. AUTHORIZATION TO TRAN	SPORT OIL AND NATURAL GAS
### C/O O11 Reports & Gas Services, Inc., P. O. Box 755, Hobbs, NM 88241    Resten(s) for filing (Circle proper lear)		1	
Change of Transporter of:	•	Address	
Change in Transporter of:   Dry Gas   Effective May 1, 1988		c/o Oil Reports & Gas Services, Inc., P. O.	Box 755, Hobbs, NM 88241
Change of ownership   Couling   Condenses   Condenses			· ·
If change of ownership give name and address of previous owner and address owner address to which approved copy of this form is to be sent.)  Texas—New Mexico Pipeline Company  P. O. Box 2528, Hobbs, NM 88240  Name of Authorities Transporter of Cosinghand Gos or Dry Gos Address (Give address to which approved copy of this form is to be sent.)  If the production it commingled with that from any other lease or pool, give commingling order number:  NOTE: Complete Parts IV and V on reverse side if necessary.  VI. CERTIFICATE OF COMPHANCE  OIL CONSERVATION DIVISION  Approved  Approved  Title  This form is to be filled in compliance with RULE 1110.  All sections of this form must be discompanied by a tabulation of the devistion take taken on the well in accompanied by a tabulation of the devistion take taken on the well in accompanied by a tabulation of the devistion take taken on the well in accompanied by a tabulation of the devistion and the complete of the previous and recompletely for allowable for a newly drilled out completely for allowable for a newly drilled out comp		Criange in Transporter ot:	
If change of ownership give name and address of previous owner Byard Bennett, 7011 Camino Martin, Tucson, Arizona 85741  II. DESCRIPTION OF WELL AND LEASE  Lease None Well No. Pool Name, including Formation State, Federal or Fee Fee  Lease None Same, Federal or Fee Fee  Lease None III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS  Name of Authorized Transporter of Oil or Condensate Authorized Transporter of Oil or Condensate Authorized Transporter of Oil or Condensate Authorized Transporter of Complemental Gas or Dry Gas Address (Give address to which approved copy of this form is to be sent)  Texas—New Mexico Pipeline Company  Name of Authorized Transporter of Cominehead Gas or Dry Gas Address (Give address to which approved copy of this form is to be sent)  If well produces oil or liquide, I will Sec. Twp. Rep. Is gas activally connected? When III well produces oil or liquide, I well produce oil or liquide, I well produce oil or liquide, I well produce to the sent of the sent IV and V on reverse side if necessary.  VI. CERTIFICATE OF COMPLIANCE  I this production is commingled with that from any other lease or pool, give commingling order number:  NOTE: Complete Parts IV and V on reverse side if necessary.  VI. CERTIFICATE OF COMPLIANCE  This form is to be filled in compliance with RULE 1104.  If this is a request for allowable for a newly drilled or despended well, this form must be secondance by a subulation of the deviation takes taken on the well in accordance with RULE 111.  All sections of this form must be filled out completely for allowable on new and recomplated wells.  Fill county Section II. II. III. and VI for changes of owner.  Fill county Section III. III. III. In and VI for changes of owner.  Fill county Section III. III. III. III. III. III. III. II			
II. DESCRIPTION OF WELL AND LEASE  Lease Name  Zimerman "A"  3 Caprock Queen  Stote, Federal or Fee Fee  Lease No.  Zimerman "A"  3 Caprock Queen  Unit Letter M : 330 Feet From The South Line and 990 Feet From The West  Line of Section 21 Township 14S Range 31E NMPM.  Chaves County  III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS  Name of Authorized Transporter of Oil or Condensate Address to which approved copy of this form is to be sent)  Texas-New Mexico Pipeline Company  Name of Authorized Transporter of Cosinghead Gas or Dry Gas Address (Give address to which approved copy of this form is to be sent)  If well produces oil or liquide, Unit Sec. Twp. Rgs. Is gas actually connected? When give location of tonks. M 21 14S 31E NO  If this production is commingled with that from any other lease or pool, give commingling order number:  NOTE: Complete Parts IV and V on reverse side if necessary.  VI. CERTIFICATE OF COMPLIANCE  I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.  Agent.  Gignetive)  Agent.  (It is a request for allowable for a newly drilled or deepened with this form must be accompanied by a teachistion of the deviation (este later) in the accomplance of the All sections of this form must be filled out completely for allowable for a newly drilled or deepened will, this form must be accompanied by a teachistion of the deviation (este later) in the accompanied by a teachistion of the deviation for the woll in accordance with ault 1111.  All sections of this form the be filled out completely for allowable for a newly drilled or deepened will, this form must be accompanied by a teachistion of the deviation for the deviation for the woll in accordance with ault 1104.  All sections of this form must be filled out completely for allowable for a newly drilled or deepened will the form must be accompanied by a teachistic of the deviation of the deviation for	.	Casingneos Gas (	ondensate
Lease Name		If change of ownership give name Byard Bennett, 7011 Cami and address of previous owner Byard Bennett, 7011 Cami	no Martin, Tucson, Arizona 85741
Lease Name		II. DESCRIPTION OF WELL AND LEASE	
Line of Section 21   Township   14S   Range 31E   NMPM.   Chaves   County			Formation Kind of Lease Lease No.
