

District I
PO Box 1960, Hobbs, NM 88241-1960
District II
PO Drawer DD, Artesia, NM 88211-0719
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
PO Box 2088, Santa Fe, NM 87504-2088

State of New Mexico
Energy, Minerals & Natural Resources Department

OIL CONSERVATION DIVISION
PO Box 2088
Santa Fe, NM 87504-2088

Form C-104
Revised February 10, 1994
Instructions on back
Submit to Appropriate District Office
5 Copies

☐ AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

Operator name and Address McDonnold Operating, Inc. 505 N. Big Spring, Suite 204 Midland, TX 79701		OGRID Number 014372
		Reason for Filing Code CH & CO
API Number 30-025-11156	Pool Name Langlie Mattix Seven Rivers Queen Grayburg	Pool Code 37240
Property Code 010021 14965	Property Name Langlie Jack Unit	Well Number 9

II. Surface Location

UL or lot no. H	Section 20	Township 24S	Range 37E	Lot Ida	Feet from the 1980	North/South Line North	Feet from the 660	East/West line East	County Lea
--------------------	---------------	-----------------	--------------	---------	-----------------------	---------------------------	----------------------	------------------------	---------------

Bottom Hole Location

UL or lot no. H	Section 20	Township 24S	Range 37E	Lot Ida	Feet from the 1980	North/South line North	Feet from the 660	East/West line East	County Lea
Lee Code	Producing Method Code P	Gas Connection Date	C-129 Permit Number	C-129 Effective Date	C-129 Expiration Date				

III. Oil and Gas Transporters

Transporter OGRID	Transporter Name and Address	POD	O/G	POD ULSTR Location and Description
020809	Sid Richardson Gasoline Co. 201 Main-1st City Bank Tower Ft. Worth, TX 76102	2252230	G	G 20 24S 37E Lea County
007440	EOTT Energy Corp. P.O. Box 4666 Houston, TX 77210-4666	2252210	O	G 20 24S 37E Lea County

IV. Produced Water

POD 2252250	POD ULSTR Location and Description G 20 24S 37E Lea County
----------------	---

V. Well Completion Data

Spud Date	Ready Date	TD	PSTD	Perforations
Hole Size	Casing & Tubing Size	Depth Set	Sacks Cement	

VI. Well Test Data

Date New Oil	Gas Delivery Date	Test Date	Test Length	Tbg. Pressure	Csg. Pressure
Choke Size	Oil	Water	Gas	AOF	Test Method

I hereby certify that the rules of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Signature: *Craig M. McDonnold*
Printed name: Craig M. McDonnold
Title: President
Date: 4/14/94 Phone: (915) 682-6396

OIL CONSERVATION DIVISION

Approved by: ORIGINAL SIGNED BY JERRY DEXTON
Title: DISTRICT I SUPERVISOR
Approval Date: APR 22 1994

If this is a change of operator fill in the OGRID number and name of the previous operator

020311 Santa Fe Exploration Company

Previous Operator Signature

Richard C. Gilliland

Printed Name

Richard C. Gilliland Petroleum Engineer

Title

Date

4/12/94

RECEIVED

APR 21 1994

COMMUNITY
OFFICE

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

OIL CONSERVATION DIVISION

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

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.

Operator Santa Fe Exploration Company	Well API No. 30-025-11156
Address P. O. Box 1136, Roswell, New Mexico 88202-1136	
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)	
New Well <input type="checkbox"/>	Change in Transporter of: <input type="checkbox"/>
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Operator <input type="checkbox"/>	Casinghead Gas <input checked="" type="checkbox"/> Condensate <input type="checkbox"/>
Effective 11-1-91	
If change of operator give name and address of previous operator	

