	· ·	DEALIT	IL CONSERVATION C	OMMISSION		Form C-104	
н. Е		KEQUE	ST FOR ALLOWAB	L.E		Supersedes	Old C-104 and
D OFFICE	AUT	HORIZATION TO	TRANSPORT OIL A			Effective 1-	1-65
	+			NATUR	KAL GAS		
TRANSPORTER GAS	-+						
OPERATOR							
Operator							
Sam D. Ares							
Address							
c/o Oil Reports & (Reason(s) for filing (Check prope	Gas Services	, Inc., Box 7	63, Hobbs, New	Mexice (88240		
New We!l	(00x)			ease explain			
Recompletion	Oil	in Transporter of:	Gas				
Change in Ownership	Casingh		iden s ate				
If change of ownership give nar							
and address of previous owner							
DESCRIPTION OF WELL A	ND LEASE					·	
Lease Name State JCT	Well No 1	. Pool Name, Including Jalmat Ya	Formation	Kind of	Lease		Lease N
Location				State, F	ederai or Fee	State	B-1431
Unit Letter B	660 Feet Fr	North	ine and 1930				- 1
			_ine and	Feet F	rom The	last	·
Line of Section 16	Township	23 S Range	36 E , NM	FM,	Lea		Count
DESIGNATION OF TRANSPO	ORTER OF OU	AND NATURAL C					Count
realize of Authorized Transporter of		Condensate	Address (Give addres	s to which a			
Scurlock Oil Company			Address (Give addres 1216 Vaugles	Elde	pproved copy of i Miclaric T	this form is t nwee 70	o be sent) 701
Name of Authorized Transporter of Northern Natural Gas	Casinghead Gas	or Dry Gas	Address /Give addres	s to which a	pproved copy of t	this form is t	o be sent)
	Unit Sec		ZZZJ Dodge S	treet, (Omaha, Neb	. 68101	o oc scm)
If well produces oil or liquids, give location of tanks.			1 is gas actually conne	cted?	When		- <u></u>
this production is commingled	with that from a				11/2	9/62	
this production is commingled	with that from an	ny other lease or pool	give commingling ord	er number:			
		Dil Well Gas Well	New Well Workover	Deepen			
Designate Type of Comple		1 ,	1	l l	Plug Back	Same Res	v. Diff. Res
Date Spudded	Date Compl. R	Ready to Prod.	Tetal Depth		P.B.T.D.	- <u>k</u>	
Elevations (DF, RKB, RT, GR, etc.	Name of Drodu	icing Formation		~			
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COPIES RECEIVED	
TRIBUTION	Form C-103 Supersedes Old
	C-102 and C-102
FE NEW MEXICO OIL CONSERVATION COMMISSION	Effective 1-1-65
U.S.G.S.	5a. Indicate Type of Lease
LAND OFFICE	State X Fee
OPERATOR	5. State Oil & Gas Lease No.
	B-1431
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVO USE "APPLICATION FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.)	IR. ())))))))))))))))))))))))))))))))))))
I. OIL GAS COTHER-	7. Unit Agreement Name
2. Name of Operator	8. Farm or Lease Name
Sam D. Ares	
3. Address of Operator	9. Well No.
c/o Oil Reports & Gas Services, Inc., Box 763, Hobbs, New Mexic	
c/o Oil Reports & Gas Services, Inc., Box 763, Hobbs, New Mexic 4. Location of Well	10. Field and Pool, or Wildcat
c/o Oil Reports & Gas Services, Inc., Box 763, Hobbs, New Mexic 4. Location of Well	10. Field and Pool, or Wildcat
c/o Oil Reports & Gas Services, Inc., Box 763, Hobbs, New Mexic 4. Location of Well UNIT LETTER <u>B</u> 660 FEET FROM THE North LINE AND 1980	FEET FROM
c/o Oil Reports & Gas Services, Inc., Box 763, Hobbs, New Mexic 4. Location of Well UNIT LETTER <u>B</u> 660 FEET FROM THE North LINE AND 1980	FEET FROM
c/o Oil Reports & Gas Services, Inc., Box 763, Hobbs, New Mexic 4. Location of Well	FEET FROM
c/o Oil Reports & Gas Services, Inc., Box 763, Hobbs, New Mexic 4. Location of Well UNIT LETTER <u>B</u> 660 FEET FROM THE <u>North</u> LINE AND 1980 THE <u>Bast</u> LINE, SECTION <u>16</u> TOWNSHIP <u>23 S</u> RANGE <u>36 E</u> 15. Elevation (Show whether DF, RT, GR, etc.)	I 10. Field and Pool, or Wildcat Jalmat Yates NMPM.
c/o Oil Reports & Gas Services, Inc., Box 763, Hobbs, New Mexic 4. Location of Well UNIT LETTER <u>B</u> 660 FEET FROM THE <u>North LINE AND</u> 1980 THE <u>East</u> LINE, SECTION <u>16</u> TOWNSHIP <u>23 S</u> RANGE <u>36 E</u> 15. Elevation (Show whether DF, RT, GR, etc.) 3460 GR	FEET FROM 10. Field and Pool, or Wildcat Jalmat Yates NMPM. 12. County Lea
c/o Oil Reports & Gas Services, Inc., Box 763, Hobbs, New Mexic 4. Location of Well UNIT LETTER <u>B</u> 660 THE <u>B</u> 660 THE <u>LINE, SECTION</u> 16 TOWNSHIP 23 S RANGE 36 E 15. Elevation (Show whether DF, RT, GR, etc.) 3460 GR 16. Check Appropriate Box To Indicate Nature of Notice, Repo	FEET FROM 10. Field and Pool, or Wildcat Jalmat Yates NMPM. 12. County Lea
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c/o Oil Reports & Gas Services, Inc., Box 763, Hobbs, New Mexic 4. Location of Well UNIT LETTER	I II. Field and Pool, or Wildcat Jalmat Yates NMPM. 12. County Lea Dort of Other Data
c/o 0il Reports & Gas Services, Inc., Box 763, Hobbs, New Mexic 4. Location of Well UNIT LETTER B 660 THE Bast 136 THE Check Appropriate Box To Indicate Nature of Notice, Reporting SUBS NOTICE OF INTENTION TO: SUBS PERFORM REMEDIAL WORK PLUG AND ABANDON TEMPORARILY ABANDON REMEDIAL WORK	Image: Second
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c/o 011 Reports & Gas Services, Inc., Box 763, Hobbs, New Mexic 4. Location of Well UNIT LETTER B 660 THE Conversion 1980 THE Check Appropriate Box To Indicate Nature of Notice, Repo NOTICE OF INTENTION TO: SUBS PERFORM REMEDIAL WORK PLUG AND ABANDON PULL OR ALTER CASING CHANGE PLANS CHANGE PLANS CASING TEST AND CEMENT IN	Image: Second

