

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

NO. OF ESPING DEVICES	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

OIL CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-01-78
Format 06-01-83
Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator
AMOCO PRODUCTION COMPANY

Address
P.O. BOX 68 HOBBS, NEW MEXICO 88240

Reason(s) for filing (Check proper box)

☐ New Well	Change in Transporter of: ☐ Oil ☐ Dry Gas ☐ Casinghead Gas ☐ Condensate	Other (Please explain) Request for allowable
☒ Recompletion		
☐ Change in Ownership		

If change of ownership give name and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name Federal AW	Well No. 1	Well Name, including formation Adriatic & Lusk	Kind of Lease Federal	Lease No. 12412
Location E 1980 Feet From The North Line and 660 Feet From The West	Ind. Delaware 7-1-87			
Line of Section 26	Township 19-S	Range 32-E	County NMPLM Lea	

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

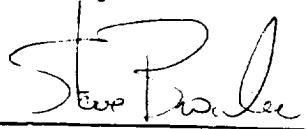
Name of Authorized Transporter of Oil ☒ or Condensate ☐ AMOCO PRODUCTION COMPANY (Trucks)	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1183, Houston, TX 77001
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐ Conoco Inc.	Address (Give address to which approved copy of this form is to be sent) P. O. Box 2587, Hobbs, NM 88240
If well produces oil or liquids, give location of tanks. Unit: E Sec: 26 Twp: 19 Rge: 32	Is gas actually connected? Yes When: 1-27-87

If this production is commingled with that from any other lease or pool, give commingling order number: _____

NOTE: Complete Parts IV and V on reverse side if necessary.

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 is true and complete to the best of my knowledge and belief.


S. Brownlee
(Signature)
Administrative Analyst
(Title)
2-12-87
(Date)

OIL CONSERVATION DIVISION
FEB 16 1987
APPROVED
BY **ORIGINAL SIGNED BY JERRY SEXTON**
TITLE **DISTRICT I SUPERVISOR**

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 (note 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.

2A Bone Spring

IV. COMPLETION DATA

Designate Type of Completion - (X)		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Resist.	Diff. R.
		X					X		
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.				
	1-26-87		13,520		5656				
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth				
3581.8 GL	Delaware		4848						
Perforations				Depth Casing Shoe					
4848-4866									
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE		CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17-1/2"		13-3/8"		512		475 Class C			
12-1/4"		9-5/8"		5745		1425 sx 1t, 510 Class F			
8-3/4"		5-1/2"		13520		1850 sx 1t, 700 Class F			

V. TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top ci able for this depth or bc for full 24 hours)

Date First New Oil Run To Tanks		Date of Test	Producing Method (if low, pump, gas lift, etc.)	
1-26-87		1-27-87	Pumping	
Length of Test	Testing Pressure		Casing Pressure	Choke Size
24 hrs.				
Actual Prod. During Test	Oil-Gals.	Water-Bbls.	Gas-MCF	
	3	10	4	

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Galt-1a)	Casing Pressure (Edac-1a)	Choke Size

RECEIVED
FEB 13 1987
GCE
STAFF OFFICE

MEXICO OIL CONSERVATION COMMISSION
WELL LOCATION AND ACREAGE DEDICATION PLAT

Form C-102
Supersedes C-128
Effective 1-4-65

All distances must be from the outer boundaries of the Section.