II. DESCRIPTION OF WELL AND LEASE

Lease Name Langlie-Jack Unit	Well No. 9	Pool Name, Including Formation Langlie Mattix 7 Rvrs Queen	Kind of Lease <input checked="" type="checkbox"/> State, <input type="checkbox"/> Federal, <input type="checkbox"/> Mex	Lease No. 8910089100
Location				
Unit Letter H	: 1980	Feet From The North	Line and 660	Feet From The East
Section 20	Township 24S	Range 37E	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"/>	Address (Give address to which approved copy of this form is to be sent)			
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)			
Sid Richardson Carbon & Gasoline Co.	1st City Bank Tower, 201 Main, Ft. Worth, TX			
If well produces oil or liquids, give location of tanks.	Unit G	Sec. 20	Twp. 24S	Rge. 37E
Is gas actually connected?	When ?		76102	
Yes	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	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded	Date Compl. Ready to Prod.		Total Depth			P.B.T.D.		
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay			Tubing Depth		
Perforations						Depth Casing Shoe		
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET			SACKS CEMENT		

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.)

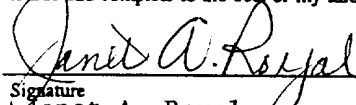
Date First New Oil Run To Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas- MCF

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. OPERATOR CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.



Signature
Janet A. Royal
Printed Name
10/30/91
Date
Title
(505) 623-2733
Telephone No.

OIL CONSERVATION DIVISION

Date Approved **NOV 04 1991**

Signed by,
By **Paul Kautz**
Geologist

Title

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.

Submit 5 Copies
Appropriate District Office
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

State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

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

Form C-104
Revised 1-1-89
See Instructions
at Bottom of Page

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

I. Operator Santa Fe Exploration Company		Well API No. 30-025-11156
Address P. O. Box 1136, Roswell, New Mexico 88202-1136		
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)		
New Well <input type="checkbox"/>	Change in Transporter of: Oil <input checked="" type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	Effective 4-1-90
Recompletion <input type="checkbox"/>		
Change in Operator <input type="checkbox"/>		
If change of operator give name and address of previous operator		

II. DESCRIPTION OF WELL AND LEASE

Lease Name Langlie-Jack Unit	Well No. 9	Pool Name, Including Formation Langlie Mattix 7 Rvrs Queen	Kind of Lease <input checked="" type="checkbox"/> Federal or <input type="checkbox"/> Private	Lease No. 8910089100
Location Unit Letter <u>H</u> : <u>1980</u> Feet From The <u>North</u> Line and <u>660</u> Feet From The <u>East</u> Line Section <u>20</u> Township <u>24S</u> Range <u>37E</u> , 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"/> Navajo Refining Company	Address (Give address to which approved copy of this form is to be sent) P. O. Drawer 159, Artesia, NM 88210	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> <u>Ed Paso Natl. Gas</u>	Address (Give address to which approved copy of this form is to be sent)	
If well produces oil or liquids, give location of tanks.	Unit <u>G</u>	Sec. <u>20</u> Twp. <u>24S</u> Rge. <u>37E</u>
Is gas actually connected?		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	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
Perforations					Depth Casing Shoe			

TUBING, CASING AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

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 Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

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. OPERATOR CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Lorraine R. Schmitt
Signature
Lorraine R. Schmitt, Production Analyst
Printed Name
3-13-90
Date
505/623-2733
Telephone No.

OIL CONSERVATION DIVISION

Date Approved MAR 16 1990

By ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

Title _____

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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TRANSPORTER	OIL	
	GAS	
OPERATOR		
PROMOTION OFFICE		

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-01-78
Format 06-01-83
Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator Santa Fe Exploration Company

Address P. O. Box 1136, Roswell, NM 88202-1136

Reason(s) for filing (Check proper box)

<input type="checkbox"/> New Well	Change in Transporter of:	<input type="checkbox"/> Dry Gas
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Oil	<input type="checkbox"/> Condensate
<input checked="" type="checkbox"/> Change in Ownership	<input type="checkbox"/> Casinghead Gas	

Other (Please explain) Effective 12-1-86

If change of ownership give name and address of previous owner Conoco, Inc., P. O. Box 460, Hobbs, NM 88240

