

## NEW MEXICO OIL CONSERVATION COMMISSION

Santa Fe, New Mexico

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## 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

Burleson &amp; Huff

Sunshine Royalty

(Company or Operator)

(Lease)

Well No. 1, in SW 1/4 of NW 1/4, of Sec. 17, T. 22S, R. 38E, NMPM.

Drinkard

Pool, Lea

County.

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

of Section 17. If State Land the Oil and Gas Lease No. is

Drilling Commenced 11/12, 1963 Drilling was Completed 12/7, 1963

Name of Drilling Contractor Leatherwood Drilling Company

Address Kermit, Texas

Elevation above sea level at Top of Tubing Head 3378 The information given is to be kept confidential until 19

## OIL SANDS OR ZONES

No. 1, from 7008 to 7142 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 none 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
9 5/8	36#	new	1358	Baker			Surface
7	26#	"	7186	"			Oil String

## MUDDING AND CEMENTING RECORD

SIZE OF HOLE	SIZE OF CASING	WHERE SET	NO. SACKS OF CEMENT	METHOD USED	MUD GRAVITY	AMOUNT OF MUD USED
10 3/4	9 5/8	1358	500	pump & plug		cement circulated
8 5/8	7	7186	1070	"	10#	hole full

## RECORD OF PRODUCTION AND STIMULATION

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

Result of Production Stimulation

Depth Cleaned Out

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 7187 feet, and from feet to feet.  
Cable tools were used from feet to feet, and from feet to feet.

PRODUCTION

Put to Producing 1/18, 19 64.

OIL WELL: The production during the first 24 hours was 108 barrels of liquid of which 100 % was oil; % was emulsion; % water; and % was sediment. A.P.I. Gravity 34.

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	1370	T. Devonian	T. Ojo Alamo
T. Salt	1450	T. Silurian	T. Kirtland-Fruitland
B. Salt	2660	T. Montoya	T. Farmington
T. Yates	2760	T. Simpson	T. Pictured Cliffs
T. 7 Rivers		T. McKee	T. Menefee
T. Queen		T. Ellenburger	T. Point Lookout
T. Grayburg		T. Gr. Wash	T. Mancos
T. San Andres		T. Granite	T. Dakota
T. Glorieta	5395	T.	T. Morrison
T. Drinkard	6900	T.	T. Penn
T. Tubbs	6411	T.	T.
T. Abo		T.	T.
T. Penn		T.	T.
T. Miss		T.	T.

FORMATION RECORD

From	To	Thickness in Feet	Formation	From	To	Thickness in Feet	Formation
0	1370	1370	Red Beds				
1370	1450	80	Anhy				
1450	2660	2210	Salt				
2660	2760	100	Anhy				
2760	4200	1440	Sand & Dolomite				
4200	5420	1220	Dolomite				
5420	5550	130	Sand, Dolomite				
5550	6411	861	Dolomite				
6411	6500	89	Sand				
6500	7187	687	Dolomite				

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 Burleson & Huff Address Box 953, Midland, Texas  
Name Ernest Smith Position or Title Agent  
1/21/64 (Date)

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**NEW MEXICO OIL CONSERVATION COMMISSION**  
Santa Fe, New Mexico

(Form C-104)  
Revised 7/1/57

**REQUEST FOR (OIL) - (GAS) ALLOWABLE**

**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.

(Place)

(Date)

**WE ARE HEREBY REQUESTING AN ALLOWABLE FOR A WELL KNOWN AS:**

\_\_\_\_\_, Well No. \_\_\_\_\_, in \_\_\_\_\_ 1/4 \_\_\_\_\_ 1/4,  
(Company or Operator) (Lease)  
\_\_\_\_\_, Sec. \_\_\_\_\_, T. \_\_\_\_\_, R. \_\_\_\_\_, NMPM., \_\_\_\_\_ Pool  
Unit Letter \_\_\_\_\_

Please indicate location:

D	C	B	A
E	F	G	H
L	K	J	I
M	N	O	P

(FOOTAGE)  
Tubing, Casing and Cementing Record

Size	Feet	S&W

County. Date Spudded \_\_\_\_\_ Date Drilling Completed \_\_\_\_\_  
Elevation \_\_\_\_\_ Total Depth \_\_\_\_\_ PBTD \_\_\_\_\_