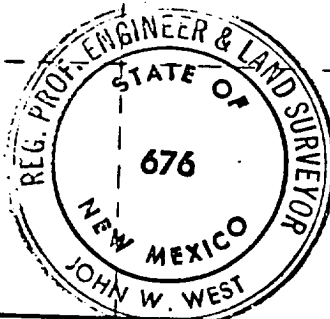
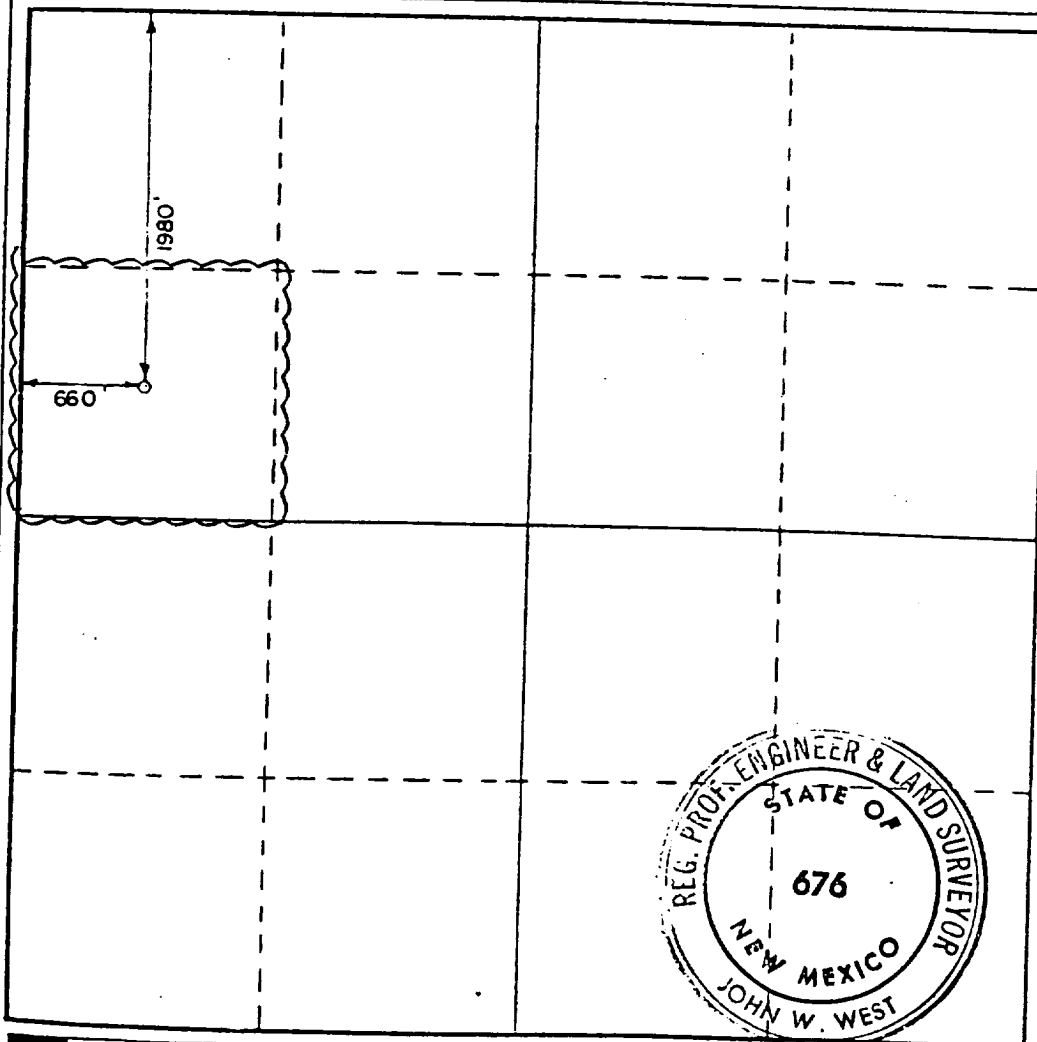
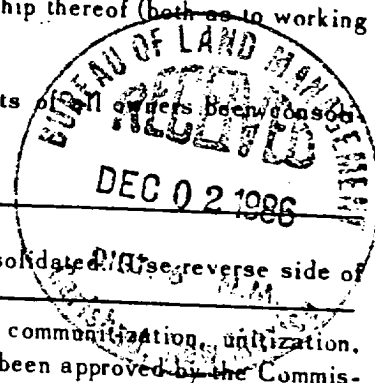
Operator AMOCO Production Co.			Lease Federal AW		Well No. 1
Unit Letter E	Section 26	Township 19South	Range 32 East	County Lea	
Actual Footage Location of Well: 1980 feet from the North line and 660 feet from the West line					
Ground Level Elev. 3581.8	Producing Formation Delaware		Pool Und. Delaware	Dedicated Acreage: 40 Acres	

1. Outline the acreage dedicated to the subject well by colored pencil or hachure marks on the plat below.
2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).
3. If more than one lease of different ownership is dedicated to the well, have the interests dated by communitization, unitization, force-pooling, etc?

☐ Yes ☐ No If answer is "yes," type of consolidation _____

If answer is "no," list the owners and tract descriptions which have actually been consolidated (Use reverse side of this form if necessary.) _____

No allowable will be assigned to the well until all interests have been consolidated (by communitization, unitization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interests, has been approved by the Commission.



CERTIFICATION

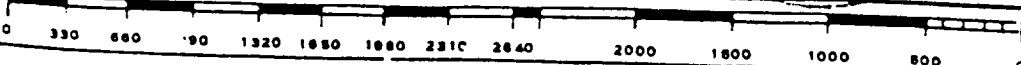
I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.