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.

Checked PBTD at 3229. Treated perfs 3150 to 3210 with 500 gallons 157, acid. Swabed load. Installed pumping equipment. 11/19/73 pumped 6 bbls oil, trace water, 63 MCF gas in 24 hours.

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

SIGNED LESCHY	1/ llis		Agent	DATE	73
APPROVED BY		TITLE		DATE	
CONDITIONS OF APPROVA	L, IF ANY:				

. COPIES RECEIVED		
TRIBUTION		Form C-103 Supersedes Old
í FE		C-102 and C-103
FILE	NEW MEXICO OIL CONSERVATION COMMISSION	Effective 1-1-65
U.S.G.S.		
LAND OFFICE		5a. Indicate Type of Lease
OPERATOR		State Fee
		5. State Oil & Gas Lease No. B-1431
SUN		
(DO NOT USE THIS FORM FOR USE "APPL	NDRY NOTICES AND REPORTS ON WELLS R PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR ICATION FOR PERMIT	•
OIL GAS WELL WELL	OTHER-	7. Unit Agreement Name
2. Name of Operator		8. Farm or Lease Name
Sam D. Ares		State JCT
3. Address of Operator		
c/o Oil Reports & Ga	as Services, Inc., Box 763, Hobbs, New Mexico	
c/o Oil Reports & Ga	AS Services, Inc., Box 763, Hobbs, New Mexico	9. Well No. 1
c/o Oil Reports & Ga		9. Well No. 1
c/o Oil Reports & Ga	660 North 1980	9, Well No. 0 1 10. Field and Pool, or Wildcat Jalmat Yates
c/o Oil Reports & Ga	660 North 1980	9. Well No. 0 1 10. Field and Pool, or Wildcat Jalmat Yates
c/o Oil Reports & Ga	660 <u>North 1980</u> FEET FROM THE <u>North 1980</u> I G 23 8 36 E RANGE <u>36 E</u>	9. Well No. 0 1 10. Field and Pool, or Wildcat Jalmat Yates
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c/o Oll Reports & Ga	660 FEET FROM THE North 1980 16 23 S RANGE 36 E 15. Elevation (Show whether DF, RT, GR, etc.) 3460 GR 24.60 GR SUBSE	9. Well No. 0 1 10. Field and Pool, or Wildcat Jalmat Yates NMPM. 12. County Lee rt or Other Data EQUENT REPORT OF:
C/O OIL Reports & Ga	660 FEET FROM THE North 1980 FEET FROM THE 10 10 10 ECTION 16 23 8 RANGE 36 E IS. Elevation (Show whether DF, RT, GR, etc.) 3460 GR 3460 GR Eck Appropriate Box To Indicate Nature of Notice, Report SUBSE PLUG AND ABANDON REMEDIAL WORK	9, Well No. 0 1 10. Field and Pool, or Wildcat Jalmat Yates FEET FROM NMPM. 12. County Lea Tt or Other Data EQUENT REPORT OF: ALTERING CASING
c/o Oll Reports & Ga	660	9, Well No. 0 1 10. Field and Pool, or Wildcat Jalmat Yates FEET FROM 12. County Lee Tt or Other Data EQUENT REPORT OF: ALTERING CASING PLUG AND ABANDONMENT
C/O OLL Reports & Ga	660 North 1980 FEET FROM THE 23 8 1980 16 TOWNSHIP 23 8 36 E 15. Elevation (Show whether DF, RT, GR, etc.) 3460 GR 24.60 GR 3460 GR 25. Appropriate Box To Indicate Nature of Notice, Report 26. PLUG AND ABANDON Remedial work COMMENCE DRILLING OPVS. CHANGE PLANS COMMENCE DRILLING OPVS.	9, Well No. 0 1 10. Field and Pool, or Wildcat Jalmat Yates FEET FROM 12. County Lee Tt or Other Data EQUENT REPORT OF: ALTERING CASING PLUG AND ABANDONMENT
C/O OLL Reports & Ga	660	9, Well No. 0 1 10. Field and Pool, or Wildcat Jalmat Yates FEET FROM 12. County Lee Tt or Other Data EQUENT REPORT OF: 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.

