OIL CONSERVATION COMMISSION

BOX 2045

HOBBS, NEW MEXICO

NOTICE OF GAS CONNECTION

DATE March 24, 1965

This is to notify the Oil Conservation Commission that connection for the purchase of gas from the Tom L. Ingram (Operator), Garretson (Lease),

#1	25 18-32	Tobac-Penn.	Capitan, Inc.
Well Unit	S.T.R.	Pool	Name of Purchaser

was made on March 17, 1965.

Chaves County, New Mexico

~~CAPITAN, INC.~~ Purchaser

Charles A. Gruba
Representative

Treasurer
Title

cc: To operator
Oil Conservation Commission - Santa Fe

Form 9-330
(Rev. 5-63)

SUBMIT IN DUPLICATE (See other instructions on reverse side)

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

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

WELL COMPLETION OR RECOMPLETION REPORT AND LOG*

5. LEASE DESIGNATION AND SERIAL NO.: NM 0267786

6. IF INDIAN, ALLOTTEE OR TRIBE NAME: -

7. UNIT AGREEMENT NAME: -

8. FARM OR LEASE NAME: Garretson

9. WELL NO.: 1

10. FIELD AND POOL, OR WILDCAT: Wildcat

11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA: Sec. 25-8S-32E

1a. TYPE OF WELL: OIL WELL [X] GAS WELL [ ] DRY [ ] Other

b. TYPE OF COMPLETION: NEW WELL [X] WORK OVER [ ] DEEP-EN [ ] PLUG BACK [ ] DIFF. RESVR. [ ] Other

2. NAME OF OPERATOR: Tom L. Ingram

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

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

At surface: 660' FNL & 660' FEL Sec. 25, T-8-S, R-32-E

At top prod. interval reported below

At total depth

12. COUNTY OR PARISH: Chaves

13. STATE: New Mexico

14. PERMIT NO. | DATE ISSUED

15. DATE SPUDDED: 12-[illegible]-64

16. DATE T.D. REACHED: 2-15-65

17. DATE COMPL. (Ready to prod.): 2-18-65

18. ELEVATIONS (DF, RKB, RT, GR, ETC.)*: 4420 GR

19. ELEV. CASINGHEAD: 4433 KB

20. TOTAL DEPTH, MD & TVD: 9113

21. PLUG, BACK T.D., MD & TVD: 9073

22. IF MULTIPLE COMPL., HOW MANY*

23. INTERVALS DRILLED BY: → | ROTARY TOOLS: 0 - TD | CABLE TOOLS

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*: 8984-8994 Bough "C" (Pennsylvanian)

25. WAS DIRECTIONAL SURVEY MADE

26. TYPE ELECTRIC AND OTHER LOGS RUN: Gamma Ray-Sonic, Laterolog Microlaterolog

27. WAS WELL CORED: yes

28. CASING RECORD (Report all strings set in well)

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
10-3/4	32.75	431	13-1/2	250	-
7-5/8	24 & 26.40	3650	9-3/4	500	0
4-1/2	11.60	9113	6-3/4	400	-

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM MD)	SACKS CEMENT*	SCREEN (MD)

30. TUBING RECORD

SIZE	DEPTH SET (MD)	PACKER SET (MD)
2-3/8	8990	8884

31. PERFORATION RECORD (Interval, size and nuber)

8984-8994
40 holes

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
8984-8994	500 gals Spearhead

PRODUCTION

33.*

DATE FIRST PRODUCTION	PRODUCTION METHD (Flowing, gas lift, pumping—size and type of pump)	WELL STATUS (Producing or shut-in)
2-18-65	Flowi	Producing

DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD →	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
2-20-65	8	1/64		280	530	0	1893

FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE →	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)
925	0		840	1590	0	48

34. DISPOSITION OF GAS (Sold, used for fuel, vec, etc.): Vented - no market present

TEST WITNESSED BY: Tom L. Ingram

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 Tom L. Ingram TITLE Owner DATE Feb. 22, 1965

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

871-23

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.

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.)

DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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

3. ADDRESS OF OPERATOR

4. LOCATION OF WELL (*Report location clearly and in accordance with any State requirements.*
At surface
At top prod. interval reported below
At total depth

14. PERMIT NO. DATE IS

15. DATE SPUDDED | 16. DATE T.D. REACHED | 17. DATE COMPL. (*Ready to prod.*) | 18. ELEVA

20. TOTAL DEPTH, MD & TVD | 21. PLUG, BACK T.D., MD & TVD | 22. IF MULTIPLE COMPL., HOW MANY* | DRILLED BY

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

26. TYPE ELECTRIC AND OTHER LOGS RUN

27. WAS WELL CORED

28. CASING RECORD (*Report all strings set in well*)

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED

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*)

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED

33.* PRODUCTION

DATE FIRST PRODUCTION | PRODUCTION METHOD (*Flowing, gas lift, pumping—size and type*

DATE OF TEST | HOURS TESTED | CHOKE SIZE | PROD'N. FOR TEST PERIOD | OIL—BBL. | GAS—MCF. | C

FLOW. TUBING PRESS. | CASING PRESSURE | CALCULATED 24-HOUR RATE | OIL—BBL. | GAS—MCF.

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

35. LIST OF ATTACHMENTS

36. I hereby certify that the foregoing and attached information is complete and correct as det

SIGNED _____ TITLE _____

*(See Instructio nd Spaces for Additional Data on

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.	NAME	TOP MEAS. DEPTH	TOP TRUE VERT. DEPTH

38.

Form 9-331
(May 1963)

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE* (Other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R1424.

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 WELL [X] GAS WELL [ ] OTHER

2. NAME OF OPERATOR
Tom L. Ingram

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

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.)
At surface
660' FNL & 660' FEL Sec. 25, T-8-S, R-32-E

5. LEASE DESIGNATION AND SERIAL NO.
NM 0267786

6. IF INDIAN, ALLOTTEE OR TRIBE NAME
-

7. UNIT AGREEMENT NAME
-

8. FARM OR LEASE NAME
Garretson

9. WELL NO.
1

10. FIELD AND POOL, OR WILDCAT
Wildcat

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 25-8S-32E

12. COUNTY OR PARISH | 13. STATE

14. PERMIT NO.
---

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
4420 GR

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

NOTICE OF INTENTION TO:				SUBSEQUENT REPORT OF:			
TEST WATER SHUT-OFF	[ ]	PULL OR ALTER CASING	[ ]	WATER SHUT-OFF	[X]	REPAIRING WELL	[ ]
FRACTURE TREAT	[ ]	MULTIPLE COMPLETE	[ ]	FRACTURE TREATMENT	[ ]	ALTERING CASING	[ ]
SHOOT OR ACIDIZE	[ ]	ABANDON*	[ ]	SHOOTING OR ACIDIZING	[X]	ABANDONMENT*	[ ]
REPAIR WELL	[ ]	CHANGE PLANS	[ ]	(Other)			[ ]
(Other)			[ ]	(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.) *

Set the following 4-1/2" casing at 9113' with 400 sacks Encor Posmix cement plus 2% gel plus 40 sacks of salt and 178 pounds CFR-2:

45 joints (1461.31') 4-1/2" LT&C 11.6# N-80 casing
228 joints (7684.54') 4-1/2" LT&C 11.6# J-55 casing

Cement circulated. WOC 48 hours. Tested to 1000 psi, held okay.

Plugged back to 9073. Perforated 4 shots per foot 8984-8994. Set 2-3/8" tubing at 8991' with packer set at 8884'. Acidized with 500 gallons Spearhead acid. Testing.

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

SIGNED Tom L. Ingram TITLE Owner DATE February 19, 1968

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

APPROVED
MAR 2 1968
J. L. GORDON
ACTING DISTRICT ENGINEER

*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 22: 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 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 of cement; 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 will be ready for final inspection looking to approval of the abandonment.

U.S. GOVERNMENT PRINTING OFFICE: 1963—O—685229

867-851