

OIL CONSERVATION COMMISSION

HOBBS OFFICE O. C. C.

BOX 2045
Jul 27 11 37 AM '67

HOBBS, NEW MEXICO

NOTICE OF GAS CONNECTION

DATE July 26, 1967

This is to notify the Oil Conservation Commission that connection for
the purchase of gas from the Phillips Petroleum Company, New Mexico "D",
Operator Lease
1, S36-T22S-R37E., Blinebry, Skelly Oil Company,
Well Unit S. T. R. Pool Name of Purchaser
was made on *

*Submitted to show well reclassified from Blinebry
oil to Blinebry gas effective August 1, 1967.

Skelly Oil Company
Purchaser

R. E. J. Dodd
Representative

Southern District Manager
Title

cc: To operator
Oil Conservation Commission - Santa Fe

SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Supersedes Old C-104 and C-1
Effective 1-1-65
JUL 21 8 21 AM '67

I.

Operator Phillips Petroleum Company	
Address Room B-2 Phillips Building, Odessa, Texas	
Reason(s) for filing (Check proper box)	
New Well <input type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input checked="" type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input checked="" type="checkbox"/>
Other (Please explain) Well reclassified from oil to gas effective August 1, 1967	
If change of ownership give name and address of previous owner	

II. DESCRIPTION OF WELL AND LEASE

Lease Name New Mex "D"	Well No. 1	Pool Name, Including Formation Blinebry (Gas)	Kind of Lease State, Federal or Fee	State	Lease No.
Location					
Unit Letter H ; 1930 Feet From The North Line and 660 Feet From The east					
Line of Section 36 Township 22-S Range 37E , 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"/>	Address (Give address to which approved copy of this form is to be sent)				
Texas New Mexico Pipe Line Company	Box 1510, Midland, Texas				
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)				
Skelly Oil Company	Eunice, New Mexico				
If well produces oil or liquids, give location of tanks.	Unit H	Sec. 36	Twp. 22S	Rge. 37E	Is gas actually connected? When Yes 10-8-64

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

IV. COMPLETION DATA

Designate Type of Completion - (X)		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'tv.	Diff. Res'tv.
Date Spudded	Date Compl. Ready to Prod.	Total Depth			P.B.T.D.				
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay			Tubing Depth				
Perforations							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 (Shut-in)	Casing Pressure (Shut-in)	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.

W. J. Mueller W. J. Mueller
(Signature)
Reservoir Engineer
(Title)
July 21, 1967
(Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19____
BY J. A. Starnes
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 completed wells.

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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 1-1-65

I. Operator
Phillips Petroleum Company
Address
Room B-2, Phillips Building, Odessa, Texas
Reason(s) for filing (Check proper box)
New Well ☐ Change in Transporter of: Oil ☒ Dry Gas ☐
Recompletion ☐ Casinghead Gas ☐ Condensate ☐
Change in Ownership ☐ Other (Please explain)

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name New Mex "D"	Well No. 1	Pool Name, Including Formation Blinebry (Oil)	Kind of Lease State, Federal or Fee State
Location Unit Letter H ; 1930 Feet From The north Line and 660 Feet From The east Line of Section 36 , Township 22-S Range 37-E , 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"/> Texas-New Mexico Pipe Line Company	Address (Give address to which approved copy of this form is to be sent) Box 1510, Midland, Texas					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> Skelly Oil Company	Address (Give address to which approved copy of this form is to be sent) Eunice, New Mexico					
If well produces oil or liquids, give location of tanks.	Unit H	Sec. 36	Twp. 22-S	Rge. 37-E	Is gas actually connected? Yes	When 10-8-64

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

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'ty.	Diff. Res'ty.
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
Pool	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
Perforations			Depth Casing Shoe					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			

V. TEST DATA AND REQUEST FOR ALLOWABLE (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.

W.J. Mueller **W.J. Mueller**
(Signature) **Reservoir Engineer**
(Title)
March 23, 1965
(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 deviator 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 multiple completed wells.

N.

HABBS OFFICE O. C. C.

WELL RECORD

NUMBER OF COPIES RECEIVED			
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LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
PRORATION OFFICE			
OPERATOR			

AREA 640 ACRES
LOCATE WELL CORRECTLY.

New York 100

(Lease)

Blinbury (Cd1)

Elevation above sea level at Top of Tubing Head..... 3907' 01 The information given is to be kept confidential until
....., 19.....

No. 3, from.....to.....

No. 4, from.....to.....feet.

