SA TA FE FI E 7 G.S. UND OFFICE TRANSPORTER OIL GAS OPERATOR	REQUE	EST FOR ALLOWABLE AND TRANSPORT OIL AND		Form C-104 Supersedes Old C-104 and C Effective 1-1-65
1. PRORATION OFFICE				
JOHN YURONKA				
120 - C Cent Reason(s) for filing (Check proper	ral Building, Midland, Te			
New Well	Change in Transporter of:	Other (Please	explain)	······································
Recompletion X Change in Ownership		y Gas		
If change of ownership give nan and address of previous owner				
I. DESCRIPTION OF WELL AN				
Lease Name	Well No. Pool Name, Including	g Formation	Kind of Lease	
ARES STATE	3 JALMAT - SE	VEN RIVERS	State, F odoral er Foc	Lease No. B-1431
· · ·	30 Feet From The North	Line and 2310		· · · · · · · · · · · · · · · · · · ·
Line of Section 16	Township 23S Range	2/12	_ Feet From TheEs	ist
DESIGNATION OF TRANSPO		·····	Lea	County
Name of Authorized Transporter of		GAS Address (Give address to	which approved conv a	f this form is to be an it.
Scurlock Oil Compa Name of Authorized Transporter of		1		
		1216 Vaughn Address (Give address to	which approved copy c	P:his form is to be sent)
El Paso Natural Ga If well produces oil or liquids, give location of tanks,	Unit Sec. Twp. Ege.	600 Bldg o Is gas actually connected	f-Southwest,-M	idland, Texas
L	A 16 23S 36E with that from any other lease or poo		l	
COMPLETION DATA			iumber:	
Designate Type of Comple	etion - (X)	New Well Workover	Deepen Plug Bac	k Same Res'v. Diff. Res'v
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
Workover Elevations (DF, RKB, RT, GR, etc.	8-31-75 J Name of Producing Formation			
3492' DF	Seven Rivers		Tubing D	epth
Perforations		3336'	Depth Ca	33901
3330, 3310.	and 3380' W/1SPF			3823'
HOLE SIZE	CASING & TUBING SIZE	D CEMENTING RECORD		
12-1/4"	8-5/8"	424'		SACKS CEMENT
7- 7/8"	4- 1/2"	3793		
	2 "	3390		
TEST DATA AND REQUEST	FOR ALLOWABLE (Test must be	after recovery of total volume	of load oil and must be	
OIL WELL Date First New Oil Run To Tanks	able for this d	cont of be jor just 24 hours		equal to or exceed top allow-
8-31-75	9-2-75	Producing Method (Flow, p	ump, gas lift, etc.)	
Length of Teet	Tubing Pressure	Casing Pressure	Choke Siz	•
24 hrs				2 "
Actual Prod. During Test 120.59	OII-Bbis.	Water-Bbis.	Gas-MCF	
	72.08	48.51		26
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	•
CERTIFICATE OF COMPLIAN	ICE		SERVATION CO	MMISSION
Commission have been complied	regulations of the Oil Conservation with and that the information given e best of my knowledge and belief.	APPROVED	w. Rune	, 19
A		TITLE	Geologian	
	Q		filed in compliance w	with RULE 1104.
furn ferro	Mbor	If this is a request	for allowable for a n	benease to believe
Authorized Agent		well, this form must be tests taken on the well	accompanied by a ta in accordance with	bulation of the deviation RULE 111.
(Ti	izle)	11	form must be filled	out completely for allow-
September 29, 197				I for changes of owner
	ate)	Fill out only Sectively well name or number, or	ons I, II, III, and V transporten or other s	I for changes of own uch change of condition

