

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

5a. Indicate Type of Lease
State ☒ Fee ☐
5. State Oil & Gas Lease No.

1. TYPE OF WELL
OIL WELL ☐ GAS WELL ☐ DRY ☐ OTHER ☐
2. TYPE OF COMPLETION
NEW WELL ☐ WORK OVER ☐ DEEPEN ☐ PLUG BACK ☒ DIFF. RESVR. ☐ OTHER ☐

7. Unit Agreement Name
8. Farm or Lease Name
UTP
9. Well No.
2
10. Field and Pool, or Wildcat
Anderson Ranch
Wolfcamp *NORTH*

Name of Operator
Santa Fe Energy Operating Partners, L.P.
Address of Operator
500 W. Illinois, Suite 500, Midland, TX 79701
Location of Well

3. LETTER G LOCATED 1650 FEET FROM THE North LINE AND 1980 FEET FROM
East LINE OF SEC. 21 TWP. 15S RGE. 32E NMPM

12. County
Lea

4. Date Spudded	16. Date T.D. Reached	17. Date Compl. (Ready to Prod.)	18. Elevations (DF, RKB, RT, GR, etc.)	19. Elev. Casinghead
		6-9-88	4318.8' KB	
5. Total Depth	21. Plug Back T.D.	22. If Multiple Compl., How Many	23. Intervals Drilled By	Rotary Tools
12,502'	12,012'			Cable Tools

6. Producing Interval(s), of this completion - Top, Bottom, Name
9816-9863'

7. Type Electric and Other Logs Run
27. Was Well Cored

CASING RECORD (Report all strings set in well)					
CASING SIZE	WEIGHT LB./FT.	DEPTH SET	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
No change					

LINER RECORD					30. TUBING RECORD		
SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN	SIZE	DEPTH SET	PACKER SET
					2 3/8	9688	9688

8. Perforation Record (Interval, size and number)	32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.
12361-12381 - Morrow	
9816-9826' (40 holes)	
9845-9851' (24 holes)	
9859-9863' (9 holes)	
	DEPTH INTERVAL
	AMOUNT AND KIND MATERIAL USED
	12,361-381' CIBP @ 12,047' w/35' cmt on top
	9,816-863' Natural completion

9. First Production		Production Method (Flowing, gas lift, pumping - Size and type pump)				Well Status (Prod. or Shut-in)	
6-9-88		Flowing				Production	
Date of Test	Hours Tested	Choke Size	Prod'n. Per Test Period	Oil - Bbl.	Gas - MCF	Water - Bbl.	Gas - Oil Ratio
6-9-88	24	13/64		113	144	0	1270
Flow Tubing Press.	Casing Pressure	Calculated 24-Hour Rate	Oil - Bbl.	Gas - MCF	Water - Bbl.	Oil Gravity - API (Corr.)	
500			113	144	0		

10. Disposition of Gas (Sold, used for fuel, vented, etc.)
Sold
Test Witnessed By

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 Billie Hart TITLE Sr. Production Clerk DATE 8-18-88

INSTRUCTIONS

This form is to be filed with the appropriate District Office of the Division not later than 20 days after the completion of any newly-drilled or reopened 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 filed in quintuplicate 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. Anhy _____	T. Canyon _____	T. Ojo Alamo _____	T. Penn. "B" _____
T. Salt _____	T. Strawn _____	T. Kirtland-Fruitland _____	T. Penn. "C" _____
B. Salt _____	T. Atoka _____	T. Pictured Cliffs _____	T. Penn. "D" _____
T. Yates _____	T. Miss _____	T. Cliff House _____	T. Leadville _____
T. 7 Rivers _____	T. Devonian _____	T. Menefee _____	T. Madison _____
T. Queen _____	T. Silurian _____	T. Point Lookout _____	T. Elbert _____
T. Grayburg _____	T. Montoya _____	T. Mancos _____	T. McCracken _____
T. San Andres _____	T. Simpson _____	T. Gallup _____	T. Ignacio Qtzte _____
T. Glorieta _____	T. McKee _____	Base Greenhorn _____	T. Granite _____
T. Paddock _____	T. Ellenburger _____	T. Dakota _____	T. _____
T. Blinebry _____	T. Gr. Wash _____	T. Morrison _____	T. _____
T. Tubb _____	T. Granite _____	T. Todilto _____	T. _____
T. Drinkard _____	T. Delaware Sand _____	T. Entrada _____	T. _____
T. Abo _____	T. Bone Springs _____	T. Wingate _____	T. _____
T. Wolfcamp _____	T. _____	T. Chinle _____	T. _____
T. Penn. _____	T. _____	T. Permian _____	T. _____
T. Cisco (Bough C) _____	T. _____	T. Penn. "A" _____	T. _____