Name
Steve Brownlee
Position
Admin. Analyst
Company
Amoco Production Company
Date
December 1, 1986

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my knowledge and belief.

Date Surveyed
7-3-1980
Registered Professional Engineer and/or Land Surveyor

John W. West
Certificate No. **JOHN W. WEST 676**
PATRICK A. ROMERO 6685
Ronald J. Eidson 3239



RECEIVED
FEB 13 1987
GCHQ
HQS/OPS OFFICE

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
HOBBS, NEW MEXICO 88240

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. TYPE OF WORK

DRILL ☐

DEEPEN ☐

PLUG BACK ☒

5. LEASE DESIGNATION AND SERIAL NO.

NM-12412

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Federal "AW"

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Delaware

11. SEC., T., R., M., OR BLK.
AND SURVEY OR AREA

26-19-32

12. COUNTY

Lea

13. STATE

NM

b. TYPE OF WELL

OIL
WELL ☒

GAS
WELL ☐

OTHER

SINGLE
ZONE ☐

MULTIPLE
ZONE ☐

2. NAME OF OPERATOR

Amoco Production Company

3. ADDRESS OF OPERATOR

P. O. Box 68 Hobbs, NM 88240

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.)

At surface 1980' FNL x 660' FWL, Sec. 26

At proposed prod. zone (Unit E, SW/4 NW/4)

14. DISTANCE IN MILES AND DIRECTION FROM NEAREST TOWN OR POST OFFICE*

3002527017

10. DISTANCE FROM PROPOSED*

LOCATION TO NEAREST
PROPERTY OR LEASE LINE, FT.
(Also to nearest drlg. unit line, if any)

16. NO. OF ACRES IN LEASE

17. NO. OF ACRES ASSIGNED
TO THIS WELL

40

18. DISTANCE FROM PROPOSED LOCATION*

TO NEAREST WELL, DRILLING, COMPLETED,
OR APPLIED FOR, ON THIS LEASE, FT.

19. PROPOSED DEPTH

10,715

20. ROTARY OR CABLE TOOLS

21. ELEVATIONS (Show whether DF, RT, GR, etc.)

3581.8' GL

22. APPROX. DATE WORK WILL START*

23.

PROPOSED CASING AND CEMENTING PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	QUANTITY OF CEMENT
17-1/2"	13-3/8"	48#	512'	475 sx Class C
12-1/4"	9-5/8"	40#	5745'	1425 sx Lt., 510 sx Class H
8-3/4"	5-1/2"	17#, 20#, 23#	13520'	1850 sx Lt., 700 sx Class H

Propose to recompleate subject well from Bone Springs to Delaware formation as follows:

MIRU-SU. POH w/production equip. RIH w/CIBP for 5-1/2" casing and set at 10,450'. Cap plug w/35' of Class H neat cement. (Top of cement at 10,415'). Spot above cement 106 barrels of 10# brine w/25# gel/bbl. Pull up to 7700' and spot a 25 sack Class H neat cement plug to 7500'. (Top of Bone Springs at 7560'.) Pull up to 5858' and spot a 25 sack Class H neat cement plug to 5656'. (9-5/8 casing shoe set at 5756'.) RIH and perf the Delaware 4848-4866' w/4 DPJSPF. Perf at 90° or 120° phasing w/3-1/8 hollow carrier casing gun. RIH w/treating packer for 5-1/2" casing unloaded and 2-7/8" N-80 tubing. Set packer at 4750'. Acidize down tubing w/total of 1500 gals of 7-1/2% HCL acid. Flush acid w/35 bbls of 2% KCL fresh water. Acid to contain 1 gal/1000 gals acid WA-211 corrosion inhibitor. 1 gal/1000 gals acid clay stabilizer, 2 gals/1000 gals acid WA-212 surfactant. Shut in well for two hours. Swab to recover load. Fracture stimulate down tubing w/total of 6000 gals of 30# HPG gelled, cross linked 2% KCL and 10,500# of

IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM: If proposal is to deepen or plug back, give data on present productive zone and proposed new productive zone. If proposal is to drill or deepen directionally, give pertinent data on subsurface locations and measured and true vertical depths. Give blowout preventer program, if any.

24.

SIGNED

Steve Brownlee

TITLE

Admin. Analyst

DATE

12-1-86

(This space for Federal or State office use)

PERMIT NO.

