

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE  
(Other instructions  
reverse side)E•  
re-Form approved.  
Budget Bureau No. 42-R1424.  
5. LEASE DESIGNATION AND SERIAL NO.

NM-093840

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

## 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-2" for such proposals.)

1. OIL <input type="checkbox"/> GAS <input type="checkbox"/> WELL <input type="checkbox"/> WELL <input checked="" type="checkbox"/> OTHER	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR Teal Petroleum Company	8. FARM OR LEASE NAME Pubco Federal
3. ADDRESS OF OPERATOR P. O. Drawer 2358, Midland, Texas 79701	9. WELL NO. 1
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 3300' FNL & 660' FWL	10. FIELD AND POOL, OR WILDCAT Salt Lake South (Morrow)
14. PERMIT NO. Letter of 3-27-73	11. SEC. T., R., M., OR BLM. AND SURVEY OR AREA Sec. 2, T-21-S, R-32-E
15. ELEVATION. (Show whether DF, RT, CV, etc.) 3719' GR	12. COUNTY OR PARISH Lea
	13. STATE N. M.

## 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 COMPLETION ☐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.)\*

6-1-76 Acidized Morrow perf. 13,968-14,026' w/8000 gals of 7 1/2% Morrowflow acid w/1500 SCF nitrogen per bbl. Used 15 ball sealers. Max. treating pressure 8300#, Min. 7700#. AIR 6 BPM @ 8400#. ISIP 6400, 5 mins. - 4400, 15 mins. 2900#.

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

SIGNED

*Douglas W. Rice*

TITLE District Engineer

DATE 6-2-76

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

ACCEPTED FOR RECORD

JUL 8 1976

J. S. GEOLOGICAL SURVEY  
HOBBS, NEW MEXICO

\*See Instructions on Reverse Side

OIL CONSERVATION COMMISSION  
ALLOWABLE  
AUTHORIZATION TO PRODUCE OIL AND NATURAL GAS

Supersedes Old C-104 and C-11  
Effective 1-1-65

OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

Operator  
**Teal Petroleum Company**  
Address  
**405 Wall Towers East, Midland, Texas 79701**  
Reason(s) for filing (Check proper box)  
New Well ☐ Change in Transportation ☐ Other (Please explain)  
R. completion ☐ Oil ☐  
Change in Ownership ☒ Casinghead Gas ☐

If change of ownership give name and address of previous owner **Amini Oil Company, 405 Wall Towers East, Midland, Texas 79701**

**II. DESCRIPTION OF WELL AND LEASE**

Lease Name <b>Pubco Federal</b>	Well Name <b>1 Salt Lake South (Morrow)</b>	Kind of Lease <b>Federal</b>	Lease No. <b>NM093840</b>
Location Unit Letter <b>L</b> <b>3300</b> Feet From Top <b>North</b> <b>660</b> Feet From Top <b>West</b> Line of Section <b>2</b> Township <b>21-S</b> Range <b>32-E</b> NMPM, <b>Lea</b> County			

**III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS**

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <b>The Permian Corp</b>	Address to which approved copy of this form is to be sent <b>P. O. Box 1183, Houston, Texas 77001</b>
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> <b>Southern Union Gas Co.</b>	Address to which approved copy of this form is to be sent <b>Fidelity Union Tower, Dallas, Texas 75206</b>
If well produces oil or liquids, give location of tanks. Unit <b>L</b> Section <b>2</b> Township <b>21-S</b> Range <b>32-E</b>	Is it connected? <b>Yes</b> Date <b>Jan. 1974</b>

If this production is commingled with that from any other well, give well name and order number

**IV. COMPLETION DATA**

Designate Type of Completion - (X)		Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Casinghead Gas Well <input type="checkbox"/> Other <input type="checkbox"/>	Approved	Deepest	Shut-in	Same Reservoir	Diff. Reservoir
Date Spudded	Date Compl. Ready to Produce		S.E.T.D.				
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Casing		Tubing Depth		
Perforations					Depth to Casing Shoe		
HOLE SIZE		TUBING CEMENT		WIRE RECORD		SACKS CEMENT	
		CASING & TUBING		SOUTH SET			

**TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL**

This test is a request for allowable of total volume of liquid oil and gas equal to or exceed top allowable production (24 hours)

Date First New Oil Run To Tanks	Date of Test	Flow Rate (gallons per minute) (24 hours)	
Length of Test	Tubing Pressure	Flow Rate (gallons per minute) (24 hours)	Choke Size
Actual Prod. During Test	Oil - Bbls.	Gas - Bbls.	Condensate - Bbls.

**GAS WELL**

Actual Prod. Test-MCF/D	Length of Test	Flow Rate (MCF/D)	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Flow Rate (Shut-in)	Choke Size

**CERTIFICATE OF COMPLIANCE**

OIL CONSERVATION COMMISSION

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

Wanda Wacker  
(Signature)

Agent

(Title)

October 18, 1974

(Date)

This form is to be filed in compliance with RULE 1104.