COPIES RECEIVED	ו	Form C-103
TRIBUTION	4	Supersedes Old
	4	C-102 and C-103
	NEW MEXICO OIL CONSERVATION COMMISSION	Effective 1-1-65
FiLE	-	5a. Indicate Type of Lease
U.S.G.S.		
LAND OFFICE		State X Fee
OPERATOR		5. State Oil & Gas Lease No.
		B-1431
(DO NOT USE THIS FORM FOR PR	RY NOTICES AND REPORTS ON WELLS OPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. TION FOR PERMIT	
1.		7. Unit Agreement Name
	OTHER-	
2. Name of Operator		8, Farm or Lease Name
John Yuronka		Ares State
3. Address of Operator		9. Well No.
120-C Central B	Building, Midland, Texas 79701	3
4. Location of Well		10. Field and Pool, or Wildcar
UNIT LETTER B 3	30 FEET FROM THE North LINE AND 2310 FEET FROM	Jalmat Cortun
East	16 TOWNSHIP 23-S RANGE 36-E NMPM.	
	15. Elevation (Show whether DF, RT, GR, etc.)	12. County
(/////////////////////////////////////	3492' DF	Lea
16. Check	Appropriate Box To Indicate Nature of Notice, Report or Otl	ner Data
		REPORT OF:
		_
PERFORM REMEDIAL WORK	PLUG AND ABANDON REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON	COMMENCE DRILLING OPNS.	PLUG AND ABANDONMENT
PULL OR ALTER CASING	CHANGE PLANS CASING TEST AND CEMENT JOB	
	OTHER	
OTHER	[_]	
	perations (Clearly state all pertinent details, and give pertinent dates, including	estimated date of starting any proposed
work) SEE RULE 1103.	perations forcarry state are pertinent actains, and give pertinent actes, including	estimated date of starting any proposed

Pulled rods, pump and tubing. Set Bridge Plug @ 3600' w/wire line. Perforated 3336', 3378' and 3380' w/l SPF. Reran tubing and set RTTS @ 3294'. Treat w/l,000 gals. MCA acid. Breakdown pressure: 1600#. Treat @ 800# w/rate of 1-1/2 BPM. Swabbed w/show of oil and gas. Pulled tubing and RTTS. Set tubing @ 3390'. Reran rods and pump. Work performed 8/28-8/30/75.

> Well shut-in before Workover. Test After: 72BOPD, 70BWPD, and 22MCFPD

18. I hereby certify that the info	rmation above is true and co	mplete to the best of my knowledge and belief.	,, _,
SIGNED John UL	nontra	Authorized Agent	DATE <u>9-22-75</u>
		* 乾礼之	· · · ·
APPROVED BY		TITLE	DATE

CONDITIONS	OF	APPROVAL, IF ANY	1
CONDITIONS	Ur.	Which with which the state of t	•

	NEW MEXICO OIL CONSERVATION COMM	Form C-103 Supersedes Old C-102 and C-103 ISSION Effective 1-1-65
U.S.G.S.		5a. Indicate Type of Lease
LAND OFFICE		State 👗 🛛 Fee
OPERATOR		5. State Oil & Gas Lease No.
		B-1431
(DO NOT USE THIS FORM FOR PRO-	Y NOTICES AND REPORTS ON WELLS POSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT I ON FOR PERMIT	RESERVOIR.
1. OIL GAS WELL WELL	OTHER-	7. Unit Agreement Name
2. Name of Operator		8. Farm or Lease Name
JOHN YURONKA		Ares State
3. Address of Operator		9. Well No.
120-C Central Buildi	ng, Midland, Texas 79701	3
4. Location of Well		10. Field and Pool, or Wildcat
В	330 FEET FROM THE North LINE AND 231	0 FEET FROM Langlie Mattix
	16 23-S RANGE	ΔΙΙΙΙΙΙΙΙΙΙΙΙΙΙΙΙΙΙΙΙ
	15. Elevation (Show whether DF, RT, GR, etc.)	12. County
ΔΙΙΙΙΙΙΙΙΙΙΙΙΙΙΙΙΙ	3492' DF	Lea AllIIIII
^{16.} Check	Appropriate Box To Indicate Nature of Notice	. Report or Other Data
	ITENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK X	PLUG AND ABANDON REMEDIAL WORK	
PULL OR ALTER CASING	CHANGE PLANS CASING TEST AND C	
OTHER	OTHER	and deter including estimated date of starting any proposed

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starti work) SEE RULE 1103.

The following is the proposed remedial work:

Pull rods, pump and tubing
Set Bridge Plug @ approx. 3600'.
Perf. 3336', 3378 and 3380' w/1SPF.

4. Treat w/1,000 gals. MCA acid

5. Test

Well is presently shut-in

18. I hereby certify that the information above is true and comple	te to the best of my knowledge and belief.	·
STENED John Guronka	TITLE Authorized Agent	DATE 8-4-75
2.948	1 - 1	<u>.</u>
APPROVED BY	TITLE	DATE

CONDITIONS	OF	APPROVAL.	١F	ANYS
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