II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>Langlie Jack Unit</u>	Well No. <u>9</u>	Pool Name, including Formation <u>Langlie Mattix 7 Rvrs Queen</u>	Kind of Lease State, Federal or Fee <u>Federal</u>	Lease No. <u>8910089100</u>
Location				
Unit Letter <u>H</u> ; <u>1980</u> Feet From The <u>North</u> Line and <u>660</u> Feet From The <u>East</u>				
Line of Section <u>20</u> Township <u>24S</u> Range <u>37E</u> , NMPM, <u>Lea</u> 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"/> <u>Conoco, Inc. J. N. M. Pipelines</u>	Address (Give address to which approved copy of this form is to be sent) <u>P. O. Box 1267, Ponca City, OK 74603</u>			
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> <u>El Paso Natural Gas Company</u>	Address (Give address to which approved copy of this form is to be sent) <u>P. O. Box 1492, El Paso, TX 79978</u>			
If well produces oil or liquids, give location of tanks.	Unit <u>G</u>	Sec. <u>20</u>	Twp. <u>24S</u>	Rge. <u>37E</u>
	Is gas actually connected?		When	
	<u>Yes</u>			

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

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.

Benjamin D. Schmitt
(Signature)
Production Clerk
(Title)
January 29, 1987
(Date)

OIL CONSERVATION DIVISION

APPROVED FEB 11 1987, 19____
Orig. Signed by Paul Kautz
BY _____
Geologist
TITLE _____

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 deviatric 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 multiple completed wells.

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HOBBS OFFICE

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	GAS
OPERATOR	
PRORATION OFFICE	

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 Conoco Inc.	
Address P.O. Box 460, Hobbs, New Mexico 88240	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input type="checkbox"/>	Change of corporate name from Continental Oil Company effective July 1, 1979.
Recompletion <input type="checkbox"/>	
Change in Ownership <input type="checkbox"/>	
Change in Transporter of: Oil <input type="checkbox"/> Gas <input type="checkbox"/>	
Casinghead Gas <input type="checkbox"/>	
Dry 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

Lease Name Langlie Jack Unit	Well No. 9	Pool Name, Including Formation Langlie Mattix TRvrs. Queen	Kind of Lease State, Federal or Fee	Lease No. LC 032326A
Location Unit Letter <u>H</u> : <u>1980</u> Feet From The <u>N</u> Line and <u>660</u> Feet From The <u>E</u>				
Line of Section <u>20</u> Township <u>24-S</u> Range <u>37-E</u> , NMPM, <u>Lea</u> 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"/>	Address (Give address to which approved copy of this form is to be sent)
Texas-New Mexico Pipeline Co.	Box 1510, Midland, Texas
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)
El Paso Natural Gas Co.	Box 1384, Jal, N.M.
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? 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	Gas Well	New Well	Workover	Deepen	Plug Back	Same Restv.	Diff. Restv.
Date Spudded	Date Compl. Ready to Prod.	Total Depth			P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay			Tubing Depth			
Perforations					Depth Casing Shoe			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			

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)

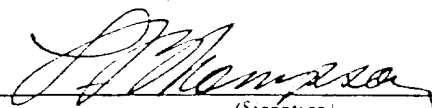
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

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


(Signature)
Division Manager
(Title)
6-12-79
(Date)

NMOCD (5)

USGSC(2) PARTNERS FILE

OIL CONSERVATION COMMISSION

APPROVED JUL 17 1979, 19
BY Larry Sipton
TITLE District Supervisor

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 completed wells.

DISTRIBUTION	
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	GAS
OPERATOR	
PRORATION OFFICE	

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 Continental Oil Company
Address Box 460, Hobbs New Mexico 88240
Reason(s) for filing (Check proper box):
New Well ☐ Change in Transporter of: Oil ☐ Dry Gas ☐
Recompletion ☐ Casinghead Gas ☐ Condensate ☐
Change in Ownership ☐ Other (Please explain) To change well name from Continental Oil Co. Jack A-20 No. 3 effective 5-1-68

