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LAND OFFICE	
TRANSPORTER	OIL
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PRODUCTION OFFICE	
OPERATOR	

Obtained 7/1
(Form C-1)

NEW MEXICO OIL CONSERVATION COMMISSION

Santa Fe, New Mexico

FEB 13 1964

WELL RECORD

AREA 640 ACRES
LOCATE WELL CORRECTLY

Mail to District Office, Oil Conservation Commission, to which Form C-101 was sent not later than twenty days after completion of well. Follow instructions in Rules and Regulations of the Commission. Submit in QUINTUPLICATE If State Land submit 6 Copies

Continental Oil Company State H-35
(Company or Operator) (Lease)

Well No. 10-X, in SW 1/4 of NE 1/4, of Sec. 35, T. 17S, R. 34E, NMPM.
Projected to Glorieta & Blinberry Pool, Lea County.

Well is 1980 feet from North line and 1780 feet from East line
of Section 35-17S-34E. If State Land the Oil and Gas Lease No. is B-3196.

Drilling Commenced 12-6, 1963. Drilling was Completed 12-9, 1963.

Name of Drilling Contractor P. L. McFarland, Inc.

Address Midland, Texas

Elevation above sea level at Top of Tubing Head 4011. The information given is to be kept confidential until not confidential, 19.

OIL 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.

CASING RECORD

SIZE	WEIGHT PER FOOT	NEW OR USED	AMOUNT	KIND OF SHOE	CUT AND PULLED FROM	PERFORATIONS	PURPOSE
10 3/4	32.75	new	1596	guide	-	-	surface

MUDDING AND CEMENTING RECORD

SIZE OF HOLE	SIZE OF CASING	WHERE SET	NO. SACKS OF CEMENT	METHOD USED	MUD GRAVITY	AMOUNT OF MUD USED
15"	10 3/4	1606	1,000	Pump & Plug		

RECORD OF PRODUCTION AND STIMULATION

(Record the Process used, No. of Qts. or Gals. used, interval treated or shot.)

Drilled to 1606' & set 10 3/4" surface casing. AFTER NOC, attempted to resume drilling. However, surface casing had collapsed & it was impossible to drill below 1517'. Plugged & abandoned State H-35 No. 10-X on 1-30-64 by spotting the following plugs: 25 sx from 1398-1450 & a 10sx plug at surface. Cleaned location & erected marker.

Result of Production Stimulation
Depth Cleaned Out

If drill-stem or other special tests or deviation surveys were made, submit report on separate sheet and attach hereto

TOOLS USED

Rotary tools were used from 0 feet to 1606 feet, and from _____ feet to _____ feet.
Cable tools were used from _____ feet to _____ feet, and from _____ feet to _____ feet.

PRODUCTION

Put to Producing....., 19.....

OIL WELL: The production during the first 24 hours was.....barrels of liquid of which.....% was
was oil;% was emulsion;% water; and.....% was sediment. A.P.I.
Gravity.....

GAS WELL: The production during the first 24 hours was.....M.C.F. plus.....barrels of liquid Hydrocarbon. Shut in Pressure.....lbs.

Length of Time Shut in.....

PLEASE INDICATE BELOW FORMATION TOPS (IN CONFORMANCE WITH GEOGRAPHICAL SECTION OF STATE):

Southeastern New Mexico

Northwestern New Mexico

T. Anhy.....1520.....	T. Devonian.....	T. Ojo Alamo.....
T. Salt.....	T. Silurian.....	T. Kirtland-Fruitland.....
B. Salt.....	T. Montoya.....	T. Farmington.....
T. Yates.....	T. Simpson.....	T. Pictured Cliffs.....
T. 7 Rivers.....	T. McKee.....	T. Menefee.....
T. Queen.....	T. Ellenburger.....	T. Point Lookout.....
T. Grayburg.....	T. Gr. Wash.....	T. Mancos.....
T. San Andres.....	T. Granite.....	T. Dakota.....
T. Glorieta.....	T.	T. Morrison.....
T. Drinkard.....	T.	T. Penn.....
T. Tubbs.....	T.	T.
T. Abo.....	T.	T.
T. Penn.....	T.	T.
T. Miss.....	T.	T.

FORMATION RECORD

From	To	Thickness in Feet	Formation	From	To	Thickness in Feet	Formation
0	1520	1520	Surface sands, red beds & anhy.				
1520	1606	86	Anhy & shale				

ATTACH SEPARATE SHEET IF ADDITIONAL SPACE IS NEEDED

I hereby swear or affirm that the information given herewith is a complete and correct record of the well and all work done on it so far as can be determined from available records.

February 7, 1964

Company or Operator Continental Oil Company Address Box 460, Hobbs, New Mexico (Date) _____

Name..... Position of the Staff Supervisor.....