SIZE	WEIGHT PER FOOT	NEW OR USED	AMOUNT	KIND OF SHOE	CUT AND PULLED FROM	PERFORATIONS	PURPOSE
9-5/8"	32	New	1237'	Hallib			Surface
7"	20-23	New	7037'	Hallib			Intermediate
4-1/2"	9.5-10.5	New	6882'	Hallib		5579-5670	Production

SIZE OF HOLE	SIZE OF CASING	WHERE SET	NO. SACKS OF CEMENT	METHOD USED	MUD GRAVITY	AMOUNT OF MUD USED
12-1/4"	9-5/8"	1250'	480	Pump-plug		
8-3/4"	7"	7050'	1189	"		
7-7/8"	4-1/2"	6895'	725	"		

Fracture treated with 20,000 gallons refined oil, 20,000# sand, 500 gallons acid

Result of Production Stimulation..... **Flowed 24 hours, 366 barrels oil, no water**

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 surface feet to TD feet, and from _____ feet to _____ feet.
Cable tools were used from _____ feet to _____ feet, and from _____ feet to _____ feet.

PRODUCTION

Put to Producing August 1, 19 64

OIL WELL: The production during the first 24 hours was 367 barrels of liquid of which 99.8 % was oil; _____ % was emulsion; _____ % water; and .2 % was sediment. A.P.I. Gravity 40.3

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. <u>1148</u>	T. Devonian	T. Ojo Alamo	
T. Salt	T. Silurian	T. Kirtland-Fruitland	
B. Salt	T. Montoya	T. Farmington	
T. Yates <u>2530</u>	T. Simpson <u>7345</u>	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 <u>3892</u>	T. Granite <u>7577</u>	T. Dakota	
T. Glorieta <u>5072</u>	T.	T. Morrison	
T. Drinkard <u>6140</u>	T.	T. Penn	
T. Tubbs <u>5960</u>	T. <u>Blinchey 5462</u>	T.	
T. Abo <u>6520</u>	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	1250	1250	Redbed, anhydrite				
1250	2500	1250	Anhydrite				
2500	3795	1295	Anhydrite, salt				
3795	6949	3154	Lime				
6949	7653	704	Lime, shale				
7653	7704	51	Lime, shale, chert, sand				
7704	7857	153	Lime, chert				
	TD						

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 Phillips Petroleum Company Address Box 2130 - Hobbs, N.M. (Date) August 3, 1964
Name H. B. Creston Position or Title Office Manager

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NEW MEXICO OIL CONSERVATION COMMISSION

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

Santa Fe, New Mexico

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

Aug 4 10 35 AM 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.

Hobbs, New Mexico

August 3, 1964

(Place)

(Date)

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

Phillips Petroleum Company New Mex "D", Well No. 1, in SE 1/4 NE 1/4,

(Company or Operator)

(Lease)

H Sec 36 T 22S R 37E NMPM., Blinebry (Oil) Pool

Unit Letter

Lea

County. Date Spudded 5-30-64 Date Drilling Completed 7-4-64

Elevation 3307' GL Total Depth 7867' PBD 6893'

Please indicate location:

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

Top Oil/Gas Pay 5579' Name of Prod. Form. Blinebry

PRODUCING INTERVAL -

Perforations 5579 - 5670'

Open Hole Depth Casing Shoe Depth Tubing 5676'

OIL WELL TEST -

Natural Prod. Test: None prior to fracture treatment Choke Size

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of Choke load oil used): 366 bbls, oil, 0 bbls water in 24 hrs, 00 min. Size 24/64"

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): Fractured with 20,000 gal RO, 20,000# sand, 500 gal acid

Casing Press. 3600# Tubing Press. Date first new oil run to tanks July 30, 1964

Oil Transporter The Permian Corporation

Gas Transporter -

Remarks:

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

Approved: 19.

Phillips Petroleum Company

(Company or Operator)

By: (Signature)

Title: Office Manager

Send Communications regarding well to:

Name: Phillips Petroleum Company

Address: Box 2130 - Hobbs, N.M.

OIL CONSERVATION COMMISSION

By:

Title

DEVIATION RECORD

HOBBS OFFICE O. C. C.
AUG 4 10 36 AM '64

Phillips Petroleum Company

NEW MEX "D" Well No. 1
Unit H
Sec 36, T22S, R37E
Lea County, New Mexico

<u>DEGREE DEVIATION</u>	<u>DEPTH</u>	<u>DEGREE DEVIATION</u>	<u>DEPTH</u>
1/2	250'	1-1/4	5332'
1/4	550	1-1/4	5522
0	1000	1	5770
1-1/2	1250	1/4	5961
1	1650	1/2	6386
1-3/4	2042	1/2	6950
2	2440	1	7130
2	2550	1-1/4	7240
1-3/4	2669	2-1/4	7440
1-3/4	3050	2-3/4	7590
1-3/4	3618	3-1/4	7652
1-1/4	3790	2-1/2	7687
1-1/4	4829		TD 7867
1-1/4	5040		

STATE OF NEW MEXICO
COUNTY OF LEA

Before me the undersigned authority, on this day appeared M. G. Croston, known to be the duly authorized agent of this company who, upon oath, says that the foregoing is true and correct to the best of his knowledge.

M. G. Croston

Subscribed and sworn to before me this the 3rd day of August, 1964.

Jack L. Lawrence
Notary Public - Lea County, N.M.

My Commission Expires August 28, 1965