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

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, including Formation	Kind of Lease	Lease No.
<u>Langlie Jack Unit</u>	<u>9</u>	<u>Langlie-Mattie</u>	<u>Federal</u>	
Location: Unit Letter <u>H</u> , <u>1980</u> Feet From The <u>North</u> Line and <u>660</u> Feet From The <u>East</u>				
Line of Section <u>20</u> Township <u>24S</u> Range <u>37E</u> , NMPM, <u>Lea</u> 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"/>	Address (Give address to which approved copy of this form is to be sent)					
<u>Leas New Mexico Pipe Line Co.</u>	<u>Box 1510, Midland, Texas 79701</u>					
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)					
<u>El Paso Natural Gas Co.</u>	<u>Box 1384, Jal, New Mexico 88252</u>					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	<u>I</u>	<u>20</u>	<u>24</u>	<u>37</u>	<u>Yes</u>	<u>NA</u>

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	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res't.	Diff. Res't.
Date Spudded	Date Compl. Ready to Prod.		Total Depth			P.B.T.D.		
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay			Tubing Depth		
Perforations						Depth Casing Shoe		
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE		CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT		

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	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

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

NMCC-5 Partners-14 File

Joe Z. Barty
(Signature)
Adm. Sec. Chief
(Title)
May 1, 1968
(Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19____
BY Joe Z. Barty
TITLE _____

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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 completed wells.

U. S. LAND OFFICE Las Cruces
SERIAL NUMBER 032326
LEASE OR PERMIT TO PROSPECT Lease

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

LOG OF OIL OR GAS WELL

LOCATE WELL CORRECTLY

Company Continental Oil Company Address Box CC - Hobbs, New Mexico
Lessor or Tract Jack A-20 Field Jal State New Mexico
Well No. 3 Sec. 20 T. 24 R. 37 Meridian N.M.P.M. County Lea
Location 1980 ft. (N) of N Line and 660 ft. (W) of E Line of Sec. 20 Elevation 3261

The information given herewith is a complete and correct record of the well and all work done thereon so far as can be determined from all available records.

Date July 25, 1938 Title Dist. Supt.

The summary on this page is for the condition of the well at above date.

Commenced drilling 5-20-38, 1938 Finished drilling 6-19-38, 1938

OIL OR GAS SANDS OR ZONES

(Denote gas by G)

(Denote gas by G)

No. 1, from <u>3360</u> to <u>3582</u>	No. 4, from _____ to _____
No. 2, from _____ to _____	No. 5, from _____ to _____
No. 3, from _____ to _____	No. 6, from _____ to _____

IMPORTANT WATER SANDS

No. 1, from _____ to _____ No. 3, from _____ to _____
No. 2, from _____ to _____ No. 4, from _____ to _____

CASING RECORD

Size casing	Weight per foot	Threads per inch	Make	Amount	Kind of shoe	Cut and pulled from	Perforated		Purpose
							From—	To—	
10 3/4"	30.5	8	Nat'l	221'3"	TP				
7 1/2"	26.40	8	J & L	1156'16"	Cement guide shoe				
5 1/2"	27	10	Nat'l	3219'0"	Cement guide shoe and float collar				
2"	4.70		Nat'l	3564'16"	Tubing set at 3564'				

MUDDING AND CEMENTING RECORD

Size casing	Where set	Number sacks of cement	Method used	Mud gravity	Amount of mud used
10 3/4"	235	225	Halliburton		
7 5/8"	1173	425	Halliburton		
5 1/2"	3210	425	Halliburton		

PLUGS AND ADAPTERS

Heaving plug—Material ----- Length ----- Depth set -----
Adapters—Material ----- Size -----

SHOOTING RECORD

[illegible]

TOOLS USED

Rotary tools were used from 0 feet to 3582 feet, and from _____ feet to _____ feet
Cable tools were used from _____ feet to _____ feet, and from _____ feet to _____ feet

DATES

July 25, 1938, 19 Put to producing July 1, 1938, 19
The production for the first 24 hours was 744 barrels of fluid of which 100% was oil; %
emulsion; % water; and % sediment. Gravity. °Bé.

