| STATE OF NEW ME                         | EXICO                                  | . ~.          |                            |                          |          |              | 30-02                    | 25-28816            |
|---|--|---------------|----------------------------|--------------------------|----------|--------------|--------------------------|---------------------|
| ENERGY AND MINERALS DE                  |  | OIL           | CONSERVATI<br>P. O. BOX 20 |                          | SION     |              | Form C-101<br>Revised 10 |                     |
| DISTRIBUTION                            |  | SA            | NTA FE, NEW M              |                          | 01       |              | SA. Indicat              | e Type of Lease     |
| SANTA FE<br>FILE                        |  |               |                            |                          |          |              | BTATE                    |                     |
| U.S.G.S.                                | +                                      |               |                            |                          |          |              | I                        | & Gas Louse No.     |
| LAND OFFICE                             | 1-1-1                                  |               |                            |                          |          |              | B-950.                   | 5                   |
| OPERATOR                                |  |               |                            |                          |          |              | $\chi$                   | <u>MUUUUUU</u>      |
|   | TION FOR PE                            | ERMIT TO      | DRILL, DEEPEN,             | OR PLUG B                | ACK      |              | UUUU                     | illillillilli       |
| 1a. Type of Work                        |  |               |                            |                          |          |              | 7. Unit Agr              | eement Name         |
| b. Type of Well                         | x                                      |               | DEEPEN                     |                          | PLUG B   | аск          | 8. Farm or I             | ease Name           |
| OIL CAS WELL                            |  |               |                            | SINGLE X                 | MUL      | ZONE         |                          | ico "AT" State      |
| 2. Name of Operator                     | 0T)                                    |               | ·                          | ZONE LA                  |          | ZONE L       | 9. Well No.              |                     |
| Texáco Inc.                             |  |               |                            |                          |          |              |                          | 14                  |
| 3. Address of Operator                  | ······································ |               |                            |                          |          |              | 10. Field a              | nd Pool, or Wildcat |
| Box 3109, Midlan                        | d, Texas                               | 79702         |                            |                          |          |              | Saunders                 | Permo Upper Pen     |
| 4. Location of Well<br>UNIT LE          | TTER 0                                 | LOG           | ATED 660 .                 | LET FROM THE             | south    | LINE         | IIIIII                   | <u>MMMMM</u>        |
| AND 1980 FEET FR                        | om THE east                            | LIN           | te or sec. 15              | wp. 14-S                 | ,, 33·   | -E NMPM      |                          |                     |
| ANNIN ANNI ANNI ANNI ANNI ANNI ANNI ANN |  | IIIII         |                            | IIIIII                   | IIII     | IIIIII       | 12. County               | THIMIX .            |
|   | <u>illilli</u>                         | TITT          |                            |                          | IIII     | llilli       | Lea                      |                     |
|   |  |               |                            |                          |          |              |                          |                     |
|   |  | <u>(()(()</u> |                            | 9. Froposed De<br>10,100 | · 1      | A. Formation |                          | 20. Rotary or C.T.  |
| 1. Elevations (Show whether             |  |               | & Status Plug. Bond 2      |                          |          | ermo Upp     |                          | Rotary              |
| 4205' GR                                | <i>D1, 11, CC.</i>                     | - ZIA. KING   | & Sidius Piug. Bond 2      | 1B. Drilling Co          | ntractor |              |                          | 1, 1984             |
| 23.                                     |  | L             | I                          |                          |          |              | 1                        |                     |
|   |  | P             | ROPOSED CASING AND         | CEMENT PRO               | GRAM     |              |                          |                     |
| SIZE OF HOLE                            | SIZE OF                                |               | WEIGHT PER FOOT            | SETTING                  | DEPTH    | SACKS OF     | CEMENT                   | EST. TOP            |
| 17 <sup>1</sup> <sub>2</sub> "          | 13-3/8                                 | 11            | 48# H−40                   | 52                       | 51       | 6            | 00                       | Circulate           |
| 12 <sup>1</sup> / <sub>4</sub> "        | 8-5/8                                  | 11            | 24#,K-55                   | 420                      | 0'       | 20           | 00                       | Circulate           |
|   |  |               | 24#,S-80                   |                          |          |              |                          |                     |
| 7-7/8''                                 | E 1/0                                  | "             | 28#,S-80                   | . 10 1                   | 0.01     |              | F.O                      |                     |
| 1-110                                   | 5-1/2                                  |               | 17#,N-80<br>17#,K-55       | 10,1                     | 00       | 21           | 50 .                     | Circulate           |
|   |  |               | 1777, K-33                 |                          |          |              |                          |                     |
|   |  |               | CEMENTING PRO              | OGRAM                    |          |              |                          |                     |
| SURFACE CASTNO. 4                       | 00 $eve $ $C1$                         |               | 1/29 CaC1 (15 6            |                          | f+/a     | <i>\</i>     |                          |                     |
| SURFACE CASING: 6<br>INTERMEDIATE CASIN |  |               |                            |                          |          |              | 2 7                      | 2.10 ft/cm          |
| followed by 200 sx                      |  |               |                            |                          |          |              | z•1 bbg,                 | 2.10 IL/SX)         |
| PRODUCTION CASING:                      |  |               |                            |                          |          |              | nng 2                    | 00  ft/ev           |
| followed by 200 sx                      |  |               |                            |                          |          |              |                          |                     |

