

# DRILLER'S LOG

-0-	-	924	Red Bed
924	-	1,275	Red Bed and Anhydrite
1,275	-	1,482	Anhydrite
1,482	-	1,791	Anhydrite and Salt
1,791	-	2,815	Salt and Anhydrite
2,815	-	3,015	Anhydrite and Salt
3,015	-	3,049	Anhydrite
3,049	-	3,317	Anhydrite and Lime
3,317	-	5,104	Lime
5,104	-	5,200	Lime and Sand
5,200	-	6,075	Lime
6,075	-	6,990	Lime and Sand
6,990	-	7,177	Lime, Sand and Shale
7,177	-	7,543	Lime and Sand
7,543	-	8,154	Lime, Sand and Shale
8,154	-	10,645	Lime and Shale
10,645	-	10,709	Lime, Shale and Sand
10,709	-	11,630	Lime and Shale
11,630	-	11,767	Shale
11,767	-	11,956	Shale and Lime
11,956	-	12,045	Shale
12,045	-	12,092	Shale and Lime
12,092	-	12,692	Lime and Shale
12,692	-	12,863	Shale and Lime
12,863	-	13,125	Lime and Shale
13,125	-	13,240	Shale
13,240	-	13,399	Shale and Sand
13,399	-	13,469	Shale
13,469	-	13,512	Shale and Lime
13,512	-	13,612	Lime, Shale and Sand
13,612	-	13,663	Shale, Sand and Lime
13,663	-	13,770	Shale
13,770	-	13,800 TD	Lime and Shale

NO. OF COPIES RECEIVED	
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LAND OFFICE	
TRANSPORTER:	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

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

Operator Inexco Oil Company	
Address 1100 Milam Bldg., Suite 1900, Houston, TX 77002	
Reason(s) for filing (Check proper box)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Other (Please explain)	

If change of ownership give name  
and address of previous owner

I. DESCRIPTION OF WELL AND LEASE

Lease Name Federal Com. 7	Well No. 2	Pool Name, Including Formation West Tonto Penn-Morrow	Kind of Lease State, Federal or Fee	State	Lease No. NM2843A
Location					
Unit Letter <u>E</u> : <u>1980</u> Feet From The <u>N</u> Line and <u>660</u> Feet From The <u>W</u>					
Line of Section <u>7</u> Township <u>19S</u> Range <u>33E</u> , NMPM, <u>Lea</u> County					

I. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Koch Oil Company	P. O. Box 3609, Midland, TX 79701					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Llano, Inc.	P. O. Drawer 1320, Hobbs, NM 88240					
If well produces oil or liquids, give location of tanks.	Unit E	Sec. 7	Twp. 19S	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: no

V. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
		X	X					
Date Spudded 01/18/79	Date Compl. Ready to Prod. 4/2/79		Total Depth 13,800		P.B.T.D. 13,636			
Elevations (DF, RKB, RT, GR, etc.) 3659.4	Name of Producing Formation Morrow		Top Oil/Gas Pay 12,782		Tubing Depth 13,105			
Perforations 13,527-13,536'					Depth Casing Shoe 13,800			

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17 1/2	13 3/8	509.50	485
12 1/4	8 5/8	5104.00	2500
7 7/8	5 1/2	13800.00	225

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 2317	Length of Test 1 hr.	Bbls. Condensate/MMCF -0-	Gravity of Condensate -0-
Testing Method (pitot, back pr.) Back pressure	Tubing Pressure (Shut-in) 4100	Casing Pressure (Shut-in) P. O.	Choke Size 1/2

I. 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.

A. K. Gideons  
(Signature) A. K. Gideons

Chief Clerk

4/30/79  
(Date)

OIL CONSERVATION COMMISSION

APPROVED MAY 10 1979, 19  
BY [Signature]  
TITLE SUPERVISOR DISTRICT I

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.