If gas well, cu. ft. per 24 hours 584,000 Gallons gasoline per 1,000 cu. ft. of gas _____

Rock pressure, lbs. per sq. in. _____

EMPLOYEES

J. H. McWilliams	Driller	Cole Porter	Driller
	Driller	R. Wiser	Driller

FORMATION RECORD

FROM—	TO—	TOTAL FEET	FORMATION
0	100	100	0-100
100	200	200	100-200
200	300	300	200-300
300	400	400	300-400
400	500	500	400-500
500	600	600	500-600
600	700	700	600-700
700	800	800	700-800
800	900	900	800-900
900	1000	1000	900-1000
1000	1100	1100	1000-1100
1100	1200	1200	1100-1200
1200	1300	1300	1200-1300
1300	1400	1400	1300-1400
1400	1500	1500	1400-1500
1500	1600	1600	1500-1600
1600	1700	1700	1600-1700
1700	1800	1800	1700-1800
1800	1900	1900	1800-1900
1900	2000	2000	1900-2000
2000	2100	2100	2000-2100
2100	2200	2200	2100-2200
2200	2300	2300	2200-2300
2300	2400	2400	2300-2400
2400	2500	2500	2400-2500
2500	2600	2600	2500-2600
2600	2700	2700	2600-2700
2700	2800	2800	2700-2800
2800	2900	2900	2800-2900
2900	3000	3000	2900-3000
3000	3100	3100	3000-3100
3100	3200	3200	3100-3200
3200	3300	3300	3200-3300
3300	3400	3400	3300-3400
3400	3500	3500	3400-3500
3500	3600	3600	3500-3600
3600	3700	3700	3600-3700
3700	3800	3800	3700-3800
3800	3900	3900	3800-3900
3900	4000	4000	3900-4000
4000	4100	4100	4000-4100
4100	4200	4200	4100-4200
4200	4300	4300	4200-4300
4300	4400	4400	4300-4400
4400	4500	4500	4400-4500
4500	4600	4600	4500-4600
4600	4700	4700	4600-4700
4700	4800	4800	4700-4800
4800	4900	4900	4800-4900
4900	5000	5000	4900-5000
5000	5100	5100	5000-5100
5100	5200	5200	5100-5200
5200	5300	5300	5200-5300
5300	5400	5400	5300-5400
5400	5500	5500	5400-5500
5500	5600	5600	5500-5600
5600	5700	5700	5600-5700
5700	5800	5800	5700-5800
5800	5900	5900	5800-5900
5900	6000	6000	5900-6000
6000	6100	6100	6000-6100
6100	6200	6200	6100-6200
6200	6300	6300	6200-6300
6300	6400	6400	6300-6400
6400	6500	6500	6400-6500
6500	6600	6600	6500-6600
6600	6700	6700	6600-6700
6700	6800	6800	6700-6800
6800	6900	6900	6800-6900
6900	7000	7000	6900-7000
7000	7100	7100	7000-7100
7100	7200	7200	7100-7200
7200	7300	7300	7200-7300
7300	7400	7400	7300-7400
7400	7500	7500	7400-7500
7500	7600	7600	7500-7600
7600	7700	7700	7600-7700
7700	7800	7800	7700-7800
7800	7900	7900	7800-7900
7900	8000	8000	7900-8000
8000	8100	8100	8000-8100
8100	8200	8200	8100-8200
8200	8300	8300	8200-8300
8300	8400	8400	8300-8400
8400	8500	8500	8400-8500
8500	8600	8600	8500-8600
8600	8700	8700	8600-8700
8700	8800	8800	8700-8800
8800	8900	8900	8800-8900
8900	9000	9000	8900-9000
9000	9100	9100	9000-9100
9100	9200	9200	9100-9200
9200	9300	9300	9200-9300
9300	9400	9400	9300-9400
9400	9500	9500	9400-9500
9500	9600	9600	9500-9600
9600	9700	9700	9600-9700
9700	9800	9800	9700-9800
9800	9900	9900	9800-9900
9900	10000	10000	9900-10000

[OVER]

16-43094-3

NEW AND OLD TO GO

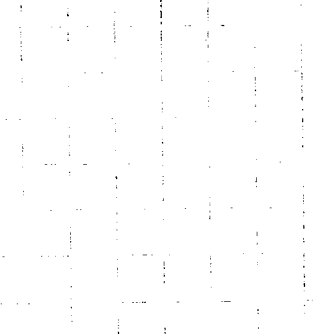


FIGURE 1. A large rectangular box with a dashed border, intended for a drawing or sketch.