Unit Letter M 330 Feet From The South Line and 990 Feet From The West  Line of Section 21 Township 14S Range 31E NMPM, Chaves County  III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS  Name of Authorized Transporter of Oil or Condenate Address to which approved copy of this form is to be sent)  Texas—New Mexico Pipeline Company  Name of Authorized Transporter of Casinghead Gas or Dry Gas Address (Give address to which approved copy of this form is to be rent)  If well produces oil or liquide, Unit Sec. Twp. Rgs. Is gas actually connected? When give location of tonks. M 21 14S 31E No  If this production is commingled with that from any other lease or pool, give commingling order number:  NOTE: Complete Parts IV and V on reverse side if necessary.  VI. CERTIFICATE OF COMPLIANCE  I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.  Agent.  (Signature)  Agent.  (Title)  6-24-88  All sactions of this form must be filled out complicately for allowed well, this form must be accompanted by a tabulation of the deviation tests taken on the well in accordance with MUE 1104.  All sactions of this form must be filled out completely for allowed to the sets taken on the well in accordance with MUE 111.  All sactions of this form must be filled out completely for allowed to the sets taken on the well in accordance with MUE 111.  All sactions of this form must be filled out completely for allowed to the sets taken on the well in accordance with MUE 111.  All sactions of this form must be filled out completely for allowed to the sets taken on the well in accordance with MUE 111.  All sactions of this form must be filled out completely for allowed to the sets taken on the well in out of the deviation tests taken on the well in out of the feet of the sets taken on the well in out of the sets taken on the well in out of the sets taken on the well and the set of the set of the sets tak		Zimmerman "A" 3 Caprock Ouee	State Forders of San
Line of Section 21 Township 14S Range 31E , NMPM. Chaves County  III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS    Name of Authorized Transporter of Oil		Location	u ree
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS    Name of Authorized Transporter of Oil		Unit Letter M ; 330 Feet From The South Li	ne and 990 Feet From The West
Texas—New Mexico Pipeline Company  Name of Authorized Transporter of Casinghead Gas or Dry Gas Address (Give address to which approved copy of this form is to be sent)  Texas—New Mexico Pipeline Company  Name of Authorized Transporter of Casinghead Gas or Dry Gas Address (Give address to which approved copy of this form is to be sent)  If well produces oil or liquide, Unit Sec. Twp. Rge. Is que actually connected? When you be comminged with that from any other lease or pool, give commingling order number:  NOTE: Complete Parts IV and V on reverse side if necessary.  VI. CERTIFICATE OF COMPLIANCE  I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.  Agent  (Signature)  Agent  (Title)  6-24-88  Address (Give address to which approved copy of this form is to be sent)  P. O. Box 2528, Hobbs, NM 88240  Address (Give address to which approved copy of this form is to be sent)  P. O. Box 2528, Hobbs, IM 88240  Address (Give address to which approved copy of this form is to be sent)  P. O. Box 2528, Hobbs, IM 88240  Address (Give address to which approved copy of this form is to be sent)  No Is questioned copy of this form is to be sent)  No Is questioned copy of this form is to be sent)  Address (Give address to which approved copy of this form is to be sent)  No Is questioned copy of this form is to be sent)  Address (Give address to which approved copy of this form is to be sent)  No Is questioned to which approved copy of this form is to be sent)  Address (Give address to which approved copy of this form is to be sent)  No Is questioned to which approved copy of this form is to be sent)  Address (Give address to which approved copy of this form is to be sent)  No Is questioned to which approved copy of this form is to be sent)  Address (Give address to which approved copy of this form is to be sent)  If this is proved copy of this form is to be sent)  Address (Give address		Line of Section 21 Township 14S Range	31E , NMPM, Chaves County
Texas—New Mexico Pipeline Company  Name of Authorized Transporter of Casinghead Gas or Dry Gas Address (Give address to which approved copy of this form is to be sent)  Texas—New Mexico Pipeline Company  Name of Authorized Transporter of Casinghead Gas or Dry Gas Address (Give address to which approved copy of this form is to be sent)  If well produces oil or liquide, Unit Sec. Twp. Rge. Is que actually connected? When you be comminged with that from any other lease or pool, give commingling order number:  NOTE: Complete Parts IV and V on reverse side if necessary.  VI. CERTIFICATE OF COMPLIANCE  I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.  Agent  (Signature)  Agent  (Title)  6-24-88  Address (Give address to which approved copy of this form is to be sent)  P. O. Box 2528, Hobbs, NM 88240  Address (Give address to which approved copy of this form is to be sent)  P. O. Box 2528, Hobbs, IM 88240  Address (Give address to which approved copy of this form is to be sent)  P. O. Box 2528, Hobbs, IM 88240  Address (Give address to which approved copy of this form is to be sent)  No Is questioned copy of this form is to be sent)  No Is questioned copy of this form is to be sent)  Address (Give address to which approved copy of this form is to be sent)  No Is questioned copy of this form is to be sent)  Address (Give address to which approved copy of this form is to be sent)  No Is questioned to which approved copy of this form is to be sent)  Address (Give address to which approved copy of this form is to be sent)  No Is questioned to which approved copy of this form is to be sent)  Address (Give address to which approved copy of this form is to be sent)  No Is questioned to which approved copy of this form is to be sent)  Address (Give address to which approved copy of this form is to be sent)  If this is proved copy of this form is to be sent)  Address (Give address		III DESIGNATION OF TRANSPORTER OF OU AND NAMED	
