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Form C-105
Revised 1-1-65

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

5a. Indicate Type of Lease	
State <input checked="" type="checkbox"/>	Fee <input type="checkbox"/>
5b. State Oil or Gas Lease No.	
OG 1062	

1a. TYPE OF WELL		OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> DRY <input type="checkbox"/> OTHER <input type="checkbox"/>		7. Unit Agreement Name	
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 <input type="checkbox"/>		8. Farm or Lease Name	
2. Name of Operator		Kerr-McGee Corporation		9. Well No.	
3. Address of Operator		P.O. Box 1, Surrency, Texas		10. Field and Pool, or Wildcat	
4. Location of Well		UNIT LETTER H LOCATED 1980 FEET FROM THE West LINE AND 990 FEET FROM		12. County	
THE South LINE OF SEC. 2 TWP. 8S RGE. 3E NMPM				Chaves	
15. Date Spudded	16. Date T.D. Reached	17. Date Compl. (Ready to Prod.)	18. Elevations (DF, RKB, RT, GR, etc.)	19. Elev. Casinghead	
9-29-66	10-6-66	10-16-66	4,365.4 GR		
20. Total Depth	21. Plug Back T.D.	22. If Multiple Compl., How Many	23. Intervals Drilled By	Rotary Tools	Cable Tools
4,336'	4,334'			All	
24. Producing Interval(s), of this completion - Top, Bottom, Name					25. Was Directional Survey Made
4,238'-4,331' San Andres					Inclination Report
26. Type Electric and Other Logs Run					27. Was Well Cored
Gamma Ray - Neutron Log					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	407'	12 1/4"	275 sacks	None
5 1/2"	14	4,336'	7 7/8"	390 sacks	None
29. LINER RECORD					
SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN	
None					
30. TUBING RECORD					
SIZE	DEPTH SET	PACKER SET			
2 3/8"	4,207'	None			
31. Perforation Record (Interval, size and number)					
One 0.47" Bullet per ft at 4,238', 4,239, 4,245, 4,248, 4,250, 4,263, 4,264, 4,265, 4,282, 4,283, 4,306, 4,310, 4,238'-4,331', 4,319, 4,322, 4,325, 4,327, 4,329, 4,331.					
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.					
DEPTH INTERVAL		AMOUNT AND KIND MATERIAL USED			
4,238'-4,331'		2,500 Gallons of 15% acid			
4,238'-4,331'		30,000 Gallons of Lease Oil and 45,000 lb of sand.			
33. PRODUCTION					
Date First Production		Production Method (Flowing, gas lift, pumping - Size and type pump)		Well Status (Prod. or Shut-in)	
10-11-66		Flowing		Prod.	
Date of Test	Hours Tested	Choke Size	Prod'n. For Test Period	Oil - Bbl.	Gas - MCF
10-16-66	17	32/64		335	201 EST
Flow Tubing Press.	Casing Pressure	Calculated 24-Hour Rate	Oil - Bbl.	Gas - MCF	Water - Bbl.
120	700		473	284 EST	0
34. Disposition of Gas (Sold, used for fuel, vented, etc.)					Test Witnessed By
Vented					E.B. Roberson
35. List of Attachments					
Gamma Ray-Neutron Log and Inclination Report					
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>E. J. Breeden</u>		TITLE <u>Engineer</u>		DATE <u>October 18, 1966</u>	

INSTRUCTIONS

This form is to be filled with the appropriate District Office of the Commission not later than 20 days after the completion of any newly-drilled or deepened well. It shall be accompanied by one copy of all electrical and radio-activity logs run on 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 filled in quadruplicate except on state land, where six copies are required. See Rule 1105.