Top Oil/Gas Pay \_\_\_\_\_ Name of Prod. Form. \_\_\_\_\_

**PRODUCING INTERVAL -**

Perforations \_\_\_\_\_  
Open Hole \_\_\_\_\_ Depth \_\_\_\_\_ Depth \_\_\_\_\_  
Casing Shoe \_\_\_\_\_ Tubing \_\_\_\_\_

**OIL WELL TEST -**

Natural Prod. Test: \_\_\_\_\_ bbls. oil, \_\_\_\_\_ bbls water in \_\_\_\_\_ hrs, \_\_\_\_\_ min. Size \_\_\_\_\_  
Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of Choke  
load oil used): \_\_\_\_\_ bbls. oil, \_\_\_\_\_ bbls water in \_\_\_\_\_ hrs, \_\_\_\_\_ min. Size \_\_\_\_\_

**GAS WELL TEST -**

Natural Prod. Test: \_\_\_\_\_ MCF/Day; Hours flowed \_\_\_\_\_ Choke Size \_\_\_\_\_

Method of Testing (pitot, back pressure, etc.): \_\_\_\_\_

Test After Acid or Fracture Treatment: \_\_\_\_\_ MCF/Day; Hours flowed \_\_\_\_\_

Choke Size \_\_\_\_\_ Method of Testing: \_\_\_\_\_

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): \_\_\_\_\_

Casing \_\_\_\_\_ Tubing \_\_\_\_\_ Date first new  
Press. \_\_\_\_\_ Press. \_\_\_\_\_ oil run to tanks \_\_\_\_\_

Oil Transporter \_\_\_\_\_

Gas Transporter \_\_\_\_\_

Remarks: \_\_\_\_\_

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

Approved: \_\_\_\_\_, 1964

**OIL CONSERVATION COMMISSION**

By: \_\_\_\_\_

Title \_\_\_\_\_

(Company or Operator)

By: \_\_\_\_\_

(Signature)

Title \_\_\_\_\_

Send Communications regarding well to:

Name \_\_\_\_\_

Address \_\_\_\_\_

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NEW MEXICO OIL CONSERVATION COMMISSION  
SANTA FE, NEW MEXICO

## CERTIFICATE OF COMPLIANCE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

FORM C-110  
(Rev. 7-60)

FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE

Company or Operator <i>Phillips Petroleum Co.</i>				Lease <i>Lease</i>	Well No. <i>1</i>
Unit Letter <i>B</i>	Section <i>22</i>	Township <i>22S</i>	Range <i>30E</i>	County <i>Lea</i>	
Pool <i>Phillips</i>				Kind of Lease (State, Fed, Fee) <i>Fee</i>	
If well produces oil or condensate give location of tanks		Unit Letter <i>B</i>	Section <i>22</i>	Township <i>22S</i>	Range <i>30E</i>
Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/>			Address (give address to which approved copy of this form is to be sent)		

Is Gas Actually Connected? Yes ☒ No ☐

Authorized transporter of casing head gas <input type="checkbox"/> or dry gas <input type="checkbox"/>	Date Connected <i>Verified</i>	Address (give address to which approved copy of this form is to be sent)
<i>Phillips Petroleum Co. and Warren Pet. Co. and Phillips Ind. Co.</i>		

If gas is not being sold, give reasons and also explain its present disposition:

**REASON(S) FOR FILING** (please check proper box)

- |  |  |
|--|--|
| New Well <input checked="" type="checkbox"/>                                 | Change in Ownership <input type="checkbox"/> |
| Change in Transporter (check one)  | Other (explain below)                        |
| Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>                |  |
| Casing head gas <input type="checkbox"/> Condensate <input type="checkbox"/> |  |

Remarks

The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.

Executed this the 51 day of January, 19 64

OIL CONSERVATION COMMISSION		By <i>Ernest S. Smith</i>
Approved by <i>[Signature]</i>	Title <i>Secretary</i>	
Title <i>Secretary</i>	Company <i>Phillips</i>	
Date <i>Jan 31, 1964</i>	Address <i>Box 900, Santa Fe, N.M.</i>	