Texas-New Mexico Pipeline Company  Name of Authorized Transporter of Casinghead Gos or Dry Gos Address (Give address to which approved copy of this form is to be sent)  If well produces oil or liquide, qive location of danks.  M 21 14S 31E No  If this production is commingled with that from any other lease or pool, give commingling order number:  NOTE: Complete Parts IV and V on reverse side if necessary.  VI. CERTIFICATE OF COMPLIANCE  I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.  Agent  (Title)  Agent  (Title)  6-24-88  Fill out only Sections I. II. III. and VI for changes of owner.  Fill out only Sections I. II. III. and VI for changes of owner.  Fill out only Sections I. II. III. and VI for changes of owner.	1	Name of Authorized Transporter of Oil or Condensate	L GAS
Name of Authorized Transporter of Casinghead Gas or Dry Gas Address (Give address to which approved copy of this form is to be sent)  If well produces oil or liquide, Unit Sec. Twp. Rge. give location of tanks. M 21 14S 31E No  If this production is commingled with that from any other lease or pool, give commingling order number:  NOTE: Complete Parts IV and V on reverse side if necessary.  VI. CERTIFICATE OF COMPLIANCE  I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.  Agent  (Signature)  Agent  (Title)  6-24-88  Address (Give address to which approved copy of this form is to be sent)  Address (Give address to which approved copy of this form is to be sent)  Address (Give address to which approved copy of this form is to be sent)  No  1s que actually connected?  No  OIL CONSERVATION DIVISION  APPROVED  APPROVED  This form is to be filled in compliance with RULE 1104.  If this is a request for sllowable for a newly drilled or deepened wells.  Well, this form must be accompanied by a tabulation of the deviation on the well in accordance with RULE 1111.  All sections of this form must be filled out completely for sllowable on new and recompleted wells.  Fill out only Sections 1, II, III, and VI for changes of owner.			
If well produces oil or liquide, que location of tanks.  M 21 14S 31E No  If this production is commingled with that from any other lease or pool, give commingling order number:  NOTE: Complete Parts IV and V on reverse side if necessary.  VI. CERTIFICATE OF COMPLIANCE  I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.  Agent  (Title)  Agent  (Title)  6-24-88  Is quas actually connected? When  NO  If this is a request for number:  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.	• }	Name of Authorized Transporter of Casinghed Gas or Dry Cas Ca	P. O. Box 2528, Hobbs, NM 88240
If this production is commingled with that from any other lease or pool, give commingling order number:  NOTE: Complete Parts IV and V on reverse side if necessary.  VI. CERTIFICATE OF COMPLIANCE  I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.  Agent  (Title)  6-24-88  M 21 14S 31E NO  OIL CONSERVATION DIVISION  APPROVED  DESCRIPTION  OIL CONSERVATION DIVISION  APPROVED  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.		3, 51, 613	Address force address to which approved copy of this form is to be sent)
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If this production is commingled with that from any other lease or pool, give commingling order number:  NOTE: Complete Parts IV and V on reverse side if necessary.  VI. CERTIFICATE OF COMPLIANCE  I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.  Agent  (Signature)  Agent  (Title)  6-24-88  DIL CONSERVATION DIVISION  APPROVED  I 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 MULE 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.	ı	it well produces out or liquids,	27
NOTE: Complete Parts IV and V on reverse side if necessary.  VI. CERTIFICATE OF COMPLIANCE  I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.  Approved  TITLE  This form is to be filled 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.	٠ .		······································
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I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.    APPROVED     19	]	NOTE: Complete Parts IV and V on reverse side if necessary.	
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(Signature)  Agent well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with AULE 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.			TITLE
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Agent  (Title)  6-24-88  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.			If this is a request for allowable for a newly drilled or deepened
6-24-88  Solution and recompleted wells.  Fill out only Sections I. II. III. and VI for changes of owner.	_		tests taken on the well in accordance with MULE 111.
Fill out only Sections I. II. and VI for changes of owner.		· · · · · · · · · · · · · · · · · · ·	All sections of this form must be filled out completely for silonable 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.

