

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPLIC
(Other instructions on
reverse side)Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

LC 060821A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

West Cap Queen Sand Unit

8. FARM OR LEASE NAME

West Cap Queen Sand Unit,
Tr. 11

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Caprock Queen

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

21, T-14-S, R-31-E

12. COUNTY OR PARISH

Chaves

New Mexico

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—" for such proposals.)1. OIL ☒ GAS ☐
WELL WELL OTHER

2. NAME OF OPERATOR

Phillips Petroleum Company

3. ADDRESS OF OPERATOR

Room B-2, Phillips Bldg., Odessa, Texas 79766

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

Unit C, 1980' FE and 660' FS lines

14. PERMIT NO.

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

4276' Gr.

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) Temporarily abandon ☒(NOTE: Report results of multiple completion on Well
Completion or Recompletion Report and Log form.)REPAIRING WELL ☐ALTERING CASING ☐ABANDONMENT* ☐

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.)*

Shut well down, effective 4-30-71, temporarily abandon.

RECEIVED

MAY 10 1971

U. S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO

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

SIGNED

J. Mueller TITLE Senior Reservoir Engineer

DATE 5-4-71

(This space for Federal or State office use)

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:

TITLE

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 not 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 packing 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.

U.S. GOVERNMENT PRINTING OFFICE: 1963—O-685229
GPO 837-499 887-851

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MAY 17 1971

OIL CONSERVATION COMM.
HOBBBS, N. A.

RECEIVED

MAY 17 1971

O. G. D.
ARTERIA, OFFICE

<table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="text-align: center;">NUMBER OF COPIES RECEIVED</td></tr> <tr><td style="text-align: center;">DISTRIBUTION</td></tr> <tr><td>SANTA FE</td></tr> <tr><td>FILE</td></tr> <tr><td>U.S.G.S.</td></tr> <tr><td>LAND OFFICE</td></tr> <tr> <td>TRANSPORTER</td> <td>OIL GAS</td> </tr> <tr><td>PRODUCTION OFFICE</td></tr> <tr><td>OPERATOR</td></tr> </table>	NUMBER OF COPIES RECEIVED	DISTRIBUTION	SANTA FE	FILE	U.S.G.S.	LAND OFFICE	TRANSPORTER	OIL GAS	PRODUCTION OFFICE	OPERATOR	<p>NEW MEXICO OIL CONSERVATION COMMISSION</p> <p>SANTA FE, NEW MEXICO</p> <p>CERTIFICATE OF COMPLIANCE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS</p> <p>FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE</p>	<p>FORM C-110 (Rev. 7-60)</p>
NUMBER OF COPIES RECEIVED												
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LAND OFFICE												
TRANSPORTER	OIL GAS											
PRODUCTION OFFICE												
OPERATOR												
<p>Company or Operator: Phillips Petroleum Company</p>												
<p>Unit Letter: 0 Section: 21 Township: 14S Range: 31E</p>		<p>Lease: West Cap Queen Sand Unit Well No.: Tr. 11 - 1</p>										
<p>Pool: Caprock Queen</p>		<p>Kind of Lease (State, Fed, Fee): Fed.</p>										
<p>If well produces oil or condensate give location of tanks</p>		<p>Unit Letter: 0 Section: 21 Township: 14S Range: 31E</p>										
<p>Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/> Texas-New Mexico Pipeline Company</p>		<p>Address (give address to which approved copy of this form is to be sent) Box 1510 - Midland, Texas</p>										
<p>Is Gas Actually Connected? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></p>												
<p>Authorized transporter of casing head gas <input type="checkbox"/> or dry gas <input type="checkbox"/> Date Connected</p>		<p>Address (give address to which approved copy of this form is to be sent)</p>										
<p>If gas is not being sold, give reasons and also explain its present disposition: Gas produced is of insufficient quantity for sale; any gas, if produced, will be utilized in operation of Unit equipment.</p>												
<p style="text-align: center;">REASON(S) FOR FILING (please check proper box)</p> <p> New Well <input type="checkbox"/> Change in Ownership <input type="checkbox"/> Change in Transporter (check one) Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casing head gas <input type="checkbox"/> Condensate <input type="checkbox"/> </p> <p style="text-align: right;"> Unitization: R-3223 10-18-62 R-3226 " </p>												
<p>Remarks: Effective 1-1-63. (Formerly Sohio - Saner-Fed. Well No. 1)</p>												
<p>The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.</p>												
<p>Executed this the <u>27</u> day of <u>December</u>, 19 <u>62</u>.</p>												
<p style="text-align: center;">OIL CONSERVATION COMMISSION</p>		<p>By</p>										
<p>Approved by</p>		<p><i>W. J. ...</i></p>										
<p>Title</p>		<p>District Chief Clerk</p>										
<p>Date</p>		<p>Company Phillips Petroleum Co. - Operator</p>										
		<p>Address Box 2105 - Hobbs, N.M.</p>										

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DISTRIBUTION	
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ITER	OIL
	GAS
IN OFFICE	
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NEW MEXICO OIL CONSERVATION COMMISSION
SANTA FE, NEW MEXICO

FORM C-110
(Rev. 7-60)

CERTIFICATE OF COMPLIANCE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE

any or Operator

SOHIO PETROLEUM COMPANY

Lease

Saner

Well No.