DV Tool at 7000' (Displacement type).

2ND STAGE: 1200 sxs Light Weight w/1/4# flocele (12.3 ppg, 2.00 ft/sx).

IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM: IF PROPOSAL IS TO DEEPEN OR PLUE BACK, GIVE DATA ON PRESENT PRODUCTIVE ZONE AND PROPOSED NEW PR

APPROVAL VALID FOR 120 DAYS PERMIT EXPIRES 10-23-84 UNLESS DRILLING UNDERWAY

## NEW EXICO OIL CONSERVATION COMMISSIO. WELL LOCATION AND ACREAGE DEDICATION PLAT

|                                | =                                  | All distances m      | ust be from the | ne outer boundarie         | s of the Section. |   |        |
|--------------------------------|------------------------------------|----------------------|-----------------|----------------------------|-------------------|---|--------|
| Operator<br>Texaco Inc.        |                                    |                      | Lea<br>Nev      | <sup>se</sup><br>Mexico "A |                   | Well No. 14   |        |
| Unit Letter<br>O               | Section<br>15                      | Township<br>14-S     |                 | Range<br><b>33</b> E       | County            | Lea   |        |
| Actual Footage Loc             | ation of Well:                     | -                    |                 |                            |                   |   |        |
| 660                            | feet from the SC                   |                      | ne and 198      |                            | feet from the     | east line   |        |
| Ground Level Elev.<br>4205' GR | Producing Fo<br>Permo UI           | rmation<br>oper Penn | Poo<br>Sa       | unders Perm                | o Upper Pe        | enn Dedicated Acreage: 40   | Acres  |
| 1. Outline th                  | e acreage dedica                   | ated to the subj     | ect well h      | y colored penc             | il or hachure     | marks on the plat below.  |        |
|                                |                                    |                      |                 |                            |                   |   | 1.:    |
| 2. If more th<br>interest ar   | ian one lease is<br>nd royalty).   | s dedicated to t     | he well, oı     | itline each and            | identify the      | ownership thereof (both as to work  | ĸing   |
| 3. If more that                | an one lease of                    | different owners     | hip is dedi     | cated to the w             | ell, have the     | interests of all owners been cons   | soli-  |
| dated by c                     | communitization,                   | unitization, forc    | e-pooling.      | etc?                       |                   |   |        |
| Yes                            | No If a                            | answer is "yes,"     | type of co      | onsolidation               |                   |   |        |
| If answer                      | is "no," list the<br>f necessary.) | owners and tra       | ct descript     | ions which hav             | e actually be     | een consolidated. (Use reverse sid  | le of  |
| No allowa                      | hle will be assig                  | ned to the well ı    | intil all int   | erests have be             | en consolida      | ted (by communitization, unitization, | tion,  |
| forced-poc                     | oling, or otherwise                | e) or until a non-   | standard u      | nit, eliminating           | such interes      | ts, has been approved by the Com  | mis-   |
| sion.                          | -                                  |                      |                 |                            |                   |   |        |
|                                |                                    |                      |                 |                            |                   | CERTIFICATION   |        |
|                                | İ                                  |                      |                 | l<br>t                     |                   |   |        |
|                                | 1                                  |                      |                 | i<br>i                     |                   | I hereby certify that the information   |        |
|                                | 1                                  |                      |                 |                            |                   | tained herein is true and complete t  | to the |
|                                | I                                  |                      |                 | 1                          |                   | best of my knowledge and belief.  |        |
|                                | I                                  |                      |                 | Ì                          |                   | Russell E. Sexton   |        |
|                                | Ì                                  |                      |                 | 1                          |                   | Name  |        |
|                                | +                                  | +-                   |                 |                            |                   | Engineer's Assistant  |        |
