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TRANSPORTER	OIL	
	GAS	
OPERATOR		
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NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE,  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS  
MAY 23 12 01 PM '69

Form C-104  
Supersedes Old C-104 and C-110  
Effective 1-1-65

I. Operator  
Pennzoil United, Inc.  
Address  
P. O. Drawer 1828 - Midland, Texas 79701  
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)  
Change lease designation from State "20" No. 1 to State "C" No. 1

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name State "C"	Well No. 1	Pool Name, Including Formation NorthEast Lovington - Penn	Kind of Lease State, Federal or Fee State	Lease No. K 5187
Location Unit Letter A ; 660 Feet From The North Line and 660 Feet From The East Line of Section 20 Township 16-S Range 37-E , NMPM, Lea 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"/> Texas-New Mexico Pipe Line Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1510 - Midland, Texas 79701	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Skelly Oil Co. - Natural Gasoline Plants Div.	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1650 - Tulsa, Oklahoma 74102	
If well produces oil or liquids, give location of tanks. Unit B Sec. 20 Twp. 16-S Rge. 37-E	Is gas actually connected? Yes	When 2-4-69

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	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
Perforations					Depth Casing Shoe			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			

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	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bble. 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.

Charles A. D. [Signature]  
(Signature)  
Manager of Drilling & Production  
(Title)  
May 22-69  
(Date)

OIL CONSERVATION COMMISSION  
MAY 26 1969  
APPROVED  
BY [Signature], 19  
TITLE [Signature]

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.

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New Well ☐ Change in Transporter of:  
Recompletion ☐ Oil ☒ Dry Gas ☐  
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐

If change of ownership give name  
and address of previous owner \_\_\_\_\_

II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>State "20"</u>	Well No. <u>1</u>	Pool Name, Including Formation <u>East Lovington Penn</u>	Kind of Lease State, Federal or Fee <u>State</u>	Lease No. <u>K - 5187</u>
Location Unit Letter <u>A</u> : <u>660</u> Feet From The <u>North</u> Line and <u>660</u> Feet From The <u>East</u> Line of Section <u>20</u> Township <u>16-S</u> Range <u>37-E</u> , NMPM, <u>Lea</u> 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"/> <u>Texas-New Mexico Pipe Line Company</u>	Address (Give address to which approved copy of this form is to be sent) <u>P. O. Box 1510 - Midland, Texas 79701</u>	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> <u>Skelly Oil Co. - Natural Gasoline Plants Div.</u>	Address (Give address to which approved copy of this form is to be sent) <u>P. O. Box 1650 - Tulsa, Oklahoma 74102</u>	
If well produces oil or liquids, give location of tanks. Unit <u>B</u> Sec. <u>20</u> Twp. <u>16-S</u> Rge. <u>37-E</u>	Is gas actually connected? <u>Yes</u>	When <u>2-4-69</u>

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	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
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Perforations						Depth Casing Shoe		
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET			SACKS CEMENT		

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Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

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.

Charles H. Brown  
(Signature)  
Manager of Drilling & Production  
(Title)  
February 25, 1969  
(Date)

OIL CONSERVATION COMMISSION  
APPROVED \_\_\_\_\_, 19\_\_\_\_  
BY Joe O. Perry  
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.  
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Separate Forms C-104 must be filed for each pool in multiply completed wells.

INCLINATION REPORT

ONE COPY MUST BE FILED WITH EACH COMPLETION REPORT

Field Name \_\_\_\_\_ County Lea County, New Mexico RRC Dist. No. \_\_\_\_\_  
Operator Pennzoil United Address \_\_\_\_\_ City \_\_\_\_\_  
Lease Name & No. State 20 Well No. 1 Survey \_\_\_\_\_

RECORD OF INCLINATION

Depth (feet)	Angle of Inclination (degrees)	Displacement (feet)	Accumulative Displacement (feet)
377	1/4	9363	1-3/4
900	1/2	9360	2-1/4
1400	3/4	9695	2-1/4
2050	1	9830	3-1/4
2560	3/4	9970	2-3/4
3150	1-1/2	10420	1
3830	1-1/2	10650	1-1/4
4350	3/4	10940	1/2
5030	1-1/4	11250	3
5119	1-1/4	11660	2-3/4
5319	1/4		
5800	1		
6020	1/2		
6220	1/2		
6450	3/4		
6924	3/4		
7340	3/4		
7615	1-1/2		
7925	1		
8620	3/4		
9040	3/4		

Total Displacement \_\_\_\_\_

Was survey run in Tubing \_\_\_\_\_ Casing \_\_\_\_\_ Open Hole X \_\_\_\_\_  
Distance to nearest lease line \_\_\_\_\_ feet  
Distance to lease lines as prescribed by field rules \_\_\_\_\_ feet

Certification of personal knowledge Inclination Data:

I hereby certify that I have personal knowledge of the data and facts placed on this form, and that such information given above is true and complete.

Thomas C. Brown  
Signature

TOM BROWN DRILLING COMPANY, INC.  
Company

Operator Affidavit:

(Note: Party making affidavit must strike out inapplicable phrases, and must file explanatory statement when applicable.)