APPROVAL DATE

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

12-4-86

*See Instructions On Reverse Side

RECEIVED
DEC 8 1986
OCD
HOBBS OFFICE

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. TYPE OF WORK

DRILL ☐

DEEPEN ☐

PLUG BACK ☐

b. TYPE OF WELL

OIL
WELL ☐

GAS
WELL ☐

OTHER

SINGLE
ZONE ☐

MULTIPLE
EDGES ☐

2. NAME OF OPERATOR

3. ADDRESS OF OPERATOR

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements*)
At surface

At proposed prod. zone

14. DISTANCE IN MILES AND DIRECTION FROM NEAREST TOWN OR POST OFFICE*

15. DISTANCE FROM PROPOSED*
LOCATION TO NEAREST
PROPERTY OR LEASE LINE, FT.
(Also to nearest drlg. unit line, if any)

16. NO. OF ACRES IN LEASE

17. NO. OF ACRES ASSIGNED
TO THIS WELL

18. DISTANCE FROM PROPOSED LOCATION*
TO NEAREST WELL, DRILLING, COMPLETED,
OR APPLIED FOR, ON THIS LEASE, FT.

19. PROPOSED DEPTH

20. ROTARY OR CABLE TOOLS

21. ELEVATIONS (Show whether DF, RT, GR, etc.)

22. APPROX. DATE WORK WILL START*

23.

PROPOSED CASING AND CEMENTING PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	QUANTITY OF CEMENT

12/20 mesh Ottawa sand. Frac at 12 BPM. Fluid to contain 2 gal surfactant per/1000 gallons. Max Pressure 6000#. Expected pressure 3500#. Shut in well overnight. Swab to evaluate productivity. Analyze results.

IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM: If proposal is to deepen or plug back, give data on present productive zone and proposed new productive zone. If proposal is to drill or deepen directionally, give pertinent data on subsurface locations and measured and true vertical depths. Give blowout preventer program, if any.

24.

SIGNED

TITLE

DATE

(This space for Federal or State office use)

PERMIT NO.

APPROVAL DATE

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions On Reverse Side

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

RECEIVED
JFC
JUN 8 1986
HARRIS OFFICE

**MEXICO OIL CONSERVATION COMMISSION
WELL LOCATION AND ACREAGE DEDICATION PLAT**

Form C-102
Supersedes C-128
Effective 1-1-65

All distances must be from the outer boundaries of the Section.

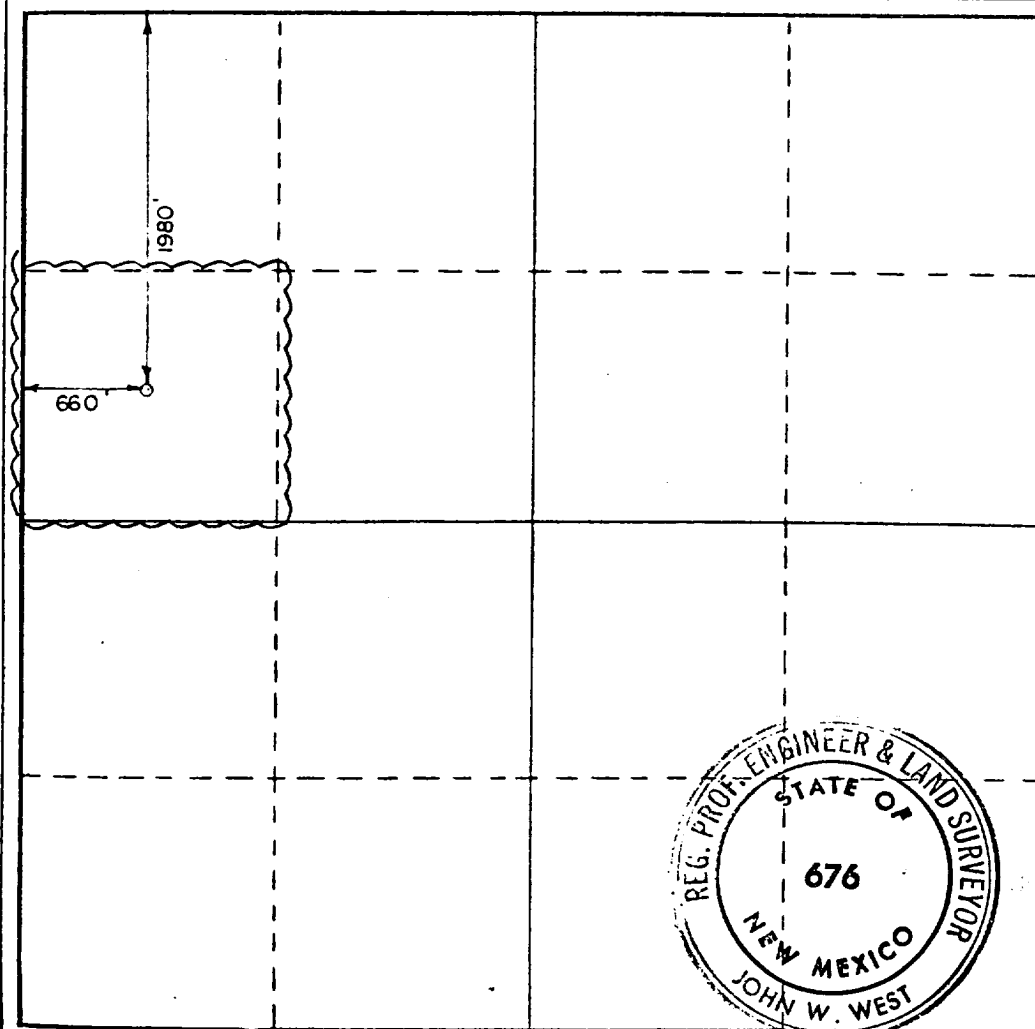
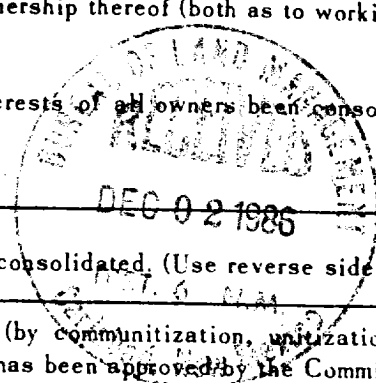
Operator AMOCO Production Co.			Lease Federal AW		Well No. 1
Unit Letter E	Section 26	Township 19South	Range 32 East	County Lea	
Actual Footage Location of Well: 1980 feet from the North line and 660 feet from the West line					
Ground Level Elev. 3581.8	Producing Formation Delaware		Pool Und. Delaware		Dedicated Acreage: 40 Acres

