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Form C-105  
Revised 11-1-88

# NEW MEXICO OIL CONSERVATION COMMISSION WELL COMPLETION OR RECOMPLETION REPORT AND LOG

5a. Indicate Type of Lease	
State <input type="checkbox"/>	Fee <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.	

1a. TYPE OF WELL	
OIL WELL <input checked="" type="checkbox"/>	GAS WELL <input type="checkbox"/> DRY <input type="checkbox"/> OTHER <input type="checkbox"/>
b. TYPE OF COMPLETION	
NEW WELL <input checked="" type="checkbox"/> WORK OVER <input type="checkbox"/> DEEPEN <input type="checkbox"/>	PLUG BACK <input type="checkbox"/> DIFF. RESVR. <input type="checkbox"/> OTHER <input type="checkbox"/>

7. Unit Agreement Name
8. Farm or Lease Name
Amoco "E" Fee
9. Well No.
1
10. Field and Pool, or Wildcat
Quail (Queen)

2. Name of Operator	
TXO Production Corp.	
3. Address of Operator	
900 Wilco Bldg., Midland, Texas 79701	

4. Location of Well	
UNIT LETTER I	LOCATED 1780 FEET FROM THE South LINE AND 660 FEET FROM
THE East	LINE OF SEC. 18 TWP. 19-S RGE. 35-E NMPM

11. County
Lea

15. Date Spudded	16. Date T.D. Reached	17. Date Compl. (Ready to Prod.)	18. Elevations (DF, RKB, RT, GR, etc.)	19. Elev. Casinghead
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20. Total Depth	21. Plug Back T.D.	22. If Multiple Compl., How Many	23. Intervals Drilled By	Rotary Tools	Cable Tools
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24. Producing Interval(s), of this completion - Top, Bottom, Name	25. Was Directional Survey Made
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26. Type Electric and Other Logs Run	27. Was Well Cored
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28. CASING RECORD (Report all strings set in well)					
CASING SIZE	WEIGHT LB./FT.	DEPTH SET	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED

29. LINER RECORD				30. TUBING RECORD			
SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN	SIZE	DEPTH SET	PACKER SET

31. Perforation Record (Interval, size and number)		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
5226-32'; 3 1/8"; (14 holes)		DEPTH INTERVAL	
5072-75', 5084-87', 5114-19'; 3 1/8"; (14 holes)		AMOUNT AND KIND MATERIAL USED	
		5226-32' Spt 250 gals 15% NEFE, Re-acid w/1500 gals 15% NEFE.	
		Set CIBP @ 5200' w/35' cmt.	
		5072-5119' Spt 250 gals 7 1/2% NEFE, Re-acid	

33. PRODUCTIONW/1800 gals NEFE, Frac w/36,000 gals gel &		
Date First Production	Production Method (Flowing, gas lift, pumping - Size and type pump)	Well Status (Prod. or Shut-in)

Date of Test	Hours Tested	Choke Size	Prod'n. Per Test Period	Oil - bbl.	Gas - MCF	Water - bbl.	Gas - Oil Ratio
Flow Tubing Press.	Casing Pressure	Calculated 24-Hour Rate	Oil - bbl.	Gas - MCF	Water - bbl.	Oil Gravity - API (Corr.)	

34. Disposition of Gas (Sold, used for fuel, vented, etc.)	Test Witnessed by
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35. List of Attachments
** & 75,000# 12/20 sand.

36. 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.	
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SIGNED <u>Beth Cune</u>	TITLE _____	DATE _____
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This form is to be filed with the appropriate District Office of the Commission not later than 20 days after the completion of any newly-drilled or deepened 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.

### Northwestern New Mexico

OIL OR GAS SANDS OR ZONES

## IMPORTANT WATER SANDS

No. 1, from.....to.....feet. ....

No. 2, from.....to.....feet. ....

No. 3, from.....to.....feet. ....

No. 4, from.....to.....feet. ....

From	To	Thickness in Feet	Formation	From	To	Thickness in Feet	Formation

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