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LAND OFFICE
TRANSPORTER <input type="checkbox"/> OIL <input type="checkbox"/> GAS
OPERATOR
PRORATION OFFICE

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

Form O-104  
Supersedes Old O-104 and O-105  
Effective 1-1-65

I. **Operator**  
Atlantic Richfield Company  
Address  
P. O. Box 1710, Hobbs, New Mexico 88240  
Reason(s) for filing (check proper box)  
New Well ☐ Change in Transportation ☐ Other (Please explain) Included in Seven Rivers Queen Unit eff: 9-1-73. Change in lease name from Sinclair "B" State #12.  
Production ☐ Oil ☐ Dry Gas ☐  
Change in Ownership ☒ Leasehold ☐ Condemnation ☐

If change of ownership give name and address of previous owner  
Gackle Oil Company, P. O. Box 2038, Hobbs, New Mexico 88240

II. DESCRIPTION OF WELL AND LEASE

Lease Name Seven Rivers Queen Unit	Well No. 52	Full Name, including Formation <del>Eunice Seven Rivers Queen So</del>	Kind of Lease State, Federal or Fee	State
Location Unit Letter H, 1980 Feet From The North Line and 660 Feet From The East Line of Section 3, Township 23S, Range 36E, NMPM, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Shell Pipeline Corporation	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1910, Midland, Texas 79701					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Phillips Petroleum Company	Address (Give address to which approved copy of this form is to be sent) Phillips Bldg. 4th & Washington, Odessa, Texas 79760					
If well produces oil or liquids, give location of tanks.	Unit E	Sec. 3	Twp. 23S	Rge. 36E	Is gas actually connected? Yes	When Unknown

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

IV. COMPLETION DATA

Designate Type of Completion - (X) <input type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> New Well <input type="checkbox"/> Workover <input type="checkbox"/> Deepen <input type="checkbox"/> Plug Back <input type="checkbox"/> Same Sect'n. <input type="checkbox"/> Diff. Sect'n.			
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
Pool	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
Restrictions	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	Casing Pressure	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.

  
(Signature)

Administrative Supervisor

(Title)

August 9, 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 Sections I, II, III, and VI only 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

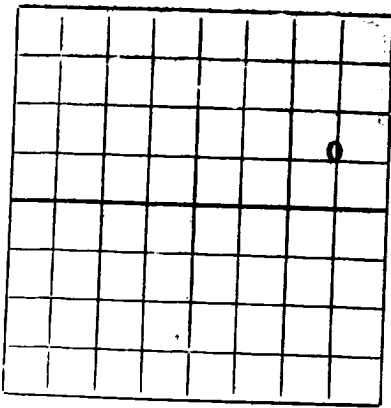
NEW MEXICO OIL CONSERVATION COMMISSION

Santa Fe, New Mexico

RECEIVED 7 M 3 11

WELL RECORD

Mail to District Office, Oil Conservation Commission, to which Form C-101 was sent not later than twenty days after completion of well. Follow instructions in Rules and Regulations of the Commission. Submit in QUINTUPLICATE. If State Land submit 6 Copies



AREA 640 ACRES  
LOCATE WELL CORRECTLY

Albert Gackle, Operator

(Company or Operator)

Sinclair State "B"

(Lease)

Well No. 12, in SE 1/4 of NE 1/4, of Sec. 3, T. 23 S, R. 36 E, NMPM.

Langlie Mattix

Pool, Lea

Well is 1980 feet from North line and 660 feet from East line

of Section 3. If State Land the Oil and Gas Lease No. is B-1506

Drilling Commenced September 14, 19 60 Drilling was Completed September 23, 19 60

Name of Drilling Contractor Gackle Drilling Company, Inc.

Address P. O. Box 2076, Hobbs, New Mexico

Elevation above sea level at Top of Tubing Head 3498 DF. The information given is to be kept confidential until 19

OIL SANDS OR ZONES

No. 1, from 3654 to 3680 No. 4, from to  
No. 2, from to No. 5, from to  
No. 3, from to No. 6, from to

IMPORTANT WATER SANDS

Include data on rate of water inflow and elevation to which water rose in hole.

