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**NEW MEXICO OIL CONSERVATION COMMISSION  
WELL COMPLETION OR RECOMPLETION REPORT AND LOG**

Form C-105  
Revised 1-1-65

5a. Indicate Type of Lease	
State <input type="checkbox"/>	Fee <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.	

1a. TYPE OF WELL						7. Well Address or Name	
b. TYPE OF COMPLETION OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> DRY <input type="checkbox"/> OTHER <input type="checkbox"/> NEW WELL <input checked="" type="checkbox"/> WORK OVER <input type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input type="checkbox"/> DIFF. RESVR. <input type="checkbox"/> OTHER <input type="checkbox"/>						Langlie Mattix Penrose Sand Unit	
2. Name of Operator						8. Farm or Lease Name	
Anadarko Production Company						Tract No. 14	
3. Address of Operator						9. Well No.	
P. O. Box 247 Hobbs, New Mexico 88240						1	
4. Location of Well						10. Field and Pool, or Wildcat	
UNIT LETTER <u>O</u> LOCATED <u>460</u> FEET FROM THE <u>South</u> LINE AND <u>2180</u> FEET FROM						Langlie Mattix	
THE <u>East</u> LINE OF SEC. <u>22</u> TWP. <u>22S</u> RGE. <u>37E</u> NMPM						12. County	
						Lea	
15. Date Spudded	16. Date T.D. Reached	17. Date Compl. (Ready to Prod.)	18. Elevations (DF, RKB, RT, GR, etc.)	19. Elev. Casinghead			
5-29-71	6-3-71	6-12-71	3345' RKB	3335' GL			
20. Total Depth	21. Plug Back T.D.	22. If Multiple Compl., How Many	23. Intervals Drilled By	Rotary Tools	Cable Tools		
3700'	3684'		→	0-3700'	-		
24. Producing Interval(s), of this completion - Top, Bottom, Name						25. Was Directional Survey Made	
3502'-3640' Queen						No	
26. Type Electric and Other Logs Run						27. Was Well Cored	
Gamma Ray, Caliper, Densilog						No	
28. CASING RECORD (Report all strings set in well)							
CASING SIZE	WEIGHT LB./FT.	DEPTH SET	HOLE SIZE	CEMENTING RECORD		AMOUNT PULLED	
8-5/8"	24#	367'	12 1/4"	325 sks Cl. C.		circulated	
5 1/2"	14#	3696'	7-7/8"	350 sks Class C			
29. LINER RECORD							
SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN	30. TUBING RECORD		
None					SIZE	DEPTH SET	PACKER SET
					2-7/8"	3640'	None
31. Perforation Record (Interval, size and number)				32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
3502-06' (5), 3512'-19' (8), 3542'-59' (18), 3585'-87' (4), 3600'-06' (7), 3637'-40' (4)				DEPTH INTERVAL			
				AMOUNT AND KIND MATERIAL USED			
				3502'-3640' 800 gal 15% HCL, 60,000 gal gelled 9# brine w/ 110,000 # sand.			
33. PRODUCTION							
Date First Production		Production Method (Flowing, gas lift, pumping - Size and type pump)				Well Status (Prod. or Shut-in)	
6-21-71		Pumping 2 1/2" x 1 1/2" x 16' Insert				Producing	
Date of Test	Hours Tested	Choke Size	Prod'n. For Test Period	Oil - Bbl.	Gas - MCF	Water - Bbl.	Gas - Oil Ratio
6-24-71	24	-	→	78	93.6	272	1200
Flow Tubing Press.	Casing Pressure	Calculated 24-Hour Rate	Oil - Bbl.	Gas - MCF	Water - Bbl.	Oil Gravity - API (Corr.)	
-	-	→	78	93.6	272	36.4	
34. Disposition of Gas (Sold, used for fuel, vented, etc.)						Test Witnessed By	
Sold						Herb Henderson	
35. List of Attachments							
Gamma Ray, Caliper, Densilog							
36. I hereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief.							
SIGNED <u>M. J. Nelson</u>				TITLE <u>Dist. Superintendent</u>		DATE <u>6-24-71</u>	

## INSTRUCTIONS

This form is to be filed with the appropriate District Office of the Commission not later than 20 days after the completion of any newly-drilled or deepened well. It shall be accompanied by one copy of all electrical and radio-activity logs run on the well and a summary of all special tests conducted, including drill stem tests. All depths reported shall be measured depths. In the case of directionally drilled wells, true vertical depths shall also be reported. For multiple completions, Items 30 through 34 shall be reported for each zone. The form is to be filed in quintuplicate except on state land, where six copies are required. See Rule 1105.