OIL OR GAS SANDS OR ZONES

No. 1, from _____ to _____ No. 4, from _____ to _____
No. 2, from _____ to _____ No. 5, from _____ to _____
No. 3, from _____ to _____ No. 6, from _____ to _____

IMPORTANT WATER SANDS

Include data on rate of water inflow and elevation to which water rose in hole.

No. 1, from _____ to _____ feet. _____

No. 2, from _____ to _____ feet. _____

No. 3, from _____ to _____ feet. _____

No. 4, from _____ to _____ feet. _____

FORMATION RECORD (Attach additional sheets if necessary)

From	To	Thickness in Feet	Formation	From	To	Thickness in Feet	Formation
							<p>RECEIVED</p> <p>OCT 10 1988</p> <p>OCD HOBBS OFFICE</p>

RECEIVED

OCT 10 1988

OCD
HOBBS OFFICE

OIL CONSERVATION DIVISION
P. O. BOX 7000
SANTA FE, NEW MEXICO 87501REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.U.S.	
LAND OFFICE	
TRANSPORTER	
OIL	
GAS	
OPERATOR	
PROMOTION OFFICE	

I. OPERATOR

Santa Fe Energy Operating Partners, L.P.

Address

500 W. Illinois, Suite 500, Midland, TX 79701

Reason(s) for filing (Check proper box)

New Well ☐ Change in Transporter of: Oil ☐ Dry Gas ☐

Recompletion ☒ Casinghead Gas ☐ Condensate ☐

Change in Ownership ☐

Other (Please explain)

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name UTP Well No. 2 Pool Name, including Formation N. Anderson Ranch Wolfcamp Kind of Lease State, Federal or Fee State Lease No.

Location

Unit Letter G ; 1650 Feet From The North Line and 1980 Feet From The East

Line of Section 21 Township 15S Range 32E, NMPM, Lea County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

SCURLOCK PERMIAN CORP EFF 9-1-91

Name of Authorized Transporter of Oil ☒ or Condensate ☐

Permian Corporation SCURLOCK PERMIAN CORP EFF 9-1-91 Address (Give address to which approved copy of this form is to be sent)

P. O. Box 3119, Midland, TX 79702

Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐

Conoco, Inc. Address (Give address to which approved copy of this form is to be sent)

7408 Andrews Hwy, Odessa, TX 79765

If well produces oil or liquids, give location of tanks. Unit G Sec. 21 Twp. 15 Rge. 32 Is gas actually connected? Yes When 6-7-88

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 ~~5-6-88~~ plug back 6-6-88 Date Compl. Ready to Prod. 6-9-88 Total Depth 12,502' P.B.T.D. 12,012'

Elevations (DF, RKB, RT, GR, etc.) 4318.8' GR Name of Producing Formation Wolfcamp Top Oil/Gas Pay 8951' Tubing Depth 9688'

Perforations 9816-9863' Depth Casing Shoe 12,502'

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 6-7-88	Date of Test 6-9-88	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 24	Tubing Pressure 500	Casing Pressure 0	Choke Size 13/64
Actual Prod. During Test	Oil-Bbls. 113	Water-Bbls. 0	Gas-MCF 144

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, 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 Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Billie Hays
(Signature)

Sr. Production Clerk

(Title)

6-10-88

(Date)

OIL CONSERVATION DIVISION

APPROVED JUN 13 1988, 19

BY ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT SUPERVISOR

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 multiple