

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE
(Other instructions on
reverse side)

COPY TO D.C.C.

Form approved
Budget Bureau No. 1-1000

5. LEASE DESIGNATION AND SERIAL NO.

LC 065525

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Audrey

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Wantz Abo

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

Sec. 5-T21S-R38E

12. COUNTY OR PARISH 13. STATE

Lea

N.M.

1. OIL WELL ☒ GAS WELL ☐ OTHER

2. NAME OF OPERATOR
Imperial American Management Company

3. ADDRESS OF OPERATOR
215 MidAmerica Bldg., Midland, Texas 79701

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface

660' FSL & 660' FEL

14. PERMIT NO.

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

3573 GL

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.)*

1. Set cast iron bridge plug at 7200' and dump 35' cement on top of bridge plug.
2. Set 35 sack plug at 5600-5700'.
3. Set 25 sack plug at 4300-4400'.
4. Set 35 sack plug at 2900-3000'.
5. Shoot pipe off at approximately 2500'*
6. Set 100' cement across stub at pull point.
7. Set 35 sack plug from 1600-1700'
8. Set 50 sack plug from 830-930' across shoe of surface casing
9. Set 10 sack plug at surface and set marker
10. Fill hole between plugs with mud containing at least 75 sacks per 100 barrels.
11. Blow out preventer will be used.
12. Pits will be utilized for well effluent and mud mixing
13. Surface to be restored as closely as possible to original condition or to surface owners specifications.

*Well record indicates very high cement volume. Exact free point to be determined.

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

SIGNED

TITLE

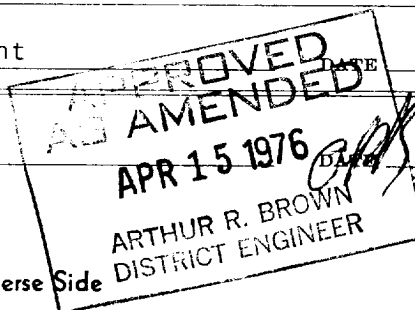
Agent

(This space for Federal or State office use)

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:



4/2/76

*See Instructions on Reverse Side

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPPLICATE*
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

LC-065525

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Audrey

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Wantz Abo

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

5-21-38

12. COUNTY OR PARISH 13. STATE

Lea

New Mexico

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR

IMPERIAL AMERICAN MANAGEMENT COMPANY

3. ADDRESS OF OPERATOR

215 Mid America Bldg., Midland, Texas 79701

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)

At surface

660 FSL & 660 FEL

14. PERMIT NO.

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

3573 GL

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* ☐

Status Report ☒

(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.) *

Well T/A.. Rods pulled 4-25-74.

NOV 1 1975

The ownership of this property is in reorganization under Chapter X of the Federal Bankruptcy Act. The Trustee of the corporation has not been able to provide funds for the necessary examination of workover potential. It is anticipated that the company's reorganization will be complete in the latter quarter of 1975 and that funds will then be available to examine the property for workover possibilities and to perform the workover if justified. We request that adequate time be given for this contingency prior to the forced plugging and abandonment of the well.