1. Outline the acreage dedicated to the subject well by colored pencil or hachure marks on the plat below.
2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).
3. If more than one lease of different ownership is dedicated to the well, have the interests of all owners been consolidated by communitization, unitization, force-pooling, etc?

☐ Yes ☐ No If answer is "yes," type of consolidation _____

If answer is "no," list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if necessary.) _____

No allowable will be assigned to the well until all interests have been consolidated (by communitization, unitization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interests, has been approved by the Commission.



CERTIFICATION

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.

Name
Steve Brownlee
Position
Admin. Analyst
Company
Amoco Production Company
Date
December 1, 1986

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my knowledge and belief.

Date Surveyed
7-3-1980
Registered Professional Engineer and/or Land Surveyor

Certificate No. **JOHN W. WEST 676**
PATRICK A. ROMERO 6663
Ronald J. Eidson 3239

0 330 660 990 1320 1650 1980 2310 2640 2000 1800 1600 1400 1200 1000 800 0

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-01-78
Format 06-01-83
Page 1

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATION	
PRODUCTION OFFICE	

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator
AMOCO PRODUCTION COMPANY

Address
P.O. BOX 68 HOBBS, NEW MEXICO 88240

Reason(s) for filing (Check proper box)
☒ New Well
☒ Recompletion
☐ Change in Ownership
 Change in Transporter of:
☐ Oil ☐ Dry Gas
☐ Casinghead Gas ☐ Condensate
 Other (Please explain)
Request for Allowable

If change of ownership give name and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE **R-8214 East Leach 5-1-86**

Lease Number Federal AW	Well No. 1	Pool Name, Including Formation Wind. Bone Springs	Kind of Lease Federal	Lease No. NM 12412
Location Unit Letter E : 1980 Feet From The North Line and 660' Feet From The West Line of Section 26 Township 19-S Range 32-E NMPM, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐ Amoco Production Company (Trucks)	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1183, Houston, TX 77001
Name of Authorized Transporter of ☐ or Dry Gas ☐ Conoco Pipeline Company Inc	Address (Give address to which approved copy of this form is to be sent) P.O. Box 2587, Hobbs, NM 88240
If well produces oil or liquids, give location of tanks. Unit E Sec. 26 Twp. 19 Rge. 32	Is gas actually connected? yes When 2-3-86

If this production is commingled with that from any other lease or pool, give commingling order number: _____

NOTE: Complete Parts IV and V on reverse side if necessary.