**INDICATE FORMATION TOPS IN CONFORMANCE WITH GEOGRAPHICAL SECTION OF STATE**

## Southeastern New Mexico

## Northwestern New Mexico

T. Anhy	1127'	T. Canyon	T. Ojo Alamo	T. Penn. "B"
T. Salt	1223'	T. Strawn	T. Kirtland-Fruitland	T. Penn. "C"
B. Salt	2438'	T. Atoka	T. Pictured Cliffs	T. Penn. "D"
T. Yates	2608'	T. Miss	T. Cliff House	T. Leadville
T. 7 Rivers	2804'	T. Devonian	T. Menefee	T. Madison
T. Queen	3374'	T. Silurian	T. Point Lookout	T. Elbert
T. Grayburg		T. Montoya	T. Mancos	T. McCracken
T. San Andres		T. Simpson	T. Gallup	T. Ignacio Qtzte
T. Glorieta		T. McKee	Base Greenhorn	T. Granite
T. Paddock		T. Ellenburger	T. Dakota	T.
T. Blinebry		T. Gr. Wash	T. Morrison	T.
T. Tubb		T. Granite	T. Todilto	T.
T. Drinkard		T. Delaware Sand	T. Entrada	T.
T. Abo		T. Bone Springs	T. Wingate	T.
T. Wolfcamp		T.	T. Chinle	T.
T. Penn.		T.	T. Permian	T.
T. Cisco (Bough C)		T.	T. Penn. "A"	T.

FORMATION RECORD (Attach additional sheets if necessary)

From	To	Thickness in Feet	Formation	From	To	Thickness in Feet	Formation
0	367'	367'	Caliche, sand, & red beds				
367'	520'	153'	Red beds				
520'	1223'	703'	Red beds & Anhydrite				
1223'	2438'	1215'	Salt & anhydrite				
2438'	3374'	936'	Anhydrite & lime				
3374'	3700'	326'	Dolomite w/sand stringers				

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**JUN 23 1971**

**OIL CONSERVATION COMM.**

**HOBBS, N. M.**



**LTR**



**Job separation sheet**

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TRANSPORTER	OIL	
	GAS	
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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  
**Anadarko Production Company**  
Address  
**P. O. Box 247 Hobbs, New Mexico**  
Reason(s) for filing (Check proper box)  
New Well ☒ Change in Transporter of:  
Recompletion ☐ Oil ☐ Dry Gas ☐  
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐  
Other (Please explain)

If change of ownership give name  
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Langlie Mattix Penrose	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
Sand Unit Tract No. 14	1	Langlie Mattix-Queen	State, Federal or Fee	Fee
Location Unit Letter <b>O</b> ; <b>460</b> Feet From The <b>South</b> Line and <b>2180</b> Feet From The <b>East</b> Line of Section <b>22</b> Township <b>22S</b> Range <b>37E</b> , NMPM, <b>Lea</b> 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"/>	Address (Give address to which approved copy of this form is to be sent)
<b>Shell Pipeline Company</b>	<b>Box 1165, Eunice, New Mexico 88231</b>
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
<b>Skelly Oil Company</b>	<b>Box 372, Eunice, New Mexico 88231</b>
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When
<b>L 22 22S 37E</b>	<b>Yes 8-21-70</b>

If this production is commingled with that from any other lease or pool, give commingling order number: **EFFECTIVE JANUARY 31, 1977**

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug and Abandon
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.			
<b>5-29-71</b>	<b>6-12-71</b>	<b>3700'</b>	<b>3684'</b>			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth			
<b>3335 GL - 3345' RKB</b>	<b>Queen</b>	<b>3502'</b>	<b>3640'</b>			
Perforations	Depth Casing Shoe					
<b>3502-3640'</b>						
TUBING, CASING, AND CEMENTING RECORD						
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT			
<b>12 1/4"</b>	<b>8-5/8" 24#</b>	<b>367'</b>	<b>325 sks Class "C"</b>			
<b>7-7/8"</b>	<b>5 1/2" 14#</b>	<b>3696'</b>	<b>350 sks Class "C"</b>			

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.)	
<b>6-12-71</b>	<b>6-24-71</b>	<b>Pump</b>	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
<b>24 hrs.</b>	<b>-</b>	<b>-</b>	<b>-</b>
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF
<b>350</b>	<b>78</b>	<b>272</b>	<b>93.6</b>

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.

**Don F. Wilson**  
(Signature)  
**District Superintendent**  
(Title)

OIL CONSERVATION COMMISSION  
APPROVED **JUN 28 1971**, 19\_\_\_\_\_  
BY **John A. King**  
TITLE **SUPERVISOR DISTRICT I**

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 allow-

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OIL CONSERVATION COMM.  
HOBBS, N. M.