No. 1, from to feet.  
No. 2, from to feet.  
No. 3, from to feet.  
No. 4, from to feet.

CASING RECORD

SIZE	WEIGHT PER FOOT	NEW OR USED	AMOUNT	KIND OF SHOE	CUT AND PULLED FROM	PERFORATIONS	PURPOSE
8 5/8	24	New	262	TP			
4 1/2	9.5	New	3865	TP			Surface

MUDDING AND CEMENTING RECORD

SIZE OF HOLE	SIZE OF CASING	WHERE SET	NO. SACKS OF CEMENT	METHOD USED	MUD GRAVITY	AMOUNT OF MUD USED
11	8 5/8	262	200	P & P		
6 3/4	4 1/2	3865	1635	P & P		

RECORD OF PRODUCTION AND STIMULATION

(Record the Process used, No. of Qts. or Gals. used, interval treated or shot.)

Sandfrac with 15,000 gals lease oil, 23,200# 20/40 mesh sand, 400# Adomite.

500 gals Spearhead Acid in two stages with ball sealers. Average rate 27.5 BPM.

Result of Production Stimulation LPF 316 BO. No Water 20/64 choke. FCP 500\*, FTP 300\*, SICP 900\*, SITP 500\*

Depth Cleaned Out 3848

# RECORD OF DRILL-STEM AND SPECIAL TESTS

If drill-stem or other special tests or deviation surveys were made, submit report on separate sheet and attach hereto

## TOOLS USED

Rotary tools were used from 0 feet to 3866 feet, and from feet to feet.  
Cable tools were used from feet to feet, and from feet to feet.

## PRODUCTION

Put to Producing October  
September 5, 19 60

OIL WELL: The production during the first 24 hours was 300 barrels of liquid of which 99.8% was  
was oil; 0% was emulsion; 0.2% water; and 0% was sediment. A.P.I.  
Gravity 36

GAS WELL: The production during the first 24 hours was M.C.F. plus barrels of  
liquid Hydrocarbon. Shut in Pressure lbs.

Length of Time Shut in

PLEASE INDICATE BELOW FORMATION TOPS (IN CONFORMANCE WITH GEOGRAPHICAL SECTION OF STATE):

### Southeastern New Mexico

### Northwestern New Mexico

T. Anhy. 1349  
T. Salt. 1509  
B. Salt. 2878  
T. Yates. 3026  
T. 7 Rivers. 3230  
T. Queen. 3664  
T. Grayburg.  
T. San Andres.  
T. Glorieta.  
T. Drinkard.  
T. Tubbs.  
T. Abo.  
T. Penn.  
T. Miss.

T. Devonian.  
T. Silurian.  
T. Montoya.  
T. Simpson.  
T. McKee.  
T. Ellenburger.  
T. Gr. Wash.  
T. Granite.  
T. Penrose 3750  
T.  
T.  
T.  
T.

T. Ojo Alamo.  
T. Kirtland-Fruitland.  
T. Farmington.  
T. Pictured Cliffs.  
T. Menefee.  
T. Point Lookout.  
T. Mancos.  
T. Dakota.  
T. Morrison.  
T. Penn.  
T.  
T.  
T.

## FORMATION RECORD

From	To	Thickness in Feet	Formation	From	To	Thickness in Feet	Formation
0	1349	1349	Red Shale & Sand				
1349	1509	160	Anhydrite				
1509	2878	1369	Salt & Anhydrite				
2878	3026	148	Dolomite & Anhydrite				
3026	3866	840	Sand, Dolomite, Anhydrite				

ATTACH SEPARATE SHEET IF ADDITIONAL SPACE IS NEEDED

I hereby swear or affirm that the information given herewith is a complete and correct record of the well and all work done on it so far  
as can be determined from available records.

Company or Operator. ALBERT GACKLE, OPERATOR  
Name. R. F. Montgomery  
R. F. Montgomery

October 7, 1960 (Date)  
Address. P. O. Box 2076 Hobbs, N. M.  
Position or Title. Agent