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 is true and complete to the best of my knowledge and belief.

Beverly A. Otwell
(Signature)
Sr. ADMINISTRATIVE ANALYST
(Title)
2-5-86
(Date)

OIL CONSERVATION DIVISION
APPROVED **FEB 26 1986**
BY **Eddie W. Seay**
TITLE **Oil & Gas Inspector**

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 filled for each pool in multiply completed wells.

IV. COMPLETION DATA

Designate Type of Completion - (X)		Oil well ☒	Gas well	<i>Recomp.</i>			Plug back	Same res.v.	Diff. Res
Date <i>Recomp.</i> 2-3-86	Date Compl. Ready to Prod. 2-3-86	Total Depth 13,520'		P.B.T.D. 10,715'					
Elevations (DF, RKB, RT, GR, etc.) 3581.8' GL	Name of Producing Formation <i>Stone Springs</i>	Top Oil/Gas Pay 10482'		Tubing Depth 10,525'					
Perforations 10482' - 10516'				Depth Casing Shoe					

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17 1/2"	13 3/8"	512'	475 at Class C
12 1/4"	9 5/8"	5745'	1425 at Lite 510 Class H
8 3/4"	5 1/2"	13520'	1850 at Lite Class H
	2 3/8"	10525'	

V. TEST DATA AND REQUEST FOR ALLOWABLE

(Test must be after recovery of total volume of load off and must be equal to or exceed top cile
ble for this depth or be for full 24 hours)

Date First Flow Oil Run To Tanks 1-29-86	Date of Test 2-3-86	Producing Method (flow, pump, gas lift, etc.) <i>Pumping</i>	
Length of Test 24 hrs.	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls. 25	Water - Bbls. 0	Gas - MCF 19

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

RECEIVED

FEB 11 1986

HOBBES OFFICE

RECEIVED

FEB - 6 1986

HOBBES OFFICE

UNIT STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLIC
Form 3160-5
Form 3160-5

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL ☐ GAS WELL ☐ OTHER ☐	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR AMOCO PRODUCTION COMPANY	8. FARM OR LEASE NAME Federal AW
3. ADDRESS OF OPERATOR P. O. BOX 68 HOBBS, NEW MEXICO 88240	9. WELL NO. 1
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 1980' FNL x 660' FWL Sec. 26 (Unit E, SW1/4, N1/4)	10. FIELD AND POOL, OR WILDCAT Und. Bone Springs
14. PERMIT NO. 3002527017	11. SEC., T., R., M., OR BLM AND SURVEY OR AREA 26-19-32
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3581.8' GL	12. COUNTY OR PARISH Lea
	13. STATE NM

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
(Other) ☐

PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
ABANDON* ☐
CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐
FRACTURE TREATMENT ☐
SHOOTING OR ACIDIZING ☐
(Other) ☐

REPAIRING WELL ☐
ALTERING CASING ☐
ABANDONMENT* ☒

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)

MISU 11-25-85. Kill Well. Installed blow out preventer x released tbg anchor. POH w/tubing. RIH w/ junk basket x gauge ring x run 5 1/2" Cast Iron Bridge Plug x set Bridge Plug at 10,950'. Capped Bridge Plug w/ 35' Cement. Test Csg to 500 PSI O.K. RIH w/Csg. gun and perforated 10,482'-10,516' w/ 4JSPF. RIH w/ 2 3/8" tbg x packer. Set packer at 10,438'. Acidized Bone Springs interval 10482'-10516' x 500 bbls Tylenol x 7000 gals 7 1/2% NEFE HCL acid x Ball Sealers x flushed x 42 bbls water. Ran swab x IFL 9500' x made 1 run. Recovered 3 bbls oil x 0 BLW. Released packer x removed Blow out preventer x packer set at 10,438'. Installed well head x loaded Csg with 38 bbls water x test pkr. 500 psi O.K. Run swab x IFL 1500' x FFL 10400'. Recovered 36 BLW x no oil. Shut in for pressure build up. Released rig 12-6-85. MISU 1-13-86. RISU 1-14-86 x SITP 1500 psi x Csg press. closed 400 psi. Csg bled off in 5 min. Tbg bled off to zero in 2 hours. Recovered 25 bbls oil x pumped 35 bbls fresh water w/ 2% KCL down tbg x released packer x circ hole w/ 60 bbls fresh water w/ 2% KCL. POH w/ tbg x packer. RIH w/ tbg x packer. Packer set at 10,393' x pressure casing 10000 psi O.K. Grac down tubing w/ 12500 gallons 22,750# Proflow sand. Flushed w/ 60 bbls. Max PSI 6400. 14 Hrs. TPC 2700 psi x Csg press. zero. Tbg bled to zero x 10/64 Choke x 4 hrs. Cleaned out sand 10481' to 10,715' x Circ. Hole Clean. POH w/ tbg. Run tbg x tbg anchor. Tbg seating nipple landed at 10,525'. Anchor set at 10,430'. MISU 1-28-86. Installed pumping equipment and prepared to produce into test tanks. Pumped 13 BD x 28W x 20 MCF hrs 07th IP in 24 hours.

