

Submit to Appropriate
District Office
State Lease - 4 copies
Fee Lease - 3 copies

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-102
Revised 1-1-89

OIL CONSERVATION DIVISION

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

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

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

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

WELL LOCATION AND ACREAGE DEDICATION PLAT

All Distances must be from the outer boundaries of the section

Operator SHELL WESTERN E&P INC.			Lease NORTHEAST DRINKARD UNIT		Well No. 119
Unit Letter F	Section 2	Township 21S	Range 37E	County NMPM LEA	
Actual Footage Location of Well: 1650 feet from the WEST line and 5610 feet from the SOUTH line					
Ground level Elev. 3507' DF		Producing Formation DRINKARD		Pool NORTH EUNICE BLINEBRY-TUBB- DRINKARD OIL & GAS	
				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 interest of all owners been consolidated by communitization, unitization, force-pooling, etc.?

☒ Yes ☐ No

If answer is "yes" type of consolidation

UNITIZATION

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 interest, has been approved by the Division.

OPERATOR CERTIFICATION

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

Signature

J. H. Smitherman

Printed Name

J. H. SMITHERMAN

Position

REGULATORY SUPV.

Company

SHELL WESTERN E&P INC.

Date

9-22-89

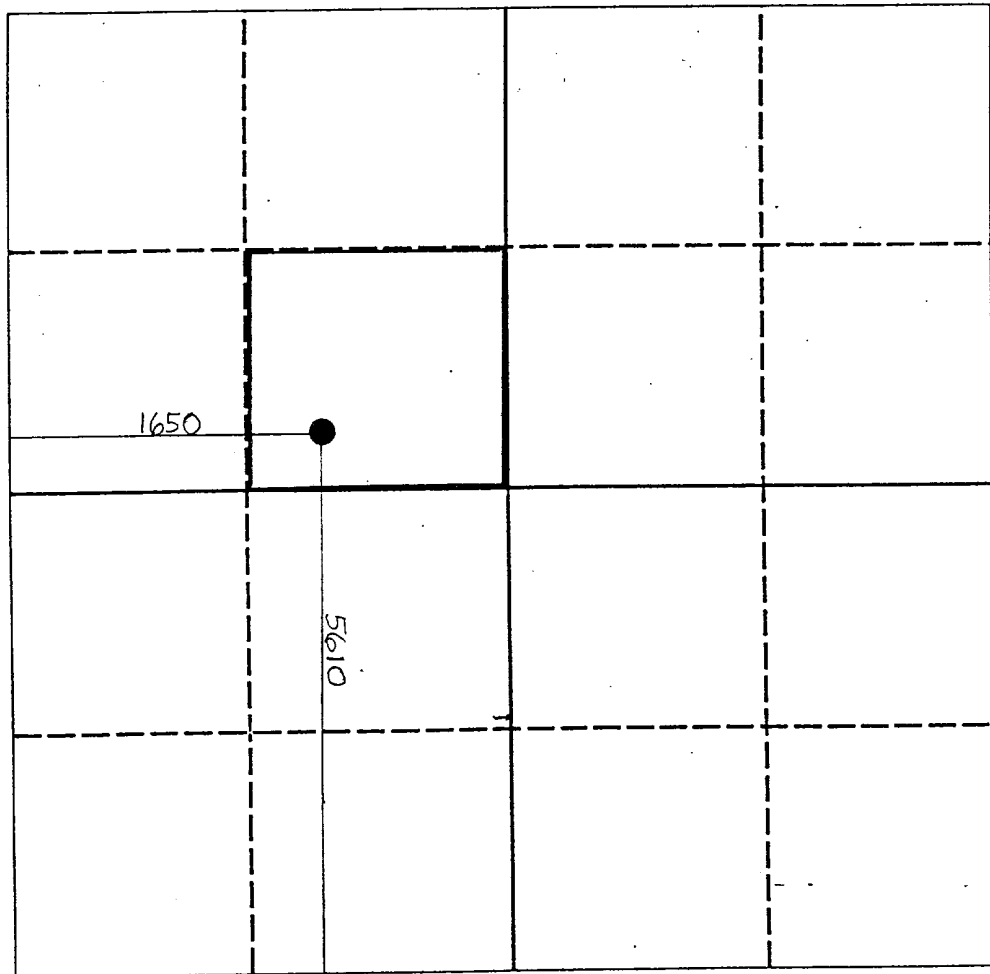
SURVEYOR CERTIFICATION

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

Signature & Seal of
Professional Surveyor

Certificate No.



