

Submit to Appropriate
District Office
State Lease - 6 copies
Fee Lease - 5 copies
D. STRICTLY
P.O. Box 1980, Hobbs, NM 88240

D. DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

D. DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

Form C-105
Revised 1-1-89

WELL API NO. 30-025-30954
5. Indicate Type of Lease STATE ☒ FEE ☐
6. State Oil & Gas Lease No. E-3290

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

1a. Type of Well: OIL WELL ☒ GAS WELL ☐ DRY ☐ OTHER _____	7. Lease Name or Unit Agreement Name Mexico "U"
b. Type of Completion: NEW WELL ☒ WORK OVER ☐ DEEPEN ☐ PLUG BACK ☐ DIPP RESYR ☐ OTHER _____	8. Well No. 3
2. Name of Operator Xeric Oil & Gas Company	9. Pool name or Wildcat Hobbs (G-SA)
3. Address of Operator P.O. Box 51311 Midland, Texas 79710	

4. Well Location Unit Letter <u>B</u> : <u>590</u> Feet From The <u>North</u> Line and <u>2310</u> Feet From The <u>East</u> Line Section <u>8</u> Township <u>19-S</u> Range <u>38-E</u> NMPM <u>Lea</u> County
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10. Date Spudded 9/12/90	11. Date T.D. Reached 9/17/90	12. Date Compl. (Ready to Prod.) 10/25/90	13. Elevations (D/F & RKB, RT, GR, etc.) 3605 GR	14. Elev. Casinghead 3605
15. Total Depth 4300	16. Plug Back T.D. 4096	17. If Multiple Compl. How Many Zones? <u>N/A</u>	18. Intervals Drilled By Rotary Tools All	Cable Tools
19. Producing Interval(s), of this completion - Top, Bottom, Name 4055-4093 Grayburg				20. Was Directional Survey Made Yes
21. Type Electric and Other Logs Run LDT/CNL, DLL/MSFL				22. Was Well Cored No

23. CASING RECORD (Report all strings set in well)					
CASING SIZE	WEIGHT LB./FT.	DEPTH SET	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
8 5/8	24	1546	12 1/4	740 sx Class "C"	
5 1/2	15.5	4300	7 7/8	525 sx Premium Plus	

24. LINER RECORD					25. TUBING RECORD		
SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN	SIZE	DEPTH SET	PACKER SET
					2 3/8	4085	N/A

26. Perforation record (interval, size, and number) 4055-4058 4076-4078 4091-4093 4065-4067 TOTAL 36 holes			27. ACID, SHOT, FRACTURE, CEMENT, SQUEEZE, ETC. DEPTH INTERVAL AMOUNT AND KIND MATERIAL USED 4055-4093 1200 gal 15% NEFE	

28. PRODUCTION							
Date First Production 10/25/90		Production Method (Flowing, gas lift, pumping - Size and type pump) Pumping - 2 x 1 3/4" Tbg pump				Well Status (Prod. or Shut-in) Prod.	
Date of Test 10/23/90	Hours Tested 24	Choke Size 	Prod'n For Test Period 	Oil - Bbl. 29	Gas - MCF 50	Water - Bbl. 195	Gas - Oil Ratio 1724
Flow Tubing Press. 	Casing Pressure 30	Calculated 24-Hour Rate 	Oil - Bbl. 29	Gas - MCF 50	Water - Bbl. 195	Oil Gravity - API - (Corr.) 38.6	

29. Disposition of Gas (Sold, used for fuel, vented, etc.) Vented	Test Witnessed By M.G. Mooney
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30. List Attachments

31. 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			
Signature <u>M.G. Mooney</u>	Printed Name <u>M.G. Mooney</u>	Title <u>Engineer</u>	Date <u>10/31/90</u>

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 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 25 through 29 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

T. Anhy	1582	T. Canyon	
T. Salt	1692	T. Strawn	
B. Salt	2604	T. Atoka	
T. Yates	2689	T. Miss	
T. 7 Rivers	2819	T. Devonian	
T. Queen	3460	T. Silurian	
T. Grayburg	3869	T. Montoya	
T. San Andres		T. Simpson	
T. Glorieta		T. McKee	
T. Paddock		T. Ellenburger	
T. Blinberry		T. Gr. Wash	
T. Tubb		T. Delaware Sand	
T. Drinkard		T. Bone Springs	
T. Abo		T.	
T. Wolfcamp		T.	
T. Penn		T.	
T. Cisco (Bough C)		T.	

