

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE\*

(See instructions on reverse side)

Form approved,  
Budget Bureau No. 42-R355.5.

## WELL COMPLETION OR RECOMPLETION REPORT AND LOG \*

1a. TYPE OF WELL:		OIL WELL <input checked="" type="checkbox"/>	GAS WELL <input type="checkbox"/>	DRY <input type="checkbox"/>	Other <input type="checkbox"/>		
b. TYPE OF COMPLETION:		NEW WELL <input checked="" type="checkbox"/>	WORK OVER <input type="checkbox"/>	DEEP-EN <input type="checkbox"/>	PLUG BACK <input type="checkbox"/>	DIFF. RESER. <input type="checkbox"/>	Other <input type="checkbox"/>
2. NAME OF OPERATOR HNG Oil Company						5. LEASE DESIGNATION AND SERIAL NO. NM 18644	
3. ADDRESS OF OPERATOR P. O. Box 2267, Midland, Texas 79702						6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements) At surface 660' FWL & 1980' FSL of Sec. 9 At top prod. interval reported below Same At total depth Same						7. UNIT AGREEMENT NAME	
14. PERMIT NO.						DATE ISSUED 2-20-79	
15. DATE SPUDDED 4-4-79						16. DATE T.D. REACHED 4-11-79	
17. DATE COMPL. (Ready to prod.) 5-7-79						18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 2968' GR	
19. ELEV. CASINGHEAD 2968'						20. FIELD AND POOL, OR WILDCAT Und. Comanche Stateline Yates	
21. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA Sec. 9, T26S, R36E						22. COUNTY OR PARISH Lea	
23. STATE NM						24. WAS DIRECTIONAL SURVEY MADE No	
25. TYPE ELECTRIC AND OTHER LOGS RUN Sonic						26. WAS WELL CORED No	
28. CASING RECORD (Report all strings set in well)							
CASING SIZE		WEIGHT, LB./FT.		DEPTH SET (MD)		HOLE SIZE	
8-5/8"		23#		1465'		12-1/4"	
5-1/2"		15.5 & 17#		3730'		7-7/8"	
29. LINER RECORD							
SIZE		TOP (MD)		BOTTOM (MD)		SACKS CEMENT*	
30. TUBING RECORD							
SIZE		DEPTH SET (MD)		PACKER SET (MD)			
2-3/8"		3359'		3321'			
31. PERFORATION RECORD (Interval, size and number)							
3360-3388		(.48" 8)		3360-3559		Frac w/68,000 gals. 50% CO <sub>2</sub>	
3501-3518		(.48" 5)				50,000# 20-40 sd., 68,000#	
3520-3559		(.48" 4)				10-20 sd.	
3639-3673		(.40" 9)		3639-3673		Acidize w/1800 gals 15% MCA	
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.							
DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED					
33. PRODUCTION							
DATE FIRST PRODUCTION 6-13-79		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Pumping				WELL STATUS (Producing or shut-in) Producing	
DATE OF TEST 6-14-79		HOURS TESTED 24		CHOKE SIZE -		PROD'N. FOR TEST PERIOD →	
FLOW, TUBING PRESS.		CASING PRESSURE		CALCULATED 24-HOUR RATE →		OIL GRAVITY-API (CORR.) 31.0	
-		Packer		-		-	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Vented						TEST WITNESSED BY	
35. LIST OF ATTACHMENTS Sonic Log and C-104							
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records							
SIGNED Betty A. Gildon		TITLE Regulatory Clerk				DATE June 15, 1979	

\*(See Instructions and Spaces for Additional Data on Reverse Side)

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.

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

Operator HNG Oil Company		
Address P. O. Box 2267, Midland, Texas 79702		
Reason(s) for filing (Check proper box)		Other (Please explain)
New Well <input checked="" type="checkbox"/>	Change in Transporter of: Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	CASINGHEAD GAS MUST NOT FLARED AFTER 8/13/79 UNLESS AN EXCEPTION TO R-4070 IS OBTAINED.
Recompletion <input type="checkbox"/>		
Change in Ownership <input type="checkbox"/>		
THIS WELL HAS BEEN PLACED IN THE <del>PROD</del> DESIGNATED BELOW. IF YOU DO NOT CONCUR NOTIFY THIS OFFICE.		
If change of ownership give name and address of previous owner		