|                                | l                                  |                      |                 | ł                          |                   | Position<br>Texaco Inc.   |        |
|                                | ł                                  |                      |                 | 1                          |                   | Company   |        |
|                                |                                    |                      |                 |                            |                   | July 18, 1984   |        |
|                                | l                                  |                      |                 |                            |                   | Date  |        |
|                                |                                    |                      |                 | 1                          |                   |   |        |
|                                |                                    |                      |                 |                            | <u></u>           |   |        |
|                                |                                    |                      |                 | 1                          |                   |   |        |
|                                | 1                                  |                      |                 | ł                          |                   | I hereby certify that the well lo<br>shown on this plat was plotted from  |        |
|                                | 1                                  |                      |                 |                            |                   | notes of actual surveys made by   |        |
|                                | 1                                  |                      |                 |                            |                   | under my supervision, and that the  |        |
|                                |                                    |                      |                 | 1                          |                   | is true and correct to the best   |        |
|                                | 1                                  |                      |                 | ł                          |                   | knowledge and belie <sup>r</sup> .  |        |
|                                | +                                  |                      |                 |                            |                   | -   |        |
|                                | i<br>İ                             |                      |                 | 1                          |                   | July 13, 1984   |        |
|                                | L                                  |                      |                 | μ.                         | 0.70              | Date Surveyed   |        |
|                                | l                                  |                      | ×               | <u> </u>                   | <u>920</u>        | Peristered Professional Engineer  |        |
|                                | 1                                  |                      | - O             | 1                          |                   | and/or Land Surveyor  |        |
|                                | i<br>İ                             |                      | 0.0             | l,                         |                   |   |        |
|                                |                                    |                      | <u> </u>        | li                         |                   | RODELE Hane   | .03    |
|                                |                                    |                      |                 |                            |                   | - Certificate No.   |        |
| C 330 660                      | 90 1320 1650                       | 1980 2310 2640       | 2000            | 1500 1000                  | 500               | 0 j   |        |

DRILLING CONTROL CONDITION II-3000 PSI WP





H2S TRIM REQUIRED

NO

YES

## DETLLING CONTROL

## HATERIAL LIST - CONDITION IT

## Texaco Vellhead

30000 W.P. drilling spoul with a 2" minimum flanged outlet for kill-line and 3" minimum flanged outlet for choke line

3000# W.P. Dual can type preventer, hydraulic operated with 1" sceel, 30007 W.P. control lines (where substructure height is adequate, 2-30009 W.P. single can type preventers may be utilized.)

Bell nipple with flowlins and fill-up autlets. (Kill line may also be used for fill-up line.)

1,3,4. 2" minimum 30000 G.P. flanged full opening steel gate 7,8 value, or Halliburton Lo Tore Plug value.

2" minimum 30004 W.P. back pressure valve

3" minimum 30003 W.P. flanged full opening sceel gate walve, or Halliburgun to "ore flug valve. ,3" minimum schedule 80, Grade "8", seamless line pipe

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14

10, 11

2" minimum 30000 W.P. adjuscable choke bodies

Cameron Hud Gauge or equivalent (location optional to choke line.)

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043 . 40

TEXACO. INC.