This is a request for allowable for a newly drilled or deepened well. This form must be accompanied by a tabulation of the deviation logs 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, lease number, or transporter, or other such change of condition.

NO. OF COPIES RECEIVED		
DISTRIBUTION		
SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

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 1-1-85

I. Operator  
Amini Oil Company  
Address  
405 Wall Towers East - Midland, Tx. 79701  
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)

If change of ownership give name  
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Pubco Federal	Well No. 1	Pool Name, including Formation Salt Lake South (Morrow)	Kind of Lease State, Federal or Fee Federal	Lease No. NM093840
Location Unit Letter L ; 3300 Feet From The North Line and 660 Feet From The West Line of Section 2 Township 21-S Range 32-E, NMPM, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> The Permian Corp.	Address (Give address to which approved copy of this form is to be sent) Box 1183 - Houston, Tx. 77001					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> Southern Union Production Co.	Address (Give address to which approved copy of this form is to be sent) Fidelity Union Tower Suite 1700 Campbell Center, Dallas, Tx. 75206					
If well produces oil or liquids, give location of tanks.	Unit L	Sec. 2	Twp. 21-S	Rge. 32-E	Is gas actually connected? No	When Waiting on pipeline

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

V. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
		X	X					
Date Spudded 3-31-73	Date Compl. Ready to Prod. 6-16-73		Total Depth 14407		P.B.T.D. 14348			
Elevations (DF, RKB, RT, GR, etc.) 3719 GR	Name of Producing Formation Morrow		Top Oil/Gas Pay 13968		Tubing Depth 13550			
Perforations 13968 - 13980		14018 - 14026		Depth Casing Shoe 14407				
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
26"	20"		404'		700			
17 1/2"	13-3/8"		4000'		3475			
12 1/4"	9-5/8" liner		11243'		2000			
8 1/2"	5 1/2" liner		14407'		725			

VI. 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 \* Tubing size= 2-7/8" Set @ = 13550'

Actual Prod. Test-MCF/D 4200	Length of Test 24 hrs.	Bbls. Condensate/MMCF 80	Gravity of Condensate 49.4
Testing Method (pitot, back pr.) Back pr.	Tubing Pressure (shut-in)	Casing Pressure (shut-in) Packer	Choke Size See Form C-122

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.

Karin Godwin  
(Signature)  
Agent  
(Title)  
July 12, 1973  
(Date)

OIL CONSERVATION COMMISSION

APPROVED \_\_\_\_\_, 19\_\_\_\_  
BY \_\_\_\_\_  
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

NEW MEXICO OIL CONSERVATION COMMISSION

OPERATOR Amini Oil Company ADDRESS 405 Wall Towers East, Midland, Texas 79701  
 FIELD \_\_\_\_\_ LEASE Pubco-Federal WELL NO. 1  
 LOCATION 3300' FNL & 660' FWL, Section 2, T-21-S, R-32-E, Lea County, New Mexico

DEVIATION RECORD

DEPTH	DEGREES	DEPTH	DEGREES	DEPTH	DEGREES
144	-1/2	3467	1-1/2	11235	
233		4000		11357	
400	-3/4	4511	1-1/2	11860	1-1/4
752	-1/4	5010	1-1/4	12358	1-1/4
1032	-1/2	5510	1-1/2	13100	1-1/4
1355	-3/4	6008	1-3/4	13920	
1499	-3/4	6510	2-1/4	14250	
1781		7015	-3/4	14400	
1905	-3/4	7221	-1/2		
2029	-3/4	7718	-1/2		
2112	-1/2	8225	-3/4		
2278	-1/2	8730	1-1/4		
2589	-3/4	9062	1-1/2		
2807	-1/2	9699			
3048	1-1/4	9797			
3278	1-3/4	10300	1-3/4		
3355	1-3/4	11131	-3/4		

Certification of personal knowledge of Deviation Record:

I hereby certify that I have personal knowledge of the data and facts placed on this form, and that such information is true and complete.

[Signature]  
 Signature  
 ARD DRILLING COMPANY  
 Company

STATE OF TEXAS  
 COUNTY OF MIDLAND

Before me, the undersigned authority, on this day personally appeared J.E.R. Sheeler, known to me to be the person whose name is subscribed hereto, who, after being duly sworn, on oath states that he is acting at the direction and on behalf of the operator of the well identified in this instrument and that such well was not intentionally deviated from the vertical.

[Signature]  
 Signature  
 Manager - ARD DRILLING COMPANY  
 Title

Sworn and Subscribed to before me, this the 13<sup>th</sup> day of June, 1973

[Signature] S. R. McKINNEY, JR.  
 Notary Public in and for Midland County,  
 Texas.

My Commission Expires:

June 1, 1975