0 330 660 990 1320 1650 1980 2310 2640 2000 1500 1000 500 0

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NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

Operator Southland Royalty Company	
Address 1100 Wall Towers West, Midland, Texas 79701	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input checked="" type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Name change effective 1-1-78	

If change of ownership give name and address of previous owner Aztec Oil & Gas Co., P.O. Box 837, Hobbs, New Mex. 88240

I. DESCRIPTION OF WELL AND LEASE

Lease Name State	Well No. 5	Pool Name, Including Formation Drinkard	Kind of Lease State, Federal or Fee	Lease No. State B-11613
Location Unit Letter <u>F</u> ; <u>5610</u> Feet From The <u>South</u> Line and <u>1650</u> Feet From The <u>West</u> Line of Section <u>2</u> Township <u>21-S</u> Range <u>37-E</u> , NMPM, <u>Lea</u> County				

II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Texas-New Mexico Pipeline Co.	P.O. Box 1510, Midland, Texas 79701					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Getty Oil Company	P.O. Box 1231, Midland, Texas 79702					
If well produces oil or liquids, give location of tanks.	Unit F	Sec. 2	Twp. 21s	Rge. 37e	Is gas actually connected? Yes	When 10-9-56

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

III. 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	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
Perforations					Depth Casing Shoe			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			

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 Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Constance Ann
(Signature)
District Engineer
(Title)
December 21, 1977
(Date)

OIL CONSERVATION COMMISSION

APPROVED DEC 30 1977, 19_____
BY Jerry Sexton
Dist. L. Supv.
TITLE _____

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 filed for each pool in multiply completed wells.

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Form C-105
Revised 1-1-65

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

5a. Indicate Type of Lease
State ☒ Fee ☐

5. State Oil & Gas Lease No.
B-11614

1a. TYPE OF WELL
OIL WELL ☒ GAS WELL ☐ DRY ☐ OTHER ☐

b. TYPE OF COMPLETION
NEW WELL ☐ WORK OVER ☐ DEEPEN ☒ PLUG BACK ☐ DIFF. RESVR. ☐ OTHER ☐

2. Name of Operator
Aztec Oil & Gas Company

3. Address of Operator
P.O. Box 837, Hobbs, New Mexico 88240

4. Location of Well
UNIT LETTER **F** LOCATED **5610** FEET FROM THE **South** LINE AND **1650** FEET FROM

7. Unit Agreement Name

8. Farm or Lease Name
State

9. Well No.
5

10. Field and Pool, or Wildcat
Undesignated

11. County
West

12. County
TEA

13. Date Spudded
10-22-74

14. Date T.D. Reached
11-1-74

15. Date Compl. (Ready to Prod.)
3507 DF

16. Elevations (DF, RKB, RT, GR, etc.)
3497

17. Total Depth
6850'

18. Plug Back T.D.
6843'

19. If Multiple Compl., How Many
3507 DF

20. Intervals Drilled By
Rotary Tools

21. Cable Tools
Yes

22. Producing Interval(s), of this completion - Top, Bottom, Name
6746-6832'

23. Was Directional Survey Made
Totco

24. Type Electric and Other Logs Run
Gamma ray - Sonic

25. Was Well Cored
No

26. CASING RECORD (Report all strings set in well)

CASING SIZE	WEIGHT LB./FT.	DEPTH SET	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED

27. LINER RECORD

SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN
3.5	5955'	6850'	75	

28. TUBING RECORD

SIZE	DEPTH SET	PACKER SET

29. Perforation Record (Interval, size and number)
6746-54', 6758-62', 6764-70', 6772-79', 6784-90', 6792-96', 6804-08', 6816-32', W/2 holes/ft.

30. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

DEPTH INTERVAL	AMOUNT AND KIND MATERIAL USED
	6500 gals 15% NE Acid
	30,000 gals Brine Water
	and 25,000 pounds sand frac.

31. PRODUCTION

Date First Production
12-16-74

Production Method (Flowing, gas lift, pumping - Size and type pump)
Pumping

Well Status (Prod. or Shut-in)
Producing

Date of Test	Hours Tested	Choke Size	Prod'n. For Test Period	Oil - Bbl.	Gas - MCF	Water - Bbl.	Gas - Oil Ratio
12-20-74	24	3/4		26	120	1	4615

Flow Tubing Press.	Casing Pressure	Calculated 24-Hour Rate	Oil - Bbl.	Gas - MCF	Water - Bbl.	Oil Gravity - API (Corr.)
40	40		26	120	1	37

32. Disposition of Gas (Sold, used for fuel, vented, etc.)
Sold

Test Witnessed By
Donny Davis

33. List of Attachments
Gamma ray - Sonic Log

34. 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.

SIGNED **L. J. Eaton** TITLE **Engineer** DATE **11-18-74**

INSTRUCTIONS

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.

INDICATE FORMATION TOPS IN CONFORMANCE WITH GEOGRAPHICAL SECTION OF STATE

Southeastern New Mexico

Northwestern New Mexico

T. Anhy _____	T. Canyon _____	T. Ojo Alamo _____	T. Penn. "B" _____
T. Salt _____	T. Strawn _____	T. Kirtland-Fruitland _____	T. Penn. "C" _____
B. Salt _____	T. Atoka _____	T. Pictured Cliffs _____	T. Penn. "D" _____
T. Yates _____	T. Miss _____	T. Cliff House _____	T. Leadville _____
T. 7 Rivers _____	T. Devonian _____	T. Menefee _____	T. Madison _____
T. Queen _____	T. Silurian _____	T. Point Lookout _____	T. Elbert _____
T. Grayburg _____	T. Montoya _____	T. Mancos _____	T. McCracken _____
T. San Andres _____	T. Simpson _____	T. Gallup _____	T. Ignacio Qtzte _____
T. Glorieta _____	T. McKee _____	Base Greenhorn _____	T. Granite _____
T. Paddock _____	T. Ellenburger _____	T. Dakota _____	T. _____
T. Blinbry _____	T. Gr. Wash _____	T. Morrison _____	T. _____
T. Tubb _____	T. Granite _____	T. Todilto _____	T. _____
T. Drinkard _____	T. Delaware Sand _____	T. Entrada _____	T. _____
T. Abo _____	T. Bone Springs _____	T. Wingate _____	T. _____
T. Wolfcamp _____	T. _____	T. Chinle _____	T. _____
T. Penn. _____	T. _____	T. Permian _____	T. _____
T. Cisco (Bough C) _____	T. _____	T. Penn. "A" _____	T. _____

FORMATION RECORD (Attach additional sheets if necessary)

From	To	Thickness in Feet	Formation	From	To	Thickness in Feet	Formation
6530'	6850'	320'	Dolomite				

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CUL CONSERVATION COMM.