II. DESCRIPTION OF WELL AND LEASE

Lease Name Wilson 9 Federal	Well No. 1	Pool Name, Including Formation Und. Comanche State Line Yates	Kind of Lease State, Federal or Fee Federal	Lease No. NM 18644
Location Unit Letter L ; 660 Feet From The West Line and 1980 Feet From The South Line of Section 9 Township 26S Range 36E, 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"/> Basin, Inc.	Address (Give address to which approved copy of this form is to be sent) P. O. Box 2297, Midland, Texas 79702					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> El Paso Natural Gas Co.	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1492, El Paso, Texas 79978					
If well produces oil or liquids, give location of tanks.	Unit L	Sec. 9	Twp. 26S	Rge. 36E	Is gas actually connected? No	When

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 4-4-79	Date Compl. Ready to Prod. 5-7-79		Total Depth 3730'		P.B.T.D. 3695'			
Elevations (DF, RKB, RT, GR, etc.) 2968' GR	Name of Producing Formation Yates		Top Oil/Gas Pay 3360		Tubing Depth 3359			
Perforations 3360-3388, 3501-3518, 3520-3559, 3639-3673					Depth Casing Shoe 3730'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12-1/4"	8-5/8"		1465'		1150			
7-7/8"	5-1/2"		3730'		450			
	2-3/8"		3359'					

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 6-13-79	Date of Test 6-14-79	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24 hours	Tubing Pressure -	Casing Pressure Packer	Choke Size -
Actual Prod. During Test 198 barrels	Oil-Bbls. 198	Water-Bbls. 18	Gas-MCF 58

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.

Betty A. Gildon  
(Signature)  
Regulatory Clerk

(Title)

June 15, 1979

(Date)

OIL CONSERVATION COMMISSION

APPROVED JUN 20 1979  
BY  
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 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.

SECRET

JUN 19 1979

ALL INFORMATION CONTAINED  
HEREIN IS UNCLASSIFIED

<b>INCLINATION REPORT</b> (One Copy Must Be Filed With Each Completion Report.)		6. District Hobbs
1. FIELD NAME Comanche Stateline Yates	2. LEASE NAME Wilson 9 Federal	7. Lease Number. (Oil completions only) NM 18644
3. OPERATOR HNG Oil Company		8. Well Number 1
4. ADDRESS P. O. Box 2267, Midland, Texas 79702		9. Identification Number (Gas completions only)
5. LOCATION (Section, Block, and Survey) Unit Letter L, Sec. 9, T26S, R36E		10. County Lea

### RECORD OF INCLINATION

*11. Measured Depth (feet)	12. Course Length (Hundreds of feet)	*13. Angle of Inclination (Degrees)	14. Displacement per Hundred Feet (Sine of Angle X100)	15. Course Displacement (feet)	16. Accumulative Displacement (feet)
349	394	1/4	.44	1.54	1.54
768	419	3/4	1.31	5.49	7.03
1045	277	1/2	.87	2.41	9.44
1465	420	1	1.75	7.35	16.79
1773	308	1/2	.87	2.68	19.47
2238	465	3-1/2	6.10	28.37	47.84
2425	187	3-1/2	6.10	11.41	59.25
2643	218	4-1/2	7.85	17.11	76.36
3233	590	1-3/4	3.05	18.00	94.36
3440	207	1-3/4	3.05	6.31	100.67
3730	290	1-3/4	3.05	8.85	109.52

If additional space is needed, use the reverse side of this form.

17. Is any information shown on the reverse side of this form? ☐ yes ☒ no
18. Accumulative total displacement of well bore at total depth of 3730 feet = 109.52 feet.
- \*19. Inclination measurements were made in - ☐ Tubing ☐ Casing ☐ Open hole ☒ Drill Pipe
20. Distance from surface location of well to the nearest lease line 660 feet.
21. Minimum distance to lease line as prescribed by field rules 330 feet.
22. Was the subject well at any time intentionally deviated from the vertical in any manner whatsoever? No
- (If the answer to the above question is "yes", attach written explanation of the circumstances.)

<b>INCLINATION DATA CERTIFICATION</b>  <div style="border-bottom: 1px solid black; margin-bottom: 5px;"> </div> Signature of Authorized Representative Thomas C. Brown Name of Person and Title (type or print) Tom Brown, Inc. Name of Company Telephone: _____ Area Code _____	<b>OPERATOR CERTIFICATION</b>  <div style="border-bottom: 1px solid black; margin-bottom: 5px;"> </div> Signature of Authorized Representative Betty A. Gildon, Regulatory Clerk Name of Person and Title (type or print) HNG Oil Company Operator Telephone: <u>915</u> <u>683-4871</u> Area Code _____
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Subscribed and Sworn to before me on this 15 day of June 1979

Notary Public in and for Midland County, Texas