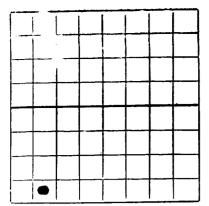
# NEW M1 TO OIL CONSERVATION COM' SSION SANTA FE, NEW MEXICO

Form C-110 Revised 7/1/55

(File the original and 4 copies with the appropriate district office)

# CERTIFICATE OF COMPLIANCE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Company or Opera	torByard	Bennett		Lease_	Zimmerman	<u> </u>
Well No. 3-A	Unit Letter	M S 21 T	14 R 31	Pool Capr	ock Queen	
County Chave	s Kii	nd of Lease (	State, Fed.	or Patente	d) Patented	
If well produces of						31
Authorized Transp	porter of Oil or	Condensate_	Texas-New	Mexico Pi	pe Line Co.	
Address(Give	Box 1510 Mi	dland, Texa	re		·	
(Give	address to whic	h approved c	opy of this	form is to b	oe sent)	
Authorized Transp	orter of Gas					
(Give	address to whic	h approved c	opy of this	form is to b	e sent)	
lf Gas is not being	sold, give reas	ons and also	explain its	present dis	sposition:	
	Flared					
				11		
Reasons for Filing	<del>-</del>	·		<del></del>	( )	
Change in Transpo	rter of (Check (	One): Oil (X)	Dry Gas	() C'head	( ) Condensate	( )
Chamas in O	L		041			
Change in Owners	hip		Other	Cive evalar	nation below)	<u></u>
Remarks:			'	GIVE EXPIAI	lation belowy	
The undersigned c mission have been Executed this the	complied with.		egulations o	of the Oil Co	onservation Cor	n-
_			D.,	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	A. A. C.	- ×
e e e e e e e e e e e e e e e e e e e	<i>!</i>		Ву	<del></del>	2 11216	<u> </u>
Approved		19	Title	Operator	<del></del>	
OIL CONSE	RVATION COMM	MISSION	Company	Byard B	ennett	
By 1999	le ng he	a let	Address	Box 48		
Title				Roswell	. N.M.	