1

Letter

0

Section

21

Township

14-S

Range

31-E

County

Chaves

Caprock-Queen

Kind of Lease (State, Fed, Fee)

Federal

If well produces oil or condensate
give location of tanks

Unit Letter

0

Section

21

Township

14-S

Range

31-E

Authorized transporter of oil ☒ or condensate ☐

Texas-New Mexico P. L. Co.

Address (give address to which approved copy of this form is to be sent)

Box 1510, Midland, Texas

Is Gas Actually Connected? Yes ☐ No ☒

Authorized transporter of casing head gas ☐ or dry gas ☐

Date Connected

Address (give address to which approved copy of this form is to be sent)

If gas is not being sold, give reasons and also explain its present disposition:

Vented to air-quantity does not justify hook up.

REASON(S) FOR FILING (please check proper box)

New Well ☐

Change in Ownership ☒

Change in Transporter (check one)

Other (explain below)

Oil ☐ Dry Gas ☐

Casing head gas ☐ Condensate ☐

Remarks

Effective 7-10-62

Former operator Neville G. Penrose, Inc.

The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.

Executed this the 14th day of July, 1962.

OIL CONSERVATION COMMISSION

Approved by

Title

Date

By

Title

Company

Address

He Bowman

DISTRICT CLERK

SOHIO PETROLEUM COMPANY

P. O. BOX 3167, MIDLAND, TEXAS

U. S. LAND OFFICE _____
SERIAL NUMBER **LC-060821-A**
LEASE OR PERMIT TO PROSPECT _____

[illegible]

GEOLOGICAL SURVEY

LOCATE WELL CORRECTLY

The information given herewith is a complete and correct record of the well and all work done thereon so far as can be determined from all available records.

The summary on this page is for the condition of the well at above date.

Commenced drilling October 5, 1957 Finished drilling October 16, 1957

(Denote gas by \mathcal{G})

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

No. 2, from _____ to _____ No. 4, from _____ to _____

[illegible]

Size casing	Where set	Number sacks of cement	Method used	Mud gravity	Amount of mud used
0 3/4	162	90	circulated		
7	2980	100			

Adapters—Material..... Size.....

Size	Shell used	Explosive used	Quantity	Date	Depth shot	Depth cleaned out

Cable tools were used from ----- feet to ----- feet, and from ----- feet to ----- feet

....., 19..... Put to producing October 22..... 19 27

The production for the first 24 hours was 70.1 barrels of fluid of which 100 % was oil: _____ %

emulsion; _____% water; and _____% sediment.

If gas well, cu. ft. per 24 hours _____ Gallons gasoline per 1,000 cu. ft. of gas _____

Rock pressure, lbs. per sq. in.

_____, Driller

_____, Driller _____, Driller

FROM—	TO—	TOTAL FEET	FORMATION
0	1223	1223	red beds
1223	1335	112	anhydrite
1335	2012	677	salt
2012	2165	153	anhydrite, shale, salt
2165	2225	60	sand
2225	2956	731	anhydrite, w/stringers of sand, dolomite, salt
2956	2973	17	sand
2973	2978	5	anhydrite
2978	2982	4	red anhydritic shale (TD)
FORMATION MARKERS:			
1223	(+3059)		anhydrite
1335	(+2947)		top salt
2012	(+2270)		base salt
2165	(+2117)		Yates
2956	(+1326)		Queen

FROM-	TO-	TOTAL FEET	FORMATION
-------	-----	------------	-----------

[illegible]

16-43084-2 U. S. GOVERNMENT PRINTING OFFICE

HISTORY OF OIL OR GAS WELL

It is of the greatest importance to have a complete history of the well. Please state in detail the dates of redrilling, together with the reasons for the work and its results. If there were any changes made in the casing, state fully, and if any casing was "sidetracked" or left in the well, give its size and location. If the well has been dynamited, give date, size, position, and number of shots. If plugs or bridges were put in to test for water, state kind of material used, position, and results of pumping or balling.