It is proposed to check total depth and swab test subject well in an attempt to return to a producing status.

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

SIGNED _ LAS MACHAIL	les		TITLE	Agent	DATE	10/23/73
	(include			A A State		
APPROVED BY		2.19	TITLE	and the second s	DATE	
CONDITIONS OF APPROVAL, IF ANY:	£	· • ·			0012	

	NO. OF COPIES RECEIVED	4		
	DISTRIBUTION SANTA FE		CONSERVATION COMMISSI	Form C-104
	FILE	REQUEST	Supersedes Old C-104 and C-11 Effective 1-1-65	
	U.S.G.S.	AUTHORIZATION TO TR	AND ANSPORT OIL AND NATU	PAL CAS
	LAND OFFICE			
	IRANSPORTER OIL GAS OPERATOR			
I.	PRORATION OFFICE			
1.	Operator Sem D. Ares			
	Address c/o Oil Reports & Gas	Services, Inc., Box 763	Hobbs, New Merico	88910
	Reason(s) for filing (Check proper bo	x)	Other (Please explai	
	New Well	Change in Transporter of: Oil Dry G		
	Change in Ownership	Casinghead Gas Conde		ovember 1, 1972
	If change of ownership give name and address of previous owner	Amerada Hese Corp., Dra	wer 817, Seminole, 1	exas 79360
11.	DESCRIPTION OF WELL AND	LEASE		
	Lease Name	Well No. Pool Name, Including F		of Lease Lease No.
	State JCT Location	1 Jalmat/Yates	Gan State,	Federal or Fee State B-1431
	Unit Letter <u>B</u> ; 6	60 Feet From The North Lin	ne and 1980 Fee	From The
	Line of Section 16 To	waship 23 8 Range	36 E , NMPM,	Les County
III.		TER OF OIL AND NATURAL GA		
	Name of Authorized Transporter of Of			h approved copy of this form is to be sent)
	Name of Authorized Transporter of Ca			approved copy of this form is to be sent)
	Northern Natural Gas If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge.	Is gas actually connected?	When 11/29/62
IV		ith that from any other lease or pool,	give commingling order numbe	
1 V .	COMPLETION DATA Designate Type of Completi	on - (X)	New Well Workover Dee	pen Plug Back Same Res'v. Diff. Res'v.
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	F.B.T.D.
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
	Perforations		1	Depth Casing Shoe
		TUBING, CASING, ANI	CEMENTING RECORD	·····
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
			<u> </u>	· · · · · · · · · · · · · · · · · · ·
V.	TEST DATA AND REQUEST F OIL WELL	OR ALLOWABLE (Test must be a able for this de	fter recovery of total volume of lo opth or be for full 24 hours)	ad oil and must be equal to or exceed top allow-
	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-Bbla.	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 COMPLIAN	CE	OIL CONSE	TVATION COMMISSION
	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	Orig Signed by
			BY Orig. Signed by Joe D. Ramey	
			TITLE	Dist. I, Supv.
	12	11 11		ed in compliance with RULE 1104.
-	- liannu (Sign	Holes	well this form must be ac	allowable for a newly drilled or deepened companied by a tabulation of the deviation
			tests taken on the well in	accordance with RULE 111.
•	Age (Ti		able on new and recomplet	
		27/72	Fill out only Section	I, II, III, and VI for changes of owner, nsporter, or other such change of condition.
		ite)	well name or number, or tra	unbotted of other anen eusuffe of countriour

Separate Forms C-104 must be filed for each pool in multiply

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OUT 3 1972 OIL CONSERVATION COMM. HOBBS, N. M.