INDICATE FORMATION TOPS IN CONFORMANCE WITH GEOGRAPHICAL SECTION OF STATE

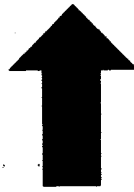
Southeastern New Mexico

Northwestern New Mexico

T. Canyon	T. Ojo Alamo	T. Penn. "B"
T. Salt	T. Kirtland-Fruitland	T. Penn. "C"
T. Salt	T. Pictured Cliffs	T. Penn. "D"
T. Yates	T. Cliff House	T. Leadville
T. 7 Rivers	T. Menefee	T. Madison
T. Queen	T. Point Lookout	T. Elbert
T. Grayburg	T. Mancos	T. McCracken
T. San Andres	T. Gallup	T. Ignacio Ortiz
T. Glorieta	T. McKee	T. Base Greenhorn
T. Paddock	T. Ellenburger	T. Dakota
T. Blinberry	T. Gr. Wash	T. Morrison
T. Tubb	T. Granite	T. Todillo
T. Drinkard	T. Delaware Sand	T. Entrada
T. Abo	T. Bone Springs	T. Wingate
T. Wolfcamp	T. Permian	T. Penn. "A"
T. Cisco (Bough C)		

FORMATION RECORD (Attach additional sheets if necessary)

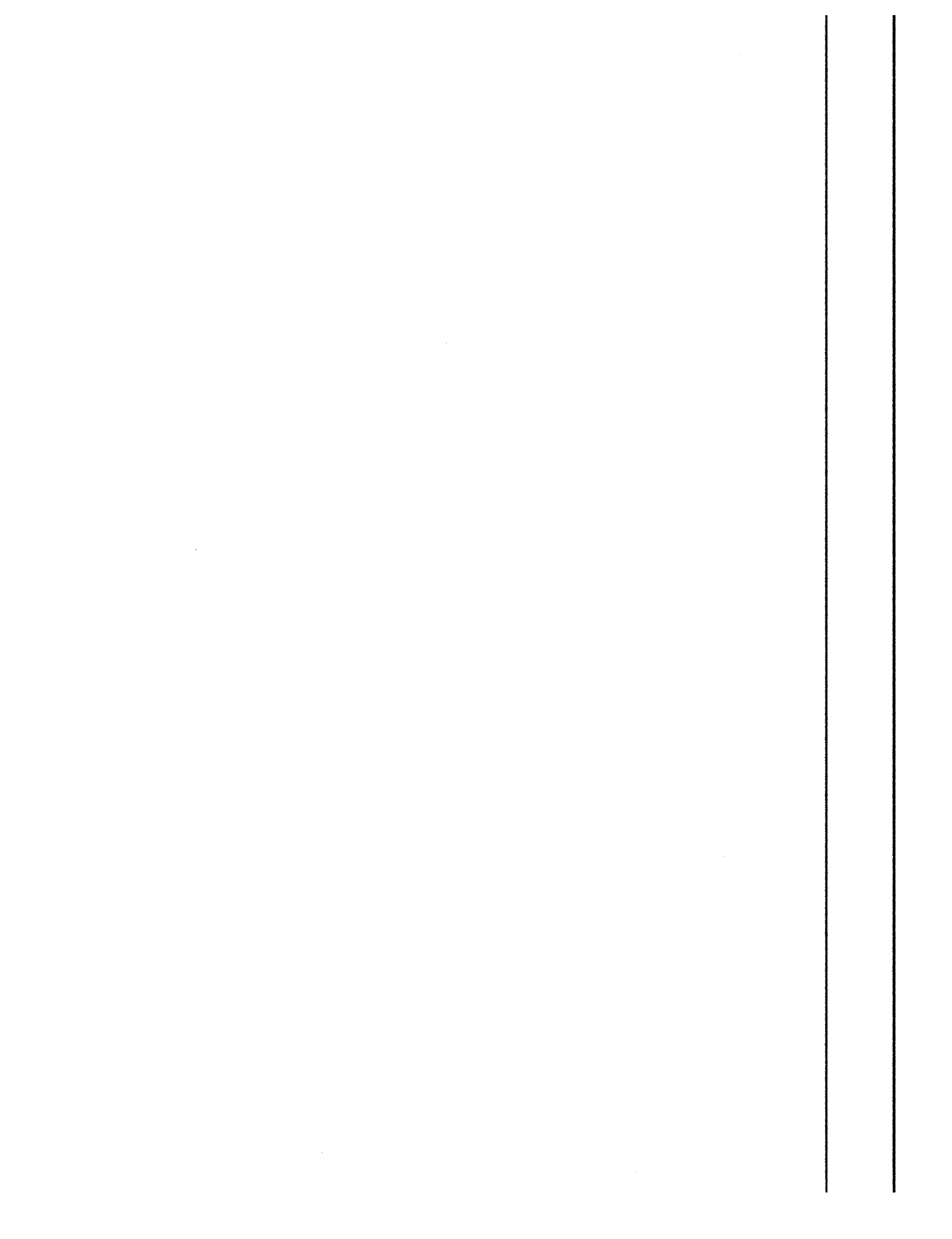
From	To	Thickness In Feet	Formation	From	To	Thickness In Feet	Formation
0'	98'	98'	Caliche				
98'	120'	22'	Sand				
120'	410'	290'	Sand & Red Beds				
410'	1494'	1084'	Red Beds				
1494'	2133'	639'	Red Beds & Argillite				
2133'	2510'	377'	Argillite, Salt, & sand				
2510'	3010'	500'	Argillite & shale				
3010'	3250'	240'	Argillite				
3250'	3445'	195'	Argillite & shale				
3445'	3520'	75'	Argillite				
3520'	4336'	816'	Lime				



