		1
NO. OF COPIES ACCEIVED		Form C-103
DISTRIBUTION	<u><u><u></u></u></u>	Supersedes Old C-102 and C-103
SANTA FE	NEW MEXICO OIL CONSERVATION COMMISSION	Effective 1-1-65
FILE		
U.S.G. S.	· ·	Sa. indicate Type of Lease
LAND OFFICE		State Fee 🔀
OPERATOR		5. State Oil & Gas Lease No.
	UNDRY NOTICES AND REPORTS ON WELLS or proposals to daill on to deepen dr plug back to a different reservoir. plication for permit -" (form C-101) for such proposals.)	
।. ০০. জি ১০৯ জি		7. Unit Agreement Name
	OTHER-	
2. Name of Operator		8. Farm or Lease Name
Laguna Petroleum Co	mpany	Cushing 13
3. Address of Operator	•	9. Well No.
One Marienfeld Plac	e, Suite 370, Midland, Texas 79701	<u>д</u> .
<. Location of Well	· · · · · · · · · · · · · · · · · · ·	10. Field and Pool, or Wildcat
UNIT LETTER H	1980' FEET FROM THE NORTH LINE AND 660' FEET FROM	Chaveroo(San Andres)
UNII LUITER	FEET FROM THE THOUGHT LINE AND FEET FROM	
East	SECTION 13 TOWNSHIP 85 RANGE 32E	<i>1111111111111111111111111111111111111</i>
THE LINE,	SECTIONTOWNSHIPRANGENMPM.	ληηηηηηηη
mmmmm	15. Elevation (Show whether DF, RT, GR, ctc.)	12. County
	4434 GR	
		Chaves
Ch	eck Appropriate Box To Indicate Nature of Notice, Report or Oth	er Data
		REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON	COMMENCE DRILLING OPNS.	PLUG AND ABANDONMENT
PULL OR ALTER CASING	CHANGE PLANS CASING TEST AND CEMENT JOB	
	OTHER Installation of	pumping equipment
OTHER		
17. Describe Proposed or Comple	eted Operations (Clearly state all pertinent details, and give pertinent dates, including	estimated date of starting any proposed
WORK SEE ROLE HUS.		•
5-31-80 Set pum	ping unit (Continental Emsco 114 w/20 HP electric moto	or).
	44.	
6-6-80 Rigged	up pulling unit. Ran pumps & rods in hole-	•
Subsurf	ace equipment: 1-2 3/8" x 4' J-55, perf. nip with bull	plug, 2 3/8" OD,
API, Se	ating Nipple, 135 jts. 2 3/8" OD, EVE, 8 rd. 4.7#, J-5	5 tbg.
(New) 1	-10' 2 3/8" OD, EVE, 8 rd, 4.7#, J-55 Tbg. sub. (new)	top of perf.
NIP @ 4	354' & SN @ 4353'. Ran 2" x 15" x 12' insert pump. 1-	-3/4" x 2' nonv
rod, 4-	7/8" x 25' sucker rods, 124- 3/4" x 24' sucker rods,	45- 7/8" x 25'
sucker	rods, 1- 7/8" x 2' pony rod, 1- 12" x 16' piston steel	polish rod with
a 10' p	olish rod liner. Well pumping to battery @ 8:15 p.m.	6-5-80.
2		
	•	-
18. I hereby certify that the infor	mation above is true and complete to the best of my knowledge and belief.	
	Λ	
(1)		
SIGNED Wayne C	dge Drilling Supt.	DATE 6-9-80
		10.20
Crig. Si	gned By	을 가지 않는 것 같은 문서 것 이. 같이 같은 것 같은
APPROVED BY JETTY Se		DATE
	Supr.	

