	SANTA FE	1	FOR ALLOWABLE	Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65		
	U.S.G.S.	AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS				
	IRANSPORTER GAS GAS					
I.	OPERATOR PRORATION OFFICE Operator					
	SUN TEXAS COMPANY					
	Address P. O. Box 4067 Midland, Texas 79704					
	Reason(s) for Isling (Check proper box New Well Recompletion		Other (Please explain)			
	Change in Ownership X	Casinghead Gas Conde	nsate [			
	If change of ownership give name and address of previous owner	TEXAS PACIFIC OIL COMP	ANY, INC. P. 0. Box 4067	Midland, TX, 79704		
11.	DESCRIPTION OF WELL AND LEASE Lease Name Well No. Pool Name, including Formation Kind of Lease Lease No. FMPCU KING NW / Ja/mgt Tansell VI 1 RUNState, Federal or Fee Fee					
1	EMERY KING NW		Gas			
	Unii Letter_ <u>E</u> : <u>196</u>	SO Feet From The <u>Marth</u> Lir	ne and <u>460</u> Feet From Th	· west		
	Line of Section To	waship 23-5 Range	36-E, NMPM, L	County		
Ш.	DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL GA	IS Address (Give address to which approved	d copy of this form is to be sent)		
	None Name of Authorized Transporter of Ca	singhead Gas 📄 or Dry Gas 🔀	Address (Give address to which approved	copy of this form is to be sent)		
	El Paso Natural	Gas	Jal, N. M. 882.	5.2		
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. P.ge.	Yes			
	If this production is commingled wi COMPLETION DATA	th that from any other lease or pool,		، Plug Back Same Res'v. Diff. Res'v.		
	Designate Type of Completio	1				
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.		
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top O!I/Gas Pay	Tubing Depth		
	Perforations			Depth Casing Shoe		
		TUBING, CASING, AND	D CEMENTING RECORD	SACKS CEMENT		
	HOLE SIZE					
Υ.	TEST DATA AND REQUEST FOR ONL WELL	able for this de	fter recovery of total volume of load oil and pth or be for full 24 hours)			
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift,	elc.j		
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size		
	Actual Prod. During Test	Cil-Bble.	Water - Bbis.	Gas - MCF		
I		I				
ĺ	GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Conder.sate/MMCF	Gravity of Condensate		
	Testing Method (pitol, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size		
¥1.	CERTIFICATE OF COMPLIANCE		OIL CONSERVAT	HONDCOMMISSION		
	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.		APPROVED	, 19		
			Ortg. Signed by BYJerry Sexton			
			TITLE Dist 1. Suga	<u> </u>		
			This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deepened			
-			If this is a request for allowab well, this form must be accompanie tests taken on the well in accords	d by a tabulation of the deviation		
	Regional Operation	ons Superintendent/West	All sections of this form must be filled out completely for allow- able on new and recompleted wells.			
	SEF 1 2 1980	le)	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.			
	(Date)		Separate Forms C-104 must be filed for each pool in multiply			
-	····	· · · · · · · · · · · · ·	completion in a			

NO. OF COPILS PECCIVE	• • • • • • • • • • • • • • • • • • •		Form C-103 Supersedes Old
DISTRIBUTION			C-102 and C-103
SANTA FE	NEW A	MEXICO OIL CONSERVATION COMMISSION	Effective 1-1-65
FILE			
U.S.G.S.			Su indicute Type of Leaso
LAND OFFICE		· · · · · · · · · · · · · · · · · · ·	State Fre
CPERATOR		•	5. Stute Oll & Gas Lease No.
100 NOT USC TH	S FORST FOR PROFIDENCES TO CRUIL ON	D REPORTS ON WELLS	7. Unit Agreement Nurse
	TAS OTHER-		6. Farm or Lease Hame
Texas Paci	Fic Oil Company	Juc.	Emery King NW
			9. Well No.
i. Lecution of Well	4067 Midland;	Texas 17/01	10. Field and i'ool, or Wildow
UNIT LETTERE	<u>1980</u> FERY FRO	CM THE NOT the LINE AND 660 FEE	T FROM Jo/mot
1xc West	LINE, SECTION	TOWNSHIP 23-5 RANGE 36-E	. MAN. ())))))))))))))))))))))))))))))))))))
illillillilli	11111111111111111111111111111111111111	Collow (Show whether DF, RT, CR, etc.) 3410 GR	12. County Lea
<u></u> 16.	Check Appropriate Bo	x To Indicate Nature of Notice, Report	
NO	TICE OF INTENTION TO:	-	UENT REPORT OF:
PERFORM REMEDIAL WORK		UG AKO ABANDON	ALTERING CASING
YEMPCRARILY ABANDON Pull or alter Casing	Ена	ANGE PLANS CASING TEST AND CEMENT JQ8	PLUG AND ABAROONMENT
		OTHER	
OTHER			
7 Desertie Descourdes	Completed Questions (Clearly st	tate all pertinent details, and give pertinent dates, ind	cluding estimated date of starting any propose
		ip. Killed well w/9 PPG Brine	
7-17-77	a Car L. Come	ting days 13-Yox 7. C. thank	los w/1 the safet
	Surface. 1051	ted Csq w/RBP Set of ) 3350' & Freed w/20,0	or Gals water \$
· .	Cleaned out to 1		3
7-18-79	33,000 # Sand .	- 11 & such & Flaved to	oxecon load
7-19-79	Cleaned Out f	Fill of swab & Flowed to	•
+0 8-3-79			
	- I dama S	les line, Tested. 24,	HARS. 370 MCF
8-3-79	Turne dun 5	•	• •
			,
			4. = 2936 to 3350'
. I hereby certify that th	ie Information above in true and co	omplete to the best of my knowledge and belief.	
nn n	20	Daiel	
CHER L'Engles	man	_ mekeg Oper Supt	DATE 10-11-79
	in a clamad title		
	Orig. Signed <b>19</b> Jerry Sexton	TITLE	