Northwestern New Mexico

T. Ojo Alamo _____	T. Penn. "B" _____
T. Kirtland-Fruitland _____	T. Penn. "C" _____
T. Pictured Cliffs _____	T. Penn. "D" _____
T. Cliff House _____	T. Leadville _____
T. Menefee _____	T. Madison _____
T. Point Lookout _____	T. Elbert _____
T. Mancos _____	T. McCracken _____
T. Gallup _____	T. Ignacio Otzie _____
Base Greenhorn _____	T. Granite _____
T. Dakota _____	T. _____
T. Morrison _____	T. _____
T. Todilto _____	T. _____
T. Entrada _____	T. _____
T. Wingate _____	T. _____
T. Chinle _____	T. _____
T. Permian _____	T. _____
T. Penn "A" _____	T. _____

OIL OR GAS SANDS OR ZONES

No. 1, from.....to.....
No. 2, from.....to.....
No. 3, from.....to.....
No. 4, 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.....

LITHOLOGY RECORD (Attach additional sheet if necessary)

From	To	Thickness in Feet	Lithology	From	To	Thickness in Feet	Lithology
1582	1692	110	Anhydrite				
1692	2604	912	Salt				
2604	2689	85	Anhydrite				
2689	2819	130	Sand & Dolomite				
2819	3460	641	Sand & Dolomite				
3460	3869	409	Sand & Dolomite				
3869	4300	431	Dolomite				

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State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-104
Revised 1-1-89
See Instructions
at Bottom of Page

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

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P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

I. Operator Xeric Oil & Gas Company		Well API No. 30 625 30953
Address P.O. BOX 51311 Midland, Texas 79710		
Reason(s) for Filing (Check proper box) New Well ☒ Change in Transporter of: Recompletion ☐ Oil ☐ Dry Gas ☐ Change in Operator ☐ Casinghead Gas ☐ Condensate ☐		
If change of operator give name and address of previous operator		

II. DESCRIPTION OF WELL AND LEASE

Lease Name Mexico "U"	Well No. 3	Pool Name, Including Formation Hobbs (G-S.A.)	Kind of Lease ☒ State ☐ Federal or Fee	Lease No. E-3290
Location Unit Letter B : 590 Feet From The North Line and 2310 Feet From The East Line Section 8 Township 19-S Range 38-E, NMPM, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐ JM Petroleum Corp.	Address (Give address to which approved copy of this form is to be sent) 2323 Bryan, Lock Box #185 Dallas Tx. (2500 Allianz Financial Centre) 75201			
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐ Phillips 66 Natural Gas Co.	Address (Give address to which approved copy of this form is to be sent) 4001 Penbrook Odessa, TX 79761			
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.
Is gas actually connected? When ? Waiting for conn. should be hooked up in 2 weeks				

If his 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 Spudded 9/12/90	Date Compl. Ready to Prod. 10/25/90		Total Depth 4300		P.B.T.D. 4096			
Elevations (DF, RKB, RT, GR, etc.) 3605 GR	Name of Producing Formation Grayburg		Top Oil/Gas Pay 4055		Tubing Depth 4085			
Perforations 4055-4093					Depth Casing Shoe 4300			

TUBING, CASING AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12 1/4	8 5/8"	1546	740
7 7/8	5 1/2	4300	525

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 Tank 10/25/90	Date of Test 10/23/90	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24 hrs.	Tubing Pressure ----	Casing Pressure 30	Choke Size N/A
Actual Prod. During Test	Oil - Bbls. 29	Water - Bbls. 195	Gas - MCF 50

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. OPERATOR 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.

Signature
M. G. Mooney
Printed Name
11-5-90
Date
Title
(915) 683-3171
Telephone No.

OIL CONSERVATION DIVISION

Date Approved
By
Title

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.