# NEW MEXICO OIL CONSERVATION COMMISSION Santa Fe, New Mexico

WELL RECORD<sup>©</sup> 59

Mail to District Office, Oil Conservation Commission, to which Form C-101 was sent not later than twenty days after completion of well. Follow instructions in Rules and Regulations of the Commission. Submit in QUINTUPLICATE. If State Land submit 6 Copies

Byard Bennett  Company or Operators  Veil No. 3-A is 8W M of 8W M, of Sec. 21 T. 14 S R. 31 E NMPN  Caprock-Queen Pool, Chaves Count  Fool, Chaves Count  Fool, Ghaves Count  Fool Ghaves Count  Fool, Gothers  Fool, Gothers  Fool, Ghaves Count  Fool, Gothers  Foo	LOCAT	AREA 640 ACI TE WELL COF	res Rectly					
Compary of Company of		Byard	Bennett			2	immerman	
Caprock—Queen Fool, Chaves Count (et it is 330 feet from South line and 990 feet from West line and 990 feet from 15 feet line and 990 feet from West line and 990 feet from 15 feet line and 990 feet from West line and 990 feet from 15 feet line and 990 feet from 15 feet line and 990 feet line and 990 feet from 15 feet line and 990 feet from 15 feet line and 990 feet line and 990 feet from 15 feet line and 990 feet line and 990 feet line and 990 feet line and 990 feet from 15 feet line and 990 f	3			rator)			(Lease)	31 E
Section   1								
Section. If State Land the Oil and Gas Lesse No. is.    19		Caproc	K-Ansen		Pool,	000	· · · · · · · · · · · · · · · · · · ·	Count
Prilling Commenced Oct. 8 19.58 Drilling was Completed Oct. 15 19.58 fame of Drilling Contractor Donnelly Drilling Go., Inc.  Artesia, New Mexico  Artesia, New Mexico  Artesia, New Mexico  Artesia, New Mexico  Donnelly Drilling Go., Inc.  Donnelly Drilling Go., Inc.  Donnelly Drilling Go., Inc.  Donnelly Drilling Go., Inc.  Donnelly Drilling Was Completed Oct. 15 19.58  Donnelly Drilling Go., Inc.  Donnelly Drilling Confidence in the information given is to be kept confidential uncertainty in the information given is to be kept confidential uncertainty.  Donnelly Drilling Co., Inc.  D								
Donnelly Drilling Co., Inc.  Artesia, New Mexico  Artesia, New Mexico  Lievation above sea level at Top of Tubing Head.  Doll Sands Or Zones  Oll Sands Or Zones  Oll, from.  Oll, from.  Oll, from.  Oll, from.  No. 4, from.  No. 5, from.  No. 6, from.  IMPORTANT WATER SANDS  Include data on rate of water inflow and elevation to which water rose in hole.  Io. 1, from.  Lo. 2, from.  Lo. 3, from.  Lo. 4, from.  Lo. 5, from.  Lo. 6, from.  Lo. 6, from.  Lo. 6, from.  Lo. 7, from.  Lo. 7, from.  Lo. 6, from.  Lo. 6, from.  Lo. 7, fro	f Section	21	If S	state Land the Oi	l and Gas Lease No.	is		
Artesia, New Mexico  Levation above sea level at Top of Tubing Head	rilling Com	menced	Oct. 8		, 19 <b>58</b> . Drillin	g was Completed	Oct. 15	<u>19.</u> 58
OIL SANDS OR ZONES  OIL SA	lame of Dril	lling Contrac	tor	Donnelly	Drilling (	o., Inc.	***************************************	·
OIL SANDS OR ZONES  OIL SA	Address		,	Artesia,	New Mexico	<b></b>		***************************************
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10. 1, from								
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IMPORTANT WATER SANDS  Include data on rate of water inflow and elevation to which water rose in hole.  io. 1, from	•							
IMPORTANT WATER SANDS  Include data on rate of water inflow and elevation to which water rose in hole.  Id. 1, from to feet.  Id. 2, from to feet.  Id. 3, from to feet.  Id. 4, from FEER FOOT TOWN TOWN TOWN TOWN TOWN TOWN TOWN T	-							
nclude data on rate of water inflow and elevation to which water rose in hole.  io. 1, from	No. 3, from				No. 6	, from	to	•••••••••
nclude data on rate of water inflow and elevation to which water rose in hole.  io. 1, from				TMT	PARTANT WATER	SANDS		