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

SIGNED

TITLE

Agent

DATE

10/28/74

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

NOV 13 1974
ARTHUR R. BROWN
DISTRICT ENGINEER

*See Instructions on Reverse Side

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other in-
structions on
reverse side)Form approved.
Budget Bureau No. 42-R355.5.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL: OIL WELL ☒ GAS WELL ☐ DRY ☐ Other _____		5. LEASE DESIGNATION AND SERIAL NO. LC - 065525	
b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other _____		6. IF INDIAN, ALLOTTEE OR TRIBE NAME _____	
2. NAME OF OPERATOR SOLAR OIL COMPANY		7. UNIT AGREEMENT NAME _____	
3. ADDRESS OF OPERATOR P. O. Box 5596 Midland, Texas		8. FARM OR LEASE NAME Audrey	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 660' FSL & 660' FEL At top prod. interval reported below Same At total depth Same		9. WELL NO. 1	
14. PERMIT NO. _____ DATE ISSUED _____		10. FIELD AND POOL, OR WILDCAT Wantz Abo	
15. DATE SPUDDED 12-4-68		11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA Sec. 5, 21S, 38E	
16. DATE T.D. REACHED 1-1-69		12. COUNTY OR PARISH Lea	
17. DATE COMPL. (Ready to prod.) 2-9-69		13. STATE New Mexico	
18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 3573' GR		19. ELEV. CASINGHEAD 3573'	
20. TOTAL DEPTH, MD & TVD 7600'		21. PLUG, BACK T.D., MD & TVD 7568'	
22. IF MULTIPLE COMPL., HOW MANY* one		23. INTERVALS DRILLED BY ROTARY TOOLS 0-TD CABLE TOOLS _____	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 7526' - 7407'; 7368' - 7282' Abo		25. WAS DIRECTIONAL SURVEY MADE No	
26. TYPE ELECTRIC AND OTHER LOGS RUN BHC-Acoustilog; LL		27. WAS WELL CORED No	
28. CASING RECORD (Report all strings set in well)			
CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE
10-3/4"	45.5#	878'	13-3/4"
7"	23# & 26#	7600'	8-3/4"
CEMENTING RECORD			
425 sx			
668 sx			
AMOUNT PULLED			
29. LINER RECORD			
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*
30. TUBING RECORD			
SIZE	DEPTH SET (MD)	PACKER SET (MD)	
2-3/8"	7469'	--	
31. PERFORATION RECORD (Interval, size and number)			
7526' - 7407' 16 1/2" holes			
7368' - 7282' 11 1/2" holes			
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED	
7526' - 7407'		A/8000 gals 15%, 6000 gals 28% NELST, 30,000 gals wtr.	
7368' - 7282'		A/5000 gals 15%, 4000 gals 28% NE +20,000 gals wtr.	
33.* PRODUCTION			
DATE FIRST PRODUCTION 1-23-69		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Pmpg. 2" X 1-1/2" X 16" insert	
DATE OF TEST 7-10-69		WELL STATUS (Producing or shut-in) Prod	
HOURS TESTED 24 hrs.	CHOKE SIZE --	PROD'N. FOR TEST PERIOD 18	GAS—MCF. 17
WATER—BBL. 86	GAS-OIL RATIO 922		
FLOW. TUBING PRESS. --	CASING PRESSURE --	CALCULATED 24-HOUR RATE 18	GAS—MCF. 17
WATER—BBL. 86		OIL GRAVITY-API (CORR.) 39.3	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Vented		TEST WITNESSED BY R. Yancey	
35. LIST OF ATTACHMENTS Log			
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records.			
SIGNED <u>M. J. Smith</u>		TITLE Production Clerk	
DATE July 24, 1969			

*(See Instructions and Spaces for Additional Data on Reverse Side)

INSTRUCTIONS

General: This form is designed for submitting a complete and correct well completion report and log on all types of lands and leases to either a Federal agency or a State agency, or both, pursuant to applicable Federal and/or State laws 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. See instructions on items 22 and 24, and 33, below regarding separate reports for separate completions.

If not filed prior to the time this summary record is submitted, copies of all currently available logs (drillers, geologists, sample and core analysis, all types electric, etc.), formation and pressure tests, and directional surveys, should be attached hereto, to the extent required by applicable Federal and/or State laws and regulations. All attachments should be listed on this form, see item 33.

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 18: Indicate which elevation is used as reference (where not otherwise shown) for depth measurements given in other spaces on this form and in any attachments.

Items 22 and 24: If this well is completed for separate production from more than one interval zone (multiple completion), so state in item 22, and in item 24 show the producing interval, or intervals, top(s), bottom(s) and name(s) (if any) for only the interval reported in item 33. Submit a separate report (page) on this form, adequately identified, for each additional interval to be separately produced, showing the additional data pertinent to such interval.

Item 29: "Sacks Cement": Attached supplemental records for this well should show the details of any multiple stage cementing and the location of the cementing tool.

Item 33: Submit a separate completion report on this form for each interval to be separately produced. (See instruction for items 22 and 24 above.)

37. SUMMARY OF POROUS ZONES:		38. GEOLOGIC MARKERS	
SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF: CORED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CUSHION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES		NAME	
FORMATION	TOP	BOTTOM	MEAS. DEPTH
		T/Anhy	1630'
		T/Salt	1712'
		B/Salt	2870'
		T/Yates	2954'
		T/Seven Rivers	3197'
		T/Queen	3759'
		T/Grayburg	3927'
		T/San Andres	4358'
		T/Glorietta	5660'
		T/Blinberry	6113'
		T/Tubb	6645'
		T/Drinkard	6800'
		T/Abo	7214'

WELL NAME AND NUMBER Audrey #1
LOCATION 660' FSL & 660' FEL, Sec. 5, T-21-S, R-38-E Lea County, New Mexico
OPERATOR SOLAR OIL COMPANY

The undersigned hereby certifies that she is an authorized representative of the operator who drilled the above described well and that deviation tests were conducted with the following results:

DEGREE @ DEPTH

1/4 423'
1/4 875'
1/2 1217'
3/4 1615'
3/4 2115'
3/4 2600'
1-1/2 2810'
1-3/4 3030'
3/4 3477'
1 3973'
1/2 5070'
3/4 5430'
1/2 5760'
3/4 6219'
1-1/4 7150'
1-1/4 7342'

DEGREE @ DEPTH

By: MJ Smith

Subscribed and sworn to before me this 24th day of July, 1969

L. K. K. K.
Notary Public in and for the
County of Midland, State of
Texas

My Commission Expires: June 1, 1970