LTR



Job separation sheet



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	GAS
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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-110
Effective 1-1-65

I. Operator
Kerr-McGee Corporation
Address
P.O. Box 1, Sunray, Texas
Reason(s) for filing (Check proper box)
New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐
Other (Please explain)

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name State F	Well No. 10	Pool Name, Including Formation Undesignated San Andres	Kind of Lease State, Federal or Fee State	Lease No. OG 1062
Location Unit Letter N 1980 Feet From The West Line and 990 Feet From The South Line of Section 2 Township 8S Range 33E , NMPM, Chaves 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"/> Magnolia Pipe Line Company	Address (Give address to which approved copy of this form is to be sent) Box 900, Dallas, Texas	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> None	Address (Give address to which approved copy of this form is to be sent)	
If well produces oil or liquids, give location of tanks.	Unit E	Sec. 2
	Twp. 8S	Rge. 33E
	Is gas actually connected? No	
	When	

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 <input type="checkbox"/>	New Well <input type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Res'tv. <input type="checkbox"/>	Diff. Res'tv. <input type="checkbox"/>
Date Spudded 9-29-66	Date Compl. Ready to Prod. 10-16-66		Total Depth 4,336'		P.B.T.D. 4,334'			
Elevations (DF, RKB, RT, GR, etc.) 4,365.4 GR	Name of Producing Formation San Andres		Top Oil/Gas Pay 4,238		Tubing Depth 4,207'			
Perforations One 0.47" hole per ft 4,238, 4,239, 4,245, 4,248, 4,250, 4,263, 4,264, 4,265, 4,282, 4,283, 4,306, 4,310, 4,319, 4,322, 4,325, 4,327, 4,329, 4,331.					Depth Casing Shoe 4,336'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12 1/4"	8 5/8"		407'		275			
7 7/8"	5 1/2"		4,336'		350			
	2 3/8"		4,207'					

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 10-11-66	Date of Test 10-16-66	Producing Method (Flow, pump, gas lift, etc.) Flow	
Length of Test 17 hrs	Tubing Pressure 120	Casing Pressure 700	Choke Size 32/64"
Actual Prod. During Test 335	Oil - Bbls. 473	Water - Bbls. 0	Gas - MCF 284 EST.

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

OIL CONSERVATION COMMISSION

APPROVED _____, 19____
BY _____
TITLE _____

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 multiply completed wells.

C. J. Breiden
(Signature)

Engineer
(Title)

October 18, 1966
(Date)