CONDITIONS OF APPRDISE I SURVE





Job separation sheet

S/ TA FE		CUNCERVATION COMMISSION	Form C - 104				
5 E G.S.		ST FOR ALLOWABLE AND	Supersedes Old C-104 and C-12 Effective 1-1-65				
DOFFICE	AUTHORIZATION TO T	RANSPORT OIL AND NATURAL	_ GA S				
TRANSPORTER OIL GAS							
OPERATOR							
I. PRORATION OFFICE	i		ì				
Laguna Petroleum	Company						
Address One Marienfeld P	lace, Suite 370, Midland	Towag 70701					
Reason(s) for filing (Check proper bo	x)	Other (Please explain)					
New Well XX Recompletion	Change in Transporter of:						
Change in Ownership	CEPTION TO R4670						
If change of ownership give name		Bensote BOBTAINED.					
and address of previous owner			·				
II. DESCRIPTION OF WELL AND							
Cushing 13	Well No. Pool Name, Including 1 Chaveroo (San	Intina of Lea	Lease No.				
Location		Andres) State, Fede	ral or Fee Fee -				
Unit Letter H ; 198	Feet From The North L	ine and 660' Feet From	The East				
Line of Section 13 To	winship 8S Range	32E , NMPM, Chav					
III. DESIGNATION OF TRANSPOR	TEP OF OUL AND NATURAL		es County				
Nome of Authorized Transporter of O	i or Condensate	Address (Give address to which appr	oved copy of this form is to be sense				
Navajo Crude Oil Purch Name of Authorized Transporter of Ca	asing Co. singhead Gas 🗋 or Dry Gas 🗍	P.O. Box 175 Artesia	NTM 99210				
		Address (Give address to which appro	oved copy of this form is to be sent)				
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. P.ge. H 13 8S 32E	Is gas actually connected? Wi	hen				
If this production is commingled wi		NO					
IV. COMPLETION DATA							
Designate Type of Completion	on - (X) Off Well Gas Well X	New Well Workover Deepen X	Plug Back Same Res'v. Diff. Res'v.				
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.				
4-24-80 Elevations (DF, RKB, RT, GR, etc.)	6-5-80 Name of Producing Formation	4424 Top O!!/Gas Pay	4373'				
4434 GR.	San Andres	42721	Tubing Depth 4358'				
Perforations 4273, 79', 83',	95', 99', 4306', 13', 1	9', 36', 39', 41', 43'.	Depth Casing Shoe				
<u>1 shot @ each location</u>		D CEMENTING RECORD	4424				
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT				
7 7/8"	8 5/8 20# 4 1/2 10.5#	442'	250				
	DV Tool	<u>4424'</u> 2494'	<u>830</u> 615				
V. TEST DATA AND REQUEST EC	2 3/8" 4.7# J-55						
V. TEST DATA AND REQUEST FO							
Date First New Oil Run To Tanks 6-5-80	Date of Test	Freducing Method (Flow, pump, gas lij	(t, etc.)				
Length of Test	6-8-80 Tubing Pressure	Pumping Cesing Pressure	Choke Size				
24 Actual Prod. During Test	Oil-Bble.	0					
43	33	Waler - Bhis.	Gas-MCF				
			TSTM				
GAS WELL Actual Prod. Tost-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 COMPLIANC	E						
•• •			TION COMMISSION				
I hereby certify that the rules and re Commission have been complied wi	th and that the information given	APPROVED . 19					
above is true and complete to the	best of my knowledge and belief.	BY	Mela-				
/		TITLE States VIALI	Unitikal				
Wayne Edge		This form is to be filed in co					
Drilling Supt.	we)	If this is a request for sllowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation					
(Title		tests taken on the well in accord	ance with RULE 111. t be filled out completely for allow-				
6/16/80		able on new and recompleted wel	1 a.				
(Date)	well name or number, or transporte	III, and VI for changes of owner, r, or other such change of condition.				

	Fill ou well name of	t on <mark>ly</mark> r numb	Sections er, or tran	I, II, ∎porte	IЦ, г, ог	and other	VI fo	or change	en o of c
-11	-	-							