PROBUCING DEPARTMENT US MOLAND TELAS TITICS

2" niniows g 3" ninimus 30009 W.F. flanged cross

ENT 82 1

| STATE OF NEW MEXICO   |  | CONSERVATI<br>P. O. BOX 2 |                                | SION         |                                       | 30-02<br>Form C-101<br>Revised 10- | 5-2881 X<br>1-78                        |
|---|--|---------------------------|--------------------------------|--------------|---------------------------------------|------------------------------------|---|
| DISTRIBUTION<br>SANTA FE                                    | SAN                                    | ITA FE, NEW M             |                                | 501          |                                       | STATE X                            | Type of Lease                           |
| FILE<br>U.S.G.S.<br>LAND OFFICE<br>OPERATOR                 |  |                           |                                |              |                                       | B 874                              |   |
|   | FOR PERMIT TO                          | DRILL, DEEPEN,            | OR PLUG B                      | ACK          | · · · · · · · · · · · · · · · · · · · | 7. Unit Agree                      | ement Namo                              |
| 1e. Type of Work<br>DRILL X                                 |  | DEEPEN                    |                                | PLUG B       |                                       | 8. Farm or Le                      |   |
| OIL A GAS WELL  | OTHER                                  | ······                    | ZONE                           | MULT         |                                       | General<br>9. Well No.             | G State                                 |
| 2. Name of Operator<br>MOBIL PRODUCING                      | TX. & N.M. INC.                        | · ·                       |                                |              |                                       | 2                                  |   |
| 3. Address of Operator                                      |  |                           | ry 77046                       |              |                                       | 1                                  | Pool, or Wildcat<br>designated          |
| Nine Greenway P   |  |                           | FEET FROM THE                  | North        | LINE                                  | mm                                 |   |
| 4. Location of well UNIT LETTER                             | B Loc.                                 |                           |                                |              |                                       |                                    |   |
| AND 450 PEET FROM   | THE West LIN                           | e or sec. 16              |                                | ACE. 3       | 7E NMPM                               | 12. County                         |   |
|   | HHHHHH                                 |                           | MMM                            |              | IIII                                  | Lea                                |   |
|   | thill this                             | ttttttttt                 | i IIIIII                       | IIIII        | IIIII                                 |                                    | iiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii  |
|   |  | HHHHH                     | 19. Proposed D                 | epth 19      | A. Formatio                           | "<br>_///////                      | 20, Rotury or C.T.                      |
|   |  |                           | 6,000                          | )'           | Bline                                 |                                    | Rotary                                  |
| 1. Elevations (Show whether DF,                             |  | -                         | 21B. Drilling C                |              |                                       |                                    | . Date Work will start<br>n as possible |
| 3527' Ground  | ······································ | et-on File                | Unknown                        |              |                                       | AS 500                             |   |
| 23.   | P                                      | ROPOSED CASING AN         | D CEMENT PR                    | OGRAM        |                                       |                                    |   |
| SIZE OF HOLE  | SIZE OF CASING                         | WEIGHT PER FOO            |                                |              |                                       | FCEMENT                            | EST. TOP                                |
| 12-1/4"   | 8-5/8"                                 | 24#                       | 0-350                          |              |                                       | circ.<br>circ.                     | Surface<br>Surface                      |
| 7-7/8"  | 5-1/2"                                 | 14#                       | 0-5500                         | )            | 150                                   | circ.                              | Bullidee                                |
| 2. Lead: TLW  |  | 1/4#/sx FC.<br>14.8 ppg.  |                                |              |                                       |                                    |   |
| Casing String   | Equip. Siz                             | e & Series                | Number an                      | nd Type      | Tes                                   | t Pressur                          | e rsi                                   |
| Surface   | 9-10" x 30                             | 00#                       | l Master<br>2 Pipe Ra<br>Rotat |              | 1                                     | 3000                               | ) · ·                                   |
| IN ABOVE SPACE DESCRIBE PR                                  | IOPOSED PROGRAMI IF                    | PROPOSAL 18 TÔ DEEPEN     | OR FLUG BACK,                  | GIVE DATA ON | PRESENT PP                            | IODUCTIVE ZONE                     | AND PROPOSED NEW PROD                   |
| I hereby certify that the information                       |  | plete to the best of my   | knowledge and                  | bellef.      |                                       |                                    |   |
| Signed Walter HEars   | for A. D. Bond                         | Regulat                   | ory Techn<br>pervisor          |              |                                       | Date Ju                            | ly 20, 1984                             |
| (This space for<br>Endie V                                  | V. Seay                                |                           |                                |              |                                       |                                    | UL 2 3 1984                             |
| APPROVED BY <u>OU R. Gets</u><br>conditions of Approval, IP |  | TITLE                     |                                | A            | PPROVAL<br>PERMIT<br>UNLESS           | VALID FOR<br>EXPIRES               | 120 DAYS<br>10-23-84<br>UNDERWAY        |
|   |  |                           |                                |              |                                       |                                    |   |

STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT P. O. BOX 2088 ANTA FE. NEW MEXICO 87501 Form C-102 Revised 10-1-78

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| erator  |   | All distances mus  | Leose  |                                |               |   | Well No.   |
|---|---|--|--|--------------------------------|---------------|---|--|
|   |   | N M TNC  | 1  | 1 G_Stat                       | te            |   | 2  |
| MUBIL PROL  | UCING TX. &<br>Section  | Township   | Hange  | <u>z o utat</u>                | County        |   | 4 <u></u>  |
| D   | 16  | 205  |  | 37E                            |               | Lea   |  |
| ual Foolage Loca  |   |  | <u></u>  |                                |               |   |  |
| 330   | teet from the N   | orth Hne   | and 450  | · fr                           | et from the   | West  | line   |
| und Level Elev.   | Producing F   |  | Pool   |                                |               |   | nted Acreage:  |
| 3527  | Blineb  | ry   | Und  | esignate                       | ed            | 40  | Acres  |
| 2. If more the interest and                                       | n one lease i<br>d royalty).  | cated to the subject<br>is dedicated to the<br>different ownership   | well, outline es   | ach and id                     | entify the    | ownership thereof   | (both as to workin   |
| dated by co<br>Yes<br>If enswer is<br>this form if<br>No allowabl | ommunitization, No If s "no;' list the necessary.) le will be assig | unitization, force-p<br>answer is "yes," ty<br>c owners and tract o<br>gned to the well unti<br>c) or until a non-star | ooling.etc?<br>pe of consolida<br>descriptions wh<br><br>1 all interests f | tion<br>ich have a<br>ave been | ctually be    | en consolidated. (<br>ted (by communiti   | Use reverse side o<br>zation, unitization  |
| 2 Mobil   |   | R-37-E   | l<br>[   |                                |               | CERT  | TIFICATION   |
|   |   |  | 1  |                                |               |   | hat the information con-<br>true and complete to the<br>edge and ballef.   |
| General"G" Sta  |   | 16   |  |                                | T<br>20-<br>S | Technic<br>Company<br>Mobil Produci<br>Date<br>July 20<br>I hereby certify<br>shownon this bla<br>notes of octuots<br>under thy superior<br>is true and thy<br>knowledge and thy<br>Date Surveyed         | gulatory<br>ian Supervisor<br>ng TX. & N.M.IN<br>, 1984<br>ther the set locution<br>No. for each interior<br>of ond they be ne or<br>of ond they be ne or<br>of ond they be ne or<br>of and they be ne or<br>of any<br>istory of my  |
| General "G" Sta   |   | 16   |  |                                |               | Name<br>A. D. Bond<br>Postuon Re<br><u>Technic</u><br>Company<br>Mobil Produci<br>Date<br>July 20<br>I here so certify<br>show on this big<br>notes of octuol is<br>is this and thy<br>know loose and the | gulatory<br>ian Supervisor<br>ng TX. & N.M.I<br>1984<br>that the Self-locutio<br>No. Not the Self-locutio<br>No. Not the Self-locutio<br>No. Not the Self-locutio<br>No. Not the Self-locutio<br>No. Not the Self-locutio<br>No. Not the Self-locutio<br>No. Not the Self-locutio<br>No. Not the Self-locutio<br>No. Not the Self-locutio<br>No. Not the Self-locutio<br>No. Not the Self-locutio<br>No. Not the Self-locutio<br>No. Not the Self-locutio<br>No. No. No. No. No. No. No. No. No. No. |

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