0+6 BLM-C 1-SUN 1-J.R.BARNETT HOU RM. 21.156 1-F.J.NASH HOU RM. 4.206 1-BAO

18. I hereby certify that the foregoing is true and correct

SIGNED B.A. Ottwell

TITLE SENIOR ADMINISTRATIVE ANALYST DATE 2-4-86

(This space for Federal or State office use)

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

ACCEPTED FOR RECORD

MDQ

*See Instructions on Reverse Side

Instructions

General: This form is designed for submitting proposals to perform certain well operations, and reports of such operations when completed, as indicated, on Federal and Indian lands pursuant to applicable Federal law and regulations, and, if approved or accepted by any State, on all lands in such State, pursuant to applicable State law and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State office.

Item 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

Item 17: Proposals to abandon a well and subsequent reports of abandonment should include such special information as is required by local Federal and/or State offices. In addition, such proposals and reports should include reasons for the abandonment; data on any former or present productive zones, or other zones with present significant fluid contents not sealed off by cement or otherwise; depths (top and bottom) and method of placement of cement plugs; mud or other material placed below, between and above plugs; amount, size, method of parting of any casing, liner or tubing pulled and the depth to top of any left in the hole; method of closing top of well; and date well site conditioned for final inspection looking to approval of the abandonment.

PRIVACY ACT

The Privacy Act of 1974 and the regulation in 43 CFR 2.48(d) provide that you be furnished the following information in connection with information required by this application.

AUTHORITY: 30 U.S.C. 181 et. seq., 351 et. seq., 25 U.S.C. et. seq.; 43 CFR 3160.

PRINCIPAL PURPOSE: The information is to be used to evaluate, when appropriate, approve applications, and report completion of secondary well operations, on a Federal or Indian lease.

ROUTINE USES: (1) Evaluate the equipment and procedures used during the proposed or completed subsequent well operations. (2) Request and grant approval to perform those actions covered by 43 CFR 3162.3-2(2). (3) Analyze future applications to drill or modify operations in light of data obtained and methods used. (4)(5) Information from the record and/or the record will be transferred to appropriate Federal, State, local or foreign agencies, when relevant to civil, criminal or regulatory investigations or prosecutions.

EFFECT OF NOT PROVIDING INFORMATION: Filing of this notice and report and disclosure of the information is mandatory once an oil or gas well is drilled.

The Paperwork Reduction Act of 1980 (44 U.S.C. 3501, et. seq.) requires us to inform you that:

This information is being collected in order to evaluate proposed and/or completed subsequent well operations on Federal or Indian oil and gas leases.

This information will be used to report subsequent operations once work is completed and when requested, to obtain approval for subsequent operations not previously authorized.

Response to this request is mandatory for the specific types of activities specified in 43 CFR Part 3160.