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	BO. PF ERFIEN ALCEIVED	r{	•	
	DISTRIMUTION	NEW MEXICO OI	L CONSERVATION COMMISSION	
	PILE	REQUE	ST FOR ALLOWABLE	¥ Form C=104 Superceder Old C=104 and
			AND	Effective 1-1-65
	U.S.G.S.	AUTHORIZATION TO T	TRANSPORT OIL AND NATE	PAL CAS
	LAND OFFICE			
	OPERATOR CAS			
,	PRORATION OFFICE		n	
	Operator			
	Amerada Hess	فعواسه وجذا والبابية المثلية والمسادات والشبك بالوالي والمترج المتحد والمتحد والمتحد والمتحد والمتحد		
		1 Midland Tana	•	
	Reoson(s) for filing (Check proper	l. Midland, Texas 7970	Other (Please explored	
	New We:1	Change in Transporter of:	Concer (r icuse explore)	CHANGE NAME FROM
	Recompletion	. OII Dry	Gaz	AMERADA DIV. AMERADA HESS CORPORATION
	Change in Ow ership	Casinghead Gas Cor	ndensate	O: AMERADA HESS CORPORATION
1	If change o, ownership give nam	e ``	4	FESECTIVE AUG. 1. 1971
	and address of previous owner			
1	DESCRIPTION OF WELL AN	Well No.; Pool Name, Including	Formation Kind. o	[] #150
	State J.C "T"	1 Jalmat/Yate		Federal or Fee State - B-143
-				<u> </u>
1	Unit Letter B ; 66	0 [†] Feet From The <u>North</u>	Line and <u>1980</u> [†] Fourt	From The East
L	Line of Section 16	Township 23–5 Range	36-Е , МИРМ,	Lea Count
III. 1	DESIGNATION OF TRANSPO	RTER OF OIL AND NATURAL (246	
ſ	Name of Authorized Transporter of a	Dil _ or Condensate		approved copy of this form is to be sentj
, İ.	• None			•
	Northern Natural			approved copy of this form is to be sent)
ŀ	If well produces oil or liquids,	Unit Sec. Twp. P.ge.	Is gas actually connected?	<u>Omaha, Nebraska 68101</u>
	give location of tanks.		Yes	When I
1	this production is commingled	with that from any other lease or poo		rs •
<u>۲</u> ۳.۲	LUMPLE HON DATA		New Well Workover Demo	
L	Designate Type of Complete	tion = (X)		en Plug Bock Same Res'v. Diff. Rus
ſ	Dote Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
E	Chevatians (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	
L				Tubing Depth
1	Perforations			Depth Casing Shoe
- F			ID CENENTING DECODE	
	HOLE SIZE	CASING & TUBING SIZE	D CEMENTING RECORD	
			DEPTRSET	SACKS CEMENT
-				
Ц V. т	EST DATA AND REQUEST I	FOR ALLOWARLE Transmission		
0	H. WELL	able for this d	repun or de jor juli 24 hours)	d oil and must be equal to or exceed top allo
ľ	ate First New Oil Run To Tanks	Date of Test	Producing Mythod (Flow, pumpus	as lift, etc.)
	ength of Test	Tubing Pressure	Casing Pressure	Choke Size
Ļ				
	ctual Prod. During Test	Oil-Bbie.	Water+Bbls.	Gae-MCF
.				
	AS WELL ctural Prod. Test-MCF/D			
		Length of Test	Bble. Condensate/MACF	Gravity of Condensate
T	eating Method (pitos, back pr.)	Tubing Preseure (Shat-in)	Casing Pressure (Shat-18)	Choke Size
' I. CE	ERTIFICATE OF COMPLIAN	CE "		RVATION COMMISSION
1 >	oroby certify that the mine and	regulations of the Oil Conservation	APPROVED AUG 1	3 1971
Cor	mmission have been complied	with and that the information given		
#D0	ive is true and complete to the	e best of my knowledge and bellef.	BY THE	
			TITLE SU	BOISTRICT I
	Atthering		This form is to be fullied	In compliance with AULE 1104.
an a	- Att Alkent	<u>در المحمد الم</u>	If this is a request \$	llowable for a nawly drilled or deepens
	· C PRODUCTIOS'	ÉCORDS SUPERVISOR	well, this form mult be artico teate taken on the well was a	mpanied by a tabulation of the deviation condence with much titl.

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All sections of the starm must be filled out completely for ellow

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AUG 1 1971 OIL CONSERVATION COMM. HOBBS, N. M.