			· · ·
NO. DE L'EIEN MECCIVED	, .		Form C-103
THE FREEDTION			Supersodes Old C-102 and C-103
SANTAFF	NEW MEXICO OIL CONSERVATION COMMISSION		
FILE			
U.S.G.S.			5a. Indicate Type of Lease
LAND OFFICE			State Fee X
CPERATOR			5. State Off & Gus Lease No.
SUNE	DRY NOTICES AND REPORTS ON MENONES TO DEDIE ON THE FERNIL CENTRES OF THE STATE OF T	WELLS	
(20 NOT USE THIS FORN FOR 1 000 **/ARALIS	7. Unit Agreeneed North		
2. filme of Cylenger	откен		6. Ferm of Leose 1. met
Texas Pacific Oil	Company, Inc.		N. W. King MI
3. Address of Constant P. O. Box 4067 Mi	dland, Texas 79701		9. Well No.
4. Location of Vell			10. Field and Peol, or Vilac at Jalmat
UNIT LETTER	1980 FEET FROM THE North	660 FEET FRO	Tansill Yates 7-Rivers (Ba
THE West LINE, SHE	100 Томманир 23-S	36-E	
MUTTINI	15, Elevation (Show whether	UF, RT, GR, etc.)	12. County
		110 GR	Lea
16. Cheel	Appropriate Box To Indicate N	Rature of Notice, Report or O	Other Data
NOTICE OF	INTENTION TO:	SUBSEQUE	NT REPORT OF:
PERFORM REMEDIAL WORK	PLUS AND ABANDON	REMEDIAL WORK	ALTERING CASING
TEMPORARILY APANDON		COMMENCE DETULING CPNS.	PLUG AN - ABANDONMERT
PULL OR ALTER CASING	CHANGE PLANS	CASING TEST AND CEMENT JOB	
OTHER.	·	OTHER	
		· · · · · · · · · · · · · · · · · · ·	
work) SER RULE 1103.	Operations (Clearly state all pertirent dete	aus, and give pertinent dates, includi	ng estimated date of starting any proposed
	• WORKOVER	PROCEDURE	
	N. W. KI	ING NO. 1	
	1980' FNL & 660	)' FWL, UNIT "E"	
		, NEW MEXICO	
		GAS FIELD	
		). 71431	
Well Data			
Elevation:		3440' DF	
Datum:		Zero @ DF - 12' above	13 3/8" BH
Casing:		13 3/8" 17# @ 297' w/3	
2.1.1.1.5		7" 20# @ 2936' w/1225	
TD:		3353'	
Procedure			
-	See Reverse) on above is true and complete to the best o	f nu laundata and haliaf	
1	A tri-		
SIGNED (D) LICY	TITLE OF	perations Coordinator	DATE 7-12-77
			<u> </u>
AUDROVED BY			DAYE
CONDITIONS OF APPROVAL, IT AN	· · ·		
-			

WORKOVER PROCEDURE N. W. KING NO. 1 AFE NO. 71431

Side Two

## Procedure

- 1. MIRUPU. Kill well with 9 ppg brine.
- 2. Set RBP at 1514' and test casing to 1000 Psi.
- 3. Surface casing parted at surface. Received concurrence from NMOCC for the following:
  - a. Ran 1" tubing to 293', tagged cement in annulus of 13 3/8" x 7".
  - b. Picked up and cemented w/150 sxs class "C" w/2% CACL.

Cement circulated to surface. Left 1" tubing in place.

- 4. GIH w/tubing and check for fill. If fill is encountered, pull tubing. RU foam and reverse units. GIH with bit and DC's on tubing and reverse out fill with foamed 9 ppg brine containing 1 gal/1000 M flo-II. Spot 600 gals 15% MCA in the open hole. POH with bit, DC's and tubing.
- 5. Run Otis Perma-Latch packer (or equivalent) with on-off tool on the 3 1/2" tubing. Set packer at 2900'.
- 6. Fracture treat the open hole 2936'-3353' with 20,000 gals 50% gelled 3% KCL water and 50% CO<sub>2</sub> containing 33,000# sand.
- 7. Open well to flow, recover load, and test. If swabbing is required, pull 3 1/2" and run 2 3/8", space out. NU wellhead and swab well to flow. If swabbing was not needed, set blanking plug in on-off tool, pull 3 1/2", run 2 3/8", space out. NU wellhead and pull blanking plug.