RECEIVED
FEB 10 1986
O.C.D.
HOBBS OFFICE

NEW MEXICO OIL CONSERVATION COMMISSION
WELL LOCATION AND ACREAGE DEDICATION PLAT

Form C-122
Supersedes C-128
Effective 1-1-84

All distances must be from the outer boundaries of the Section

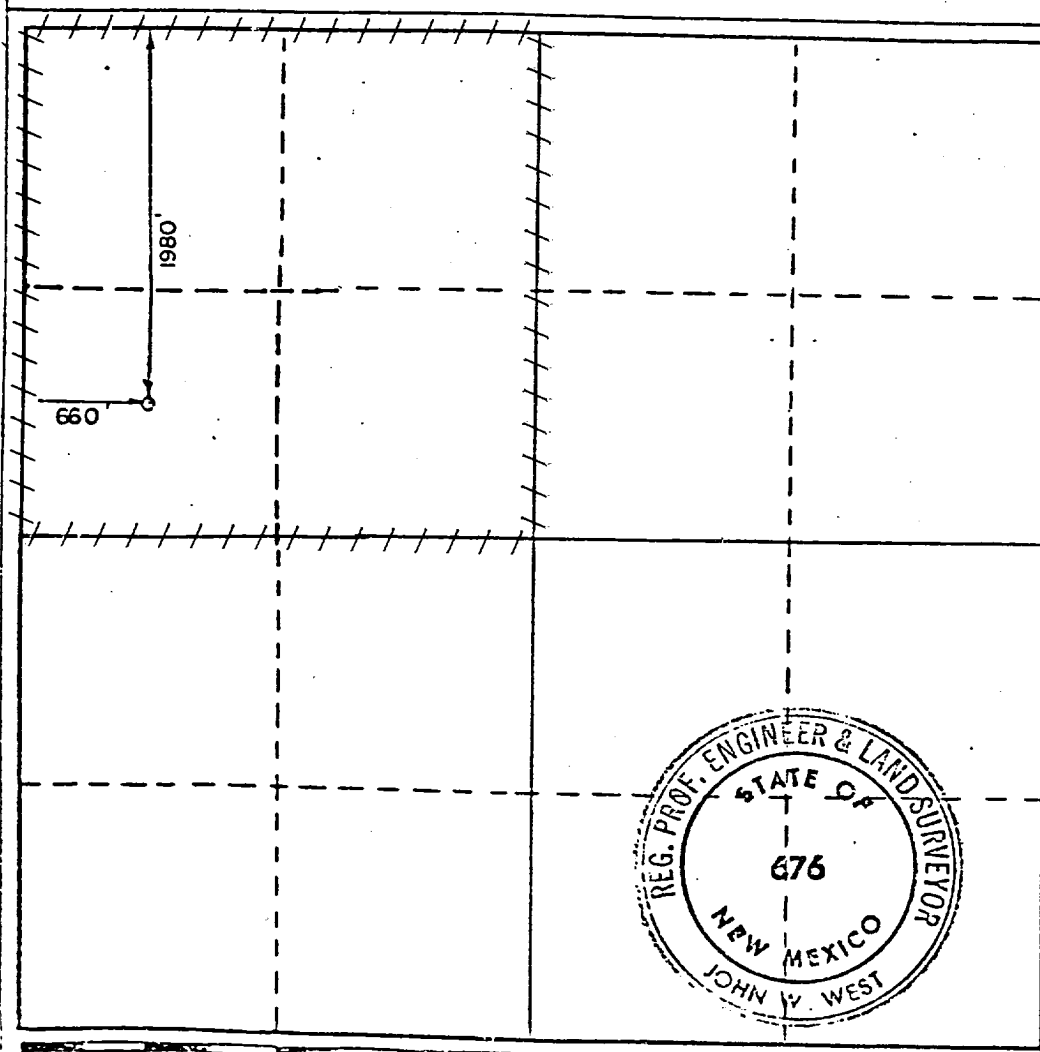
Operator AMOCO Production Co.			Lease Federal AW		Well No. 1
Unit Letter E	Section 26	Township 19South	Range 32 East	County Lea	
Actual Well Location of well: 1980 feet from the North line and 660 feet from the West line					
Ground Level Elev. 3581.8	Producing Formation Bone Springs		Pool East Lusk Bone Springs	Dedicated Acreage 160 Acres	

1. Outline the acreage dedicated to the subject well by colored pencil or hatchure marks on the plat below.
2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).
3. If more than one lease of different ownership is dedicated to the well, have the interests of all owners been consolidated by communitization, unitization, force-pooling, etc?

☐ Yes ☐ No If answer is "yes," type of consolidation _____

If answer is "no," list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if necessary.) _____

No allowable will be assigned to the well until all interests have been consolidated (by communitization, unitization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interests, has been approved by the Commission.



CERTIFICATION

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.

Name
Beverly A. Ottwell
Position
Senior Administrative Analyst
Company
Amoco Production Company
Date
February 24, 1986

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my knowledge and belief.

Date Surveyed
7-3-1980

Registered Professional Engineer and/or Land Surveyor

John W. West
Certificate No. **JOHN W. WEST 676**
PATRICK A. ROMERO 6563
Ronald J. Eagon 3239

0 330 660 990 1320 1650 1980 2310 2640 2970 3300 3630 3960 4290 4620 4950 5280 5610 5940 6270 6600

RECEIVED
FEB 25 1986
O.C.D.
HOBBS OFFICE