[illegible]

The primary of this day is for the contribution of the world to the day.

NO 2442 00 0000 0000

IMPORTANT WATER BILLS

No. 3, from	to	No. 8, from	to
No. 2, from	to	No. 7, from	to
No. 1, from	to	No. 6, from	to

(Please pay by C)

IMPORTANCE WATER 21112

[illegible]

CASING RECORD

[illegible]

It is of the greatest importance to have a complete history of the well. Please state in detail the dates of redrilling, together with the reasons for the work and its results. If there were any changes made in the casing, state fully, and if any casing was "struck" or left in the well, give its size and location. If the well has been dynamited, give date, size, position, and number of shots. If pups or bridges were put in to test for water, state kind of material used, position, and results of pumping or bailing.

HISTORY OF OIL OR GAS WELL

[illegible]

DUPLICATE

NEW MEXICO OIL CONSERVATION COMMISSION

Santa Fe, New Mexico

RECEIVED 1952

It is necessary that Form C-104 be approved before this form can be approved and an initial allowable be assigned to any completed Oil or Gas well. Submit this form in QUADRUPPLICATE.

1952 OCT 11 11:43

CERTIFICATE OF COMPLIANCE AND AUTHORIZATION
TO TRANSPORT ~~QUANTITIES~~ NATURAL GAS

Company or Operator..... **Continental Oil Company** Lease..... **Jack A-20**

Address..... **Box 427, Hobbs, New Mexico** **Ponca City, Oklahoma**
(Local or Field Office) (Principal Place of Business)

Unit..... **H**, Well(s) No..... **9**, Sec..... **20**, T..... **24S**, R..... **37E**, Pool..... **Langlio-Wattix**

County..... **Lea** Kind of Lease:..... **Federal**

If Oil well Location of Tanks.....

Authorized Transporter..... **El Paso Natural Gas Company** Address of Transporter

..... **Jal, New Mexico** **El Paso, Texas**
(Local or Field Office) (Principal Place of Business)

Per cent of ~~Oil~~ Natural Gas to be Transported..... **100%** Other Transporters authorized to transport Oil or Natural Gas from this unit are..... **none**

REASON FOR FILING: (Please check proper box)

NEW WELL..... ☐ CHANGE IN OWNERSHIP..... ☐

CHANGE IN TRANSPORTER..... ☐ OTHER (Explain under Remarks)..... ☒

REMARKS: **(For casinghead gas)**

Required by NWCC Order No. B-520.

The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.

Executed this the..... **20th** day of..... **September** 19..... **54**

Approved..... **Continental Oil Company**, 19.....

OIL CONSERVATION COMMISSION

By.....

By..... Title..... **Dist. Supt.**

Title.....

INSTRUCTIONS

This form shall be executed and filed in QUADRUPLICATE with the District Office of the Oil Conservation Commission, covering each unit from which oil or gas is produced. A separate certificate shall be filed for each transporter authorized to transport oil or gas from a unit. After said certificate has been approved by the Oil Conservation Commission, one copy shall be forwarded to the transporter, one copy returned to the producer, and two copies retained by the Oil Conservation Commission.

A new certificate shall be filed to cover each change in operating ownership and each change in the transporter, except that in the case of a temporary change in the transporter involving less than the allowable production for one proration period, the operator shall in lieu of filing a new certificate notify the Oil Conservation Commission District Office, and the transporter authorized by certificate on file with the Commission, by letter of the estimated amount of oil or gas to be moved by the transporter temporarily moving oil or gas from the unit and the name of such temporary transporter and a copy of such notice shall also be furnished such temporary transporter. Such temporary transporter shall not move any more oil or gas than the estimated amount shown in said notice.

