

Submit 3 Copies  
to Appropriate  
District Office

State of New Mexico  
Energy, Minerals and Natural Resources  
Department

Form C-103  
Revised 1-1-89

**DISTRICT I**  
P.O. Box 1980, Hobbs, NM 88240  
**DISTRICT II**  
P.O. Drawer DD, Artesia, NM 88210  
**DISTRICT III**  
1000 Rio Brazos Rd., Aztec, NM 87410

**OIL CONSERVATION DIVISION**

P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

WELL API NO. 30-025-32258
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name Sharp
8. Well No. 1
9. Pool name or Wildcat Cline Tubb Lower Paddock/Blincbry
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3297 GR

SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)	
1. Type of Well: OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER	
2. Name of Operator SAMEDAN OIL CORPORATION	
3. Address of Operator 12600 Northborough, #250, Houston, Tx 77067	
4. Well Location Unit Letter F : 1980 Feet From The North Line and 1980 Feet From The West Line Section 12 Township 23-S Range 37-E NMPM Lea County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3297 GR	

Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐  
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐  
PULL OR ALTER CASING ☐  
OTHER ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐  
CASING TEST AND CEMENT JOB ☐  
OTHER ☒ Commingling

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

02/24/95 POH and laid down 5 1/2" LOK-SET Packer and 2 3/8" tbg.

02/25/95 Tag fill @ 6170. Clean out to 6230.

02/26/95 Run 2 3/8" 4.7# J-55 Tbg. Set @ 6200'. Run rods and pump and put well on production.

Commingling Permit # DHC-1059

See attached C-116 for percentages.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Judy Throneberry TITLE DIVISION PRODUCTION CLERK DATE 03/27/1995  
TYPE OR PRINT NAME Judy Throneberry TELEPHONE NO. (713)876-6150  
(This space for State Use) **ORIGINAL SIGNATURE OF DISTRICT SUPERVISOR** **DISTRICT I SUPERVISOR** TITLE DATE MAR 31 1995  
APPROVED BY DISTRICT I SUPERVISOR TITLE DATE  
CONDITIONS OF APPROVAL, IF ANY:

Submit 2 copies to Appropriate District Office.  
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Santa Fe, New Mexico 87504-2088

Form C-116  
Revised 1/1/89

**GAS - OIL RATIO TEST**

Operator		Samedan Oil Corporation (020153)		Pool		12440 Cline Tubb (Assoc)		County		Lea						
Address		12600 Northborough, #250, Houston, Tx 77067		TYPE OF TEST - (X)		12411 Cline Lower Paddock/Blinebry		Completion		Special <input checked="" type="checkbox"/>						
LEASE NAME	WELL NO.	LOCATION				DATE OF TEST	SIZES	CHOKESIZE	TBG. PRESS.	DAILY ALLOW. ABLE	LENGTH OF TEST HOURS	PROD. DURING TEST				GAS - OIL RATIO CU/FT/BDL
		U	S	T	R							WATER BBL'S	GRAV. OIL	OL BBL'S	GAS MCF	
013179 - Sharp	1	F	12	23S	37E	03/16/95	P				24	28	40.1	33	154	4667
ORDER DHC-1059																

  

OIL PERCENTAGES		Tubh (Assoc)		50% - 16.5 bbl's	
		Lwr Pdk/B1by		50% - 16.5 bbl's	
TOTAL		100%		38 bbl's (Total from both zones)	
GAS PERCENTAGES		Tubh (Assoc)		57% - 88 mcf	
		Lwr Pdk/B1by		43% - 66 mcf	
TOTAL		100%		154 MCF (Total from both zones)	

**Instructions:**

During gas-oil ratio test, each well shall be produced at a rate not exceeding the top unit allowable for the pool in which well is located by more than 25 percent. Operator is encouraged to take advantage of this 25 percent tolerance in order that well can be assigned increased allowables when authorized by the Division.

Gas volumes must be reported in MCF measured at a pressure base of 15.025 psia and a temperature of 60° F. Specific gravity base will be 0.60.

Report casing pressure in lieu of tubing pressure for any well producing through casing.

(See Rule 301, Rule 1116 & appropriate pool rules.)

I hereby certify that the above information is true and complete to the best of my knowledge and belief.

Signature *Judy Throneberry*

Printed name and title Judy Throneberry, Div Prod Clerk

Date 03/27/95 (713) 876-6150

Telephone No.