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Form C-105  
Revised 1-1-65

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

5a. Indicate Type of Lease	
State <input checked="" type="checkbox"/>	Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.	
B-1167	

1a. TYPE OF WELL		7. Unit Agreement Name	
OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> DRY <input type="checkbox"/> OTHER <input type="checkbox"/>			
b. TYPE OF COMPLETION		8. Farm or Lease Name	
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"/>		State JJ	
2. Name of Operator		9. Well No.	
John H. Hendrix		3	
3. Address of Operator		10. Field and Pool, or Wildcat	
403 Wall Towers West, Midland, Texas 79701		Langlie-Mattix	

4. Location of Well		12. County	
UNIT LETTER <u>0</u> LOCATED <u>660</u> FEET FROM THE <u>south</u> LINE AND <u>1980</u> FEET FROM THE <u>east</u>		Lea	
LINE OF SEC. <u>13</u> TWP. <u>23-S</u> RGE. <u>36-E</u> NMPM			

15. Date Spudded	16. Date T.D. Reached	17. Date Compl. (Ready to Prod.)	18. Elevations (DF, RKB, RT, GR, etc.)	19. Elev. Casinghead
5-4-74	5-12-74	6-3-74	3359.1' GL	
20. Total Depth	21. Plug Back T.D.	22. If Multiple Compl., How Many	23. Intervals Drilled By	Rotary Tools Cable Tools
3700'			rotary	
24. Producing Interval(s), of this completion - Top, Bottom, Name				25. Was Directional Survey Made
3468'-3596' - Seven Rivers and Queen				no
26. Type Electric and Other Logs Run				27. Was Well Cored
Gamma-Ray, Sidewall Neutron Porosity				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#	387'	11"	275 sxs.	
5 1/2"	14#	3699'	7 7/8"	250 sxs.	

29. LINER RECORD					30. TUBING RECORD		
SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN	SIZE	DEPTH SET	PACKER SET
					2 3/8"	3620'	

31. Perforation Record (Interval, size and number)	32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
	DEPTH INTERVAL	AMOUNT AND KIND MATERIAL USED
	1 3/8" jet @ 3468', 3475', 3486', 3492', 3513', 3524', 3532', 3538', 3544', 3562', 3569', 3575', 3592' and 3596'.	3468'-3592' Acidized w/3600 gals. 15% acid.
		3468'-3592' Frac w/60,000 gals. gelled brine, 60,000# 20/40 sand & 20,000# 10/20 sand.

33. PRODUCTION							
Date First Production		Production Method (Flowing, gas lift, pumping - Size and type pump)				Well Status (Prod. or Shut-in)	
6-3-74		flowing				producing	
Date of Test	Hours Tested	Choke Size	Prod'n. For Test Period	Oil - Bbl.	Gas - MCF	Water - Bbl.	Gas - Oil Ratio
6-4-74	24	18/64"		9	640	24	71,111
Flow Tubing Press.	Casing Pressure	Calculated 24-Hour Rate	Oil - Bbl.	Gas - MCF	Water - Bbl.	Oil Gravity - API (Corr.)	
95#	175#		9	640	24	340	

34. Disposition of Gas (Sold, used for fuel, vented, etc.)	Test Witnessed By
Vented	A. E. Kenyon

35. List of Attachments
Logs, Deviation survey

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>Marlene D. Jones</u>	TITLE <u>Production Clerk</u>	DATE <u>6-4-74</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	1205'	T. Canyon	T. Ojo Alamo	T. Penn. "B"
T. Salt	1300'	T. Strawn	T. Kirtland-Fruitland	T. Penn. "C"
B. Salt	2724'	T. Atoka	T. Pictured Cliffs	T. Penn. "D"
T. Yates	2882'	T. Miss	T. Cliff House	T. Leadville
T. 7 Rivers	3141'	T. Devonian	T. Menefee	T. Madison
T. Queen	3528'	T. Silurian	T. Point Lookout	T. Elbert
Penrose	3649'	T. Montoya	T. Mancos	T. McCracken
T. Grayburg		T. Simpson	T. Gallup	T. Ignacio Qtzte
T. San Andres		T. McKee	Base Greenhorn	T. Granite
T. Glorieta		T. Ellenburger	T. Dakota	T.
T. Paddock		T. Gr. Wash	T. Morrison	T.
T. Blinebry		T. Granite	T. Todilto	T.
T. Tubb		T. Delaware Sand	T. Entrada	T.
T. Drinkard		T. Bone Springs	T. Wingate	T.
T. Abo		T.	T. Chinle	T.
T. Wolfcamp		T.	T. Permian	T.
T. Penn.		T.	T. Penn. "A"	T.
T. Cisco (Bough C)		T.		T.

## FORMATION RECORD (Attach additional sheets if necessary)

From	To	Thickness in Feet	Formation	From	To	Thickness in Feet	Formation
0	1205	1205	Redbeds				
1205	1300	95	Anhydrite, Salt				
1300	2724	1424	Salt				
2724	2882	158	Sand, shale & dolomite				
2882	3141	259	Sand, shale & dolomite				
3141	3528	387	sand, shale & dolomite				
3528	3649	121	sand, shale & dolomite				
3649	3700	51	sand, shale & dolomite				

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	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  
John H. Hendrix  
Address  
403 Wall Towers West, Midland, Texas 79701  
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

Lease Name State JJ	Well No. 3	Pool Name, Including Formation Langlie-Mattix (Seven Rivers & Queen)	Kind of Lease State, Federal or Fee State	Lease No. B-1167
Location Unit Letter 0 ; 660 Feet From The South Line and 1980 Feet From The East Line of Section 13 Township 23-S Range 36-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"/> The Permian Corporation	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1183, Houston, Texas 77001			
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) Bartlesville, Oklahoma 74004			
If well produces oil or liquids, give location of tanks. Unit I Sec. 13 Twp. 23-S Rge. 36-E	Is gas actually connected? Yes	When unknown		

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 <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 5-4-74	Date Compl. Ready to Prod. 6-3-74	Total Depth 3700'	P.B.T.D.					
Elevations (DF, RKB, RT, GR, etc.) 3359.1' GL	Name of Producing Formation Seven Rivers & Queen	Top Oil/Gas Pay 3468'	Tubing Depth 3620'					
Perforations 3468'-3596'	Depth Casing Shoe							
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
11"	8 5/8"	387'	275					
7 7/8"	5 1/2"	3699'	250					
	2 3/8"	3620'	surface					

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 6-3-74	Date of Test 6-4-74	Producing Method (Flow, pump, gas lift, etc.) flowing	
Length of Test 24 hrs.	Tubing Pressure 95#	Casing Pressure 175#	Choke Size 18/64"
Actual Prod. During Test 33	Oil - Bbls. 9	Water - Bbls. 24	Gas - MCF 640

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.

Murleene A. Jones  
(Signature)  
Production Clerk  
(Title)  
6-4-74  
(Date)

OIL CONSERVATION COMMISSION

APPROVED \_\_\_\_\_, 19\_\_\_\_  
BY Supervisor  
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 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