This certificate when properly executed and approved by the Oil Conservation Commission shall constitute a permit for pipe line connection and authorization to transport oil and gas from the property named therein and shall remain in full force and effect until

- (a) Operating ownership changes
- (a) The transporter is changed or
- (c) The permit is cancelled by the Commission.

If any of the rules and regulations of the Oil Conservation Commission have not been complied with at the same time this report is filed, explain fully under the heading "REMARKS."

In all cases where this certificate is filed to cover a change in operating ownership or a change in the transporter designated to move oil or gas, show under "REMARKS" the previous owner or operator and the transporter previously authorized to transport oil or gas.

A separate report shall be filed to cover each producing unit as designated by the Oil Conservation Commission.

OIL CONSERVATION COMMISSION
STATE OF NEW MEXICO

Form C-110

Certificate of Compliance and Authorization to Transport Oil

Company or Operator Continental Oil Company Lease Jack A-20
Address Box CC, Hobbs, New Mexico Ponca City, Oklahoma
(Local or Field Office) (Principal Place of Business)
Unit H Wells No. 3 Sec. 20 T. 24S R. 37E Field Mattix County Lea
Kind of Lease Federal Location of Tanks Center E/2 Sec. 20
Transporter Texas-New Mexico P. L. Co. Address of Transporter Eunice, New Mexico
(Principal Place of Business) (Local or Field Office)
Percent of oil to be transported 100% Other transporters authorized to transport oil from this unit are None %

REMARKS:

The undersigned certifies that the above rules and regulations of the Oil Conservation Commission have been complied with except as noted above and that gathering agent is authorized to transport the percentage of oil produced from the above described property and that this authorization will be valid until further notice to the transporter named herein or until cancelled by the Oil Conservation Commission of New Mexico.

Executed this the 24th. day of February, 194 2.

Continental Oil Company
(Company or Operator)

By [Signature]

Title Dist. Supt.

State of NEW MEXICO
County of LEA } ss.

Before me, the undersigned authority, on this day personally appeared G. E. Purcell known to me to be the person whose name is subscribed to the above instrument, who being by me duly sworn on oath states that he is authorized to make this report and has knowledge of the facts stated herein and that said report is true and correct.

Subscribed and sworn to before me, this the 24th. day of February, 194 2

Notary Public in and for Lea County, New Mexico
MAR 2 - 1942

Approved: _____, 194

OIL CONSERVATION COMMISSION

My Commission expires: 4-26-45

Ray Yankovic

(See Instructions on Reverse Side)

INSTRUCTIONS

This form shall be executed and filed in quadruplicate with the Oil Conservation Commission at Santa Fe, New Mexico, covering each unit from which oil is produced. A separate certificate shall be filed for each transporter authorized to transport oil from a unit. After said certificate has been approved by the Oil Conservation Commission, one copy shall be forwarded to the transporter, one copy returned to the producer, and two copies retained by the Oil Conservation Commission.

A new certificate shall be filed to cover each change in operating ownership and each change in the transporter, except that in the case of a temporary change in the transporter involving less than the allowable production for one month the operator shall, in lieu of filing a new certificate, notify the Oil Conservation Commission at Santa Fe, New Mexico, and the transporter authorized by certificate on file with the Commission, by letter of the estimated amount of oil to be moved by the transporter temporarily moving oil from the unit and the name of such temporary transporter and a copy of such notice shall also be furnished such temporary transporter. Such temporary transporter shall not move any more oil than the estimated amount shown in said notice.

This certificate when properly executed and approved by the Oil Conservation Commission shall constitute a permit for pipe line connection and authorization to transport oil from the property named therein and shall remain in full force and effect until

- (a) Operating ownership changes
- (b) The transporter is changed or
- (c) The permit is cancelled by the Commission

If any of the rules and regulations of the Oil Conservation Commission have not been complied with at the time this report is filed, explain fully under the heading "REMARKS."

In all cases where this certificate is filed to cover a change in operating ownership or a change in the transporter designated to move oil, show under "REMARKS" the previous owner or operator and the transporter previously authorized to transport oil.

A separate report shall be filed to cover each producing unit as designated by the Oil Conservation Commission.

TD3582LY seed
1.1. 31 