1511A, B, C, D

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NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

I. Operator
Aztec Oil & Gas Company
Address
P.O. Box 837, Hobbs, New Mexico 88240
Reason(s) for filing (Check proper box)
New Well ☐ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐
Other (Please explain)
Deepen

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name State	Well No. 5	Pool Name, Including Formation Undesignated Drinkard	Kind of Lease State, Federal or Fee State	Lease No. B-11613
Location Unit Letter F ; 5610 Feet From The South Line and 1650 Feet From The West Line of Section 2 Township 21S Range 37E , NMPM, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/> Tex. NEW MEXICO PIPELINE	Address (Give address to which approved copy of this form is to be sent) EFFECTIVE JANUARY 31, 1977			
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> Skelly Oil Company	Address (Give address to which approved copy of this form is to be sent) SKELLY OIL COMPANY MERGED INTO GETTY OIL COMPANY.			
If well produces oil or liquids, give location of tanks.	Unit F	Sec. 2	Twp. 21	Rge. 37
	Is gas actually connected? Yes		When 10-9-1956	

If this production is commingled with that from any other lease or pool, give commingling order number: **PC 408**

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well	New Well	Workover	Deepen <input checked="" type="checkbox"/>	Plug Back	Same Res'tv.	Diff. Res'tv.
Date Spudded 10-22-74	Date Compl. Ready to Prod.		Total Depth 6850'		P.B.T.D. 6843'			
Elevations (DF, RKB, RT, GR, etc.) 3507 DF	Name of Producing Formation Drinkard		Top Oil/Gas Pay 6746'		Tubing Depth 6750'			
Perforations 6746-54; 6758-62; 6764-70; 6772-79; 6784-90; 6792-96; 6804-08; 6816-32'				Depth Casing Shoe				
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE 4 3/4	CASING & TUBING SIZE 3 1/2" Hydrill		DEPTH SET 5955-6850'		SACKS CEMENT 75			

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 Tanks 12-16-74	Date of Test 12-20-74	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24 hrs.	Tubing Pressure 40	Casing Pressure 40	Choke Size 3/4"
Actual Prod. During Test 27	Oil-Bbls. 26	Water-Bbls. 1	Gas-MCF 120

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

L. S. Eaton
(Signature)
Engineer
(Title)
11-18-74
(Date)

OIL CONSERVATION COMMISSION
APPROVED [Signature], 19____
BY [Signature]
TITLE SUPPLY

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 filed for each pool in multiply completed wells.

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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

5a. Indicate Type of Lease State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No. B-11613
7. Unit Agreement Name
8. Farm or Lease Name State
9. Well No. 5
10. Field and Pool, or Wildcat Undesignated
12. County Lea

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 -" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- <input type="checkbox"/>
2. Name of Operator Aztec Oil & Gas Company
3. Address of Operator P.O. Box 837, Hobbs, New Mexico 88240
4. Location of Well UNIT LETTER F 5610 FEET FROM THE South LINE AND 1650 FEET FROM West LINE, SECTION 2 TOWNSHIP 21S RANGE 37E NMPM.
15. Elevation (Show whether DF, RT, GR, etc.) 3507 DF

16.

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐
PULL OR ALTER CASING ☐
OTHER ☐

PLUG AND ABANDON ☐
CHANGE PLANS ☐
OTHER ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐
COMMENCE DRILLING OPNS. ☐
CASING TEST AND CEMENT JOBS ☐
OTHER **Deepen** ☒
ALTERING CASING ☐
PLUG AND ABANDONMENT ☐

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.
The Following Work Was Done:

- Squeezed Paddock Perfs. at 5375-5439' W/100 sxs Class "C" Cement to 3500 psi. Drilled out cement and press. csg. to 3000 psi., for 30 min. Held O.K.
- Drilled out cement and Bridge Plug at 5770'. Squeezed Blinbry perfs at 5805-5945' W/175 sxs Class "C" to 4000 psi. Drilled out and tested Csg. to 3000 psi; held O.K.
- A 4 3/4" hole was drilled from 6010-6850'
- A 3 1/2" hydrill liner set from 5955-6850' W/75 sxs Class "C" cement.
- Pressured top liner to 3000 psi, Held O.K.
- Perforated liner at 6746-6832' (Overall) and treated W/6000 gals. 15% Acid, & 30,000 gals brine water & 25,000 pounds sand.

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

SIGNED **original signed by**
LESTER L. DUKE TITLE **District Superintendent** DATE **12/30/74**
APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY: