

1.

Operator		MARTINDALE PETROLEUM CORPORATION	
Address		P. O. BOX 1955, HOBBS, NM 88240	
Reason(s) for filing (Check proper box)		Other (Please explain)	
New Well	<input checked="" type="checkbox"/>	Change in Transporter of:	Casinghead Gas MUST NOT BE FLARED AFTER <u>12/29</u> UNLESS AN EXCEPTION TO R-4070 IS OBTAINED
Recompletion	<input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>	
Change in Ownership	<input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	

If change of ownership give name
and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

DESCRIPTION OF WELL AND LEASE				
Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease State, Federal or Fee	Lease No.
Little "V"	3	Drinkard	Fee	
Location				
Unit Letter <u>0</u> : <u>380</u> Feet From The <u>South</u> Line and <u>2310</u> Feet From The <u>East</u>				
Line of Section <u>7</u>	Township <u>22S</u>	Range <u>37E</u>	, NMPM, <u>Lea</u>	County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

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)	
Navajo Crude Oil Purchasing				Box 175, Artesia, NM 88210	
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)	
Getty Oil Company				Box 3000, Attn: Don M. Farley, Gasoline Plant Accounting Dept., Tulsa, OK 74102	
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected? When
	N	7	22S	37E	no as soon as possible

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

IV. COMPLETION DATA

COMPLETION DATA									
Designate Type of Completion -- (X)		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Restv.	Diff. Restv.
Date Spudded 5/31/79		Date Compl. Ready to Prod. 7/02/79		Total Depth 6744'			P.B.T.D. 6724'		
Elevations (DF, R&B, RT, GR, etc.) 3424.5GL		Name of Producing Formation Drinkard		Top Oil/Gas Pay 6397'			Tubing Depth 6701.16'		
Perforations 2 shots/ft. 34 holes. 6473', 6479', 6499', 6516', 6531', 6535', 6538', 6547', 6551', 6556', 6567', 6574', 6590, 6611', 6631', 6646', & 6653'							Depth Casing Shoe		
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT				
12 1/4"	8-5/8" 23#/ft. new K-55		1060'		34000x "C" w/2% lvs dense, 2% CaCl ₂ + 5#/sk salt + 1#/sk floccs + 20000x "C" w/2% CaCl ₂ + 1#/sk floccs. Circ. 1500x to surface.				
7-7/8"	5 1/2" 17#/ft. new K-55		6756'		13000x Halcos lite + 8#/sk floccs + 52000x "C"				

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

OIL WELL		Producing Method (Flow, pump, gas lift, etc.)	
Date First New Oil Run To Tanks 7/02/79	Date of Test 7/02/79	Flow	
Length of Test 24 hrs.	Tubing Pressure 100#	Casing Pressure	Choke Size 1 1/2"
Actual Prod. During Test 104.19BTF	Oil - Bbls. 100.69	Water - Bbls. 3.5BBL	Gas - MCF 200

GAS HELL

GAS WELL			
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, 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.

Victor A. Induskey
(Signature)

Agent

(File)

7/03/79

(Page)

OIL CONSERVATION COMMISSION

APPROVED 101 1/2 1913, 19

BY John J. [Signature]
TITLE SUPERVISOR DISTRICT 1

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 walls.

Fill out only Sections I, II, III, and VI for changes of owner, name, address, or number, or transporter, or other such change of condition.

Separate Form C-104 must be filed for each pool in multiple completed wells.