Before me, the undersigned authority, on this day, personally appeared Thomas C. Brown, known to me to be the person whose name is subscribed hereto, who, after being duly sworn, on oath states that he is ~~the operator of the well identified in this instrument~~ (that he is acting at the direction and on behalf of the operator of the well identified in this instrument), and that such well was not intentionally deviated from the vertical whatsoever. ~~and that such well was deviated at random for the reason described in the attached statement).~~

Thomas C. Brown  
Signature and Title of Affiant

Sworn and Subscribed to before me, this the 10th day of January, 1969.

Leona L. Neill  
Notary Public in and for New Mexico  
County, Texas.

RRC Use Only:

Approved By: \_\_\_\_\_  
Title: \_\_\_\_\_  
Date: \_\_\_\_\_

PENNZOIL UNITED, INC.

STATE "20" NO. 1

660 FNL & 660 FEL  
Sec. 20, T-16-S, R-37-E  
Lea County, New Mexico

DRILL STEM DATA:

DST #1 8980 - 9046:

tool open 1 hr 10 min - w/very weak blow - rec. 710' drlg. fluid - IF 31# - FF 296# - 1 hr ISIP 3426# - 90 min FSIP 3234# - HPI & HPO 4103# - BHT 1420 - Sample chamber cont. 100# press, 2466cc drlg. fluid-no gas - rec. mud 16,000 ppm - pit mud 15,000 ppm - pit mud res. 0.3 @ 60° - rec. mud res. 0.4 @ 65°

DST #2 9744 - 9838:

TOOL OPEN 4 HRS & 15 min - fair blow - rec 455' drlg. mud & 3731' sulf. wtr - Sample chamber cont: 750# press & 2200cc sulf. wtr - 1 hr ISIP 3680# - 2 hr 2nd SIP 3635# - 2 hr FSIP 3635# - IF 92-461# - 2 hr 2nd flow 461 - 1379# - 2 hr FF 461 - 1379# - BHT 1440

DST #3 11,365 - 11,391':

15" pre-flow, weak blow - 1 hr ISIP - 2 hr flow - weak blow - 2 hr SI - 6 hr FF - weak blow - 6 hr FSIP - rec. 377' sli GCØF - Sample chamber cont: 110# press - 0.42 CFG-no fluid - HPI & HPO 5290# - IF 47# - 2nd flow 119#-FF 142# - ISIP 142# - 2nd SIP 214# - FSIP 214# - BHT 1680

DST #4 11,385 - 11,421':

15" pre-flow, fair blow - GTS 12" - 90 min ISIP - tool open 3 hrs on 2nd flow, cont. good blow - MTS 1 hr 48 min - OTS 1 hr 53 min - cleaned to pits 7 min - 24/64" ck for 1/2 hr flwd 8.5 BO w/TP 100-360# - next 1/2 hr flwd 11.5 BO w/TP 360-300# - Will shut in one hr for 4 hr 2nd SI & re-open for additional testing. - Results of DST #4 - well flwd 20 BO 1st hr & 17 BO 2nd hr - SI 4 hrs & well flwd 24.5 BO - re-opened for 1 hr & well flwd 1 BO but was loading up - had 3 hr FSIP - rec. total of 112 BO - no wtr 5 hrs & 15 min - Sample chamber cont: 1300# pressure, 7.2 CFG, 1300cc oil, no wtr (oil grav. 43.3 @ 60°) BHT 168 - HPI & HPO 5220# - IF 486 - 625# - 2nd flow 740-2147 - final flow 1041 - 1778 - All shut in pressures were 2836# - GOR 700:1

DST #5 11421 - 11,461':

15" pre-flow, 1,000' WC, fair blow, incr. to good blow - 90 min ISIP - 4 hr 2nd flow - good blow, good blow - GTS 2 hrs (2 hrs & 15 min total) TSTM & decr. - 4 hr 2nd SI - 1 hr FF, good blow, decr. to fair blow - 4 hr FSIP - rec 1,000' WC & 6 BO&GCM, 26 BO - (grav 43.5 @ 60°) - no water - Sample chamber cont: 1250# press, 1400cc oil, 2.4 CFG-no wtr - HPI 5379 - HPO 5333 - ISIP 2951# - 2 nd SIP 2951# - FSIP 2951# - IF 509 - 648#- 2nd flow 648-1433# - FF 1433 - 1755# - BHT 1700

DST #6 11461 - 11511':

15" pre-flow, fair blow incr. to good 5 min - 90 min ISIP - 4 hr flow - open on 1/2" choke - WCTS 12 min - cleaned to pit 13 min - flwd 35 min on 1/2" ck & made 29 BO - TP 200 - 460# - flwd 1 hr on 3/8" ck & made 28 BO - TP 460# - flwd 1 hr on 3/8" ck & made 28 BO - TP 480# - flwd 1 hr on 3/8" ck & made 26 BO - TP 480# - 4 hr 2nd SI - 1 hr FF on 3/8" ck made 19 BO - TP 480# - 4 hr FSIP - G.V. 683 - GOR 1,000 - flwd 118 BO during SI periods - R.O. 10 BO&GCW & 23 BO (25% salt water) - rec. below rev. sub 90' salt water - HPI & HPO 5485# - IF 2369-2498# - 2nd flow 2432-2850 - FF 2279 - 2762 - ISIP 3026 - 2nd SI 3004 - FSIP 3004 - BHT 1700 - oil grav 43 @ 60° - Sample chamber did not work - total rec 5 hrs & 15 min was 271 BO