## NEW MEXICO OIL CONSERVATION COMMISSION 6-1-56 SANTA FE, NEW MEXICO

1963 JAN 10 MI 10 07

| PACKER_SETTING AFFIDAVIT<br>(Dual Completions)  |
|---|
| STATE OF NEW MEXICO   |
| County of LEA   |
| C. W. MOBERLY , being first duly sworn according to law, upon his   |
| oath deposes and says:  |
| That he is of lawful age and has full knowledge of the facts herein below set out.  |
| That he is employed by C. W. MOBERLY CONSULTANT in the capacity   |
| of <u>CONSULTANT</u> and as such is its authorized agent.   |
| That on DECEMBER 10 , 19 62, he personally supervised the setting of  |
| BAKER MODEL FA in SUNRAY DX OIL COMPANY 'S<br>(Make and Type of Packer) (Operator)  |
| (Make and Type of Packer) (Operator)  |
|   |
| (lease)<br>Letter P, Section 16, Township 21.5, Range 37 E, NMPM,   |
| Lea County, New Mexico.   |
| That said packer was set at a subsurface depth of <u>6820</u> feet,   |
| said depth measurement having been furnished by LANE WELLS  |
| That the purpose of setting this packer was to effect a seal in the<br>annular space between the two strings of pipe where the packer was set so as to<br>prevent the commingling, within the well-bore, of fluids produced from a stratum<br>below the packer with fluids produced from a stratum above the packer. That this<br>packer was properly set and that it did, when set, effectively and absolutely<br>seal off the annular space between the two strings of pipe where it was set in<br>such manner as that it prevented any movement of fluids across the packer. |

MOBERLY, CONSULTANT C.W. (Company) C.W. MOBERLY (its Age t) Subscribed and sworn to before me this the day of January , AD, 19\_63\_\_. U Inn **CEA** Notary Public in and for the County of la

My Commission Expires MY COMMISSION EXPIRES DEC. 8, 1963

| 011            | TRIBUTION |   |      |
|----------------|-----------|---|------|
| SANTA FE       |           | 1 |      |
| FILE           |           |   |      |
| U.S.G.S.       |           |   |      |
| LAND OFFICE    |           |   | <br> |
| TRANSPORTER    | 011       |   |      |
|                | GAS       |   |      |
| PRORATION OFFI | CE        |   |      |
| OPERATOR       |           |   |      |

W MEXICO OIL CONSEP V. V COMMISSION Santa Fe. New Mexico

## REQUEST FOR (OIL) - (GAS) ALLOWAPLE

New Well Recompletion

This form shall be submitted by the operator before an initial allowable will be assigned to any completed Oil or Gas well. Form C-104 is to be submitted in QUADRUPLICATE to the same District Office to which Form C-101 was sent. The allowable will be assigned effective 7:00 A.M. on date of completion or recompletion, provided this form is filed during calendar month of completion or recompletion. The completion date shall be that date in the case of an oil well when new oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

| 2              | pany or Op<br>Sec.  | 16                  | (Learc)<br>T. <b>21. 8</b> , R <b>37. 8</b> , N                         | MPM., <b>Blinebry</b> | 011                                    | Рос               |
|----------------|---------------------|---------------------|---|-----------------------|--|-------------------|
| Unit Late      | r<br>r              |                     | Dual Started  | Due<br>Date 200       | Terr Completed 12_1                    | 7-62              |
| Please         | indicate l          |                     | Elevation 3145 TF   | Total Depth           | PBI                                    |                   |
|                |                     | A                   | PRODUCING INTERVAL - Blinebr  |                       | ······································ |                   |
|                |                     |                     | Perforation 5768-70, 5813-1   | 5, 5850-52, 5861-63   |  | 5790-9            |
| E              | G                   | H                   | Open Hole   | Casing Shoe           | Tubing                                 |                   |
|                | 16<br>( J           | 2<br>               | OIL WELL TEST -   | hble w                | ator in brs.                           | Chok<br>min. Size |
|                |                     | -                   | Natural Prod. Test: <b>DORO</b> bbl<br>Test After Acid or Fracture Trea |                       |  |                   |
| <u>M</u>       | 1 0                 | P                   | load oil used): 370 bbls.o  | il,bbls water         | in <b>2),</b> hrs, <b>0</b> min.       | Choke<br>Sizell   |
|                |                     | *                   | GAS WELL TEST -   |                       |  |                   |
| • FS &         |                     |                     | Natural Prod. Test:   | MCF/Day; Hours fl     | owedChoke Size_                        |                   |
| bing ,Cas      | ing and Cen<br>Feet | menting Reco<br>Sax | Method of Testing (pitot, back<br>Test After Acid or Fracture Tre       | pressure, etc.):      | MCF/Day; Hours flowe                   | ed                |
|                |                     | 1                   | Test After Acia or Fracture fre<br>Choke SizeMethod cf T                |                       |  |                   |
| -3/8           | 258                 | 250                 | •   |                       | used, such as acid, water              | r, oil, a         |
| 5/8            | 2681                | 1500                | Acid or Fracture Treatment (Giv<br>sand):24,500 gel.ref.oll             | w/J105 edd.73500      | sd-500 gal IN3                         |                   |
| -1/2           | 8259                | 1,00                | Casing Tubing<br>Press. Press. <b>720</b>                               | oil run to tanks      | 2-18-62                                |                   |
| 2* BT          | 713 0               |                     | Oil Transporter Nagnolia  |                       |  |                   |
| 2" BT<br>1" BT | 6022                |                     | Gas Transporter Skelly Of   |                       |  |                   |
| marks:         | ••••••••••          | un                  | <u></u>   | J.                    |  | ·····             |

OIL CONSERVATION COMMISSION f...... Title .....

(Signature) By: All Outer

| Title District | Engineer      | ing well to        |
|----------------|---------------|--------------------|
| Send C         | ommunications | regarding well to: |
| Name G. T. J   | lefilanahan.  |                    |

Box 128, Hobbs, N. M. . ..... Address.....