IO. 1, from to feet.  IO. 2, from to feet.  IO. 3, from to feet.  IO. 4, from to feet.  IO. 5, from to feet.  IO. 4, from to feet.  IO. 5, Feet.  IO. 4, from to feet.  IO. 4, from to feet.  IO. 5, Feet.  IO. 6, Feet.  IO. 6, Feet.  IO. 6, Feet.  IO. 5, Feet.  IO. 6, Feet.	nclude data	on rate of w	ater inflow and					
Column							feet	
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CASING RECORD  SIZE WEIGHT NEW OR USED AMOUNT SHOE PULLED FROM PERFORATIONS PURPOSE  8-5/8 24 Used 151 Reg. Surface  5-1/2 15 New 2950 HOWCCe 2925-2930 Production  MUDDING AND CEMENTING RECORD  SIZE OF SIZE OF WHERE NO. SACKS OF CEMENT USED GRAVITY AMOUNT OF MUD USED  12-1/4 8-5/8 151 100 Halliburton	·							
SIZE WEIGHT NEW OR LUSED AMOUNT SHOE PULLED FROM PERFORATIONS PURPOSE  8-5/8 24 Used 151 Reg. Surface  5-1/2 151 New 2950 HOWCCo 2925-2930 Production  MUDDING AND CEMENTING RECORD  SIZE OF CASING SET OF CEMENT USED METHOD MUD GRAVITY AMOUNT OF MUD USED  12-1/4 8-5/8 151 100 Halliburton	•							
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SIZE PER FOOT USED AMOUNT SHOE PULLED FROM PERFORATIONS PURPOSE  8-5/8 24 Used 151 Reg. Surface  5-1/2 151 New 2950 HOWCCe 2925-2930 Production  MUDDING AND CEMENTING RECORD  SIZE OF SIZE OF SIZE OF WHERE OF CEMENT USED GRAVITY AMOUNT OF MUD USED  12-1/4 8-5/8 151 100 Halliburton					CASING RECO	RD		
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MUDDING AND CEMENTING RECORD  SIZE OF SIZE OF CASING SET OF CEMENT USED MUD GRAVITY MUD USED  12-1/4 8-5/8 151 100 Halliburton					<b>!</b>	T CIMED FROM	I EM UMITONS	
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SIZE OF SIZE OF CASING SET NO. SACKS METHOD USED MUD GRAVITY MUD USED  12-1/4 8-5/8 151 100 Halliburton			<u> </u>			<u> </u>		
SIZE OF SIZE OF CASING SET NO. SACKS METHOD USED MUD GRAVITY MUD USED  12-1/4 8-5/8 151 100 Halliburton				MITIDI	NG AND CEMENT	TNG RECORD		
HOLE CASING SET OF CEMENT USED GRAVITY MUD USED  12-1/4 8-5/8 151 100 Halliburton	STEP OF	SIZE OF	WUFFF			110 11200110	WITIN	AMOUNT OF
	HOLE			OF CEMENT	USED			
7-7/8 5-2/2 2950 125 Halliburton	12-1/4	8-5/8	151					·
	7-7/8	5-2/2	2950	123	HETTIONE	COM		
					_		+	
RECORD OF PRODUCTION AND STIMULATION								
(Record the Process used, No. of Qts. or Gals. used, interval treated or shot.)		• • • • • • • • • • • • • • • • • • • •		·····		***************************************	930 WIEN	••••••••••••
(Record the Process used, No. of Qts. or Gals. used, interval treated or shot.)  Sand-frac thru perforations from 2925-2930 with		5,0	00 gal.	oll and	5,000# sand	•		
(Record the Process used, No. of Qts. or Gals. used, interval treated or shot.)								
(Record the Process used, No. of Qts. or Gals. used, interval treated or shot.)  Sand-frac thru perforations from 2925-2930 with		••••••						
(Record the Process used, No. of Qts. or Gals. used, interval treated or shot.)  Sand-frac thru perforations from 2925-2930 with	·····			wahhed Ki	Bbl new	oil after	recovering	load oil.
(Record the Process used, No. of Qts. or Gals. used, interval treated or shot.)  Sand-frac thru perforations from 2925-2930 with  5,000 gal. oil and 5,000# sand.	Result of Pro	duction Stin	ulation	- america ( )				
(Record the Process used, No. of Qts. or Gals. used, interval treated or shot.)  Sand-frac thru perforations from 2925-2930 with  5,000 gal. oil and 5,000# sand.  Swabbed 60 Bbl. new oil after recovering load oil.					**********************************			••••••
(Record the Process used, No. of Qts. or Gals. used, interval treated or shot.)  Sand-frac thru perforations from 2925-2930 with  5,000 gal. oil and 5,000# sand.	***************************************		******************	**********************	*************************		Depth Cleaned O	ut
(Record the Process used, No. of Qu. or Gals. used, interval treated or shot.)  Sand-frac thru perforations from 2925-2930 with  5,000 gal. oil and 5,000# sand.  Swabbed 60 Bbl. new oil after recovering load oil.								

# CORD OF DRILL-STEM AND SPECIAL TF 8

If drill-stem or other special tests or deviation surveys were made, submit report on separate sheet and attach hereto

#### TOOLS USED

Rotar	y tools w	vere use	ed from	0 ,	cet to	2,950	feet, aı	nd from	·····	feet to	feet.
										feet to	
						PRODU	CTION				
			Oct.	2h.		_	00				
Put to	o Produc					, 19. <b>58</b>					
OIL	WELL:	The	production	n during the first 2	4 hours	was 60	<u> </u>	bar	rels of liq	uid of which9	<b>5</b> % was
		was	oil;	% ۱	was emu	lsion;	3	% water	; and		s sediment. A.P.I.
				a li					•		
GAS	WELL:	The	production	n during the first 2	4 hours	was		M,C.F. pl	us		barrels of
		liqui	d <b>Hydroca</b>	rbon. Shut in Pres	surc	lbs.					
Leng	rth of Ti	me Shi	t in	•••••							
ł	PLEASE	INDI	CATE BI				FORMAN(	CE WITH	1 GEOGI	RAPHICAL SECTION	•
m .				Southeastern N						Northwestern No	
						evonianilurian				Ojo Alamo Kirtland-Fruitland	
			_			IIurian Iontoya				Farmington	
						impson				Pictured Cliffs	
				•••••		1cKee				Menefee	
				•••••		llenburger				Point Lookout	***************************************
т. С	Grayburg			•	т. с	Fr. Wash	••••••		т.	Mancos	••••••
T. S	San Andr	res			T. G	Franite			т.	Dakota	***************************************
т. с	Glorieta				T		•••••		Т.	Morrison	••••••
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ATTACH SEPARATE SHEET IF ADDITIONAL SPACE IS NEEDED

I hereby swear or affirm that the information given herewith is a	complete and correct record of the well and all work done on it so far
as can be determined from available records.	11/3/58
Company or Operator. Byard Bennett	Address Box 48 Roswell, N.M.
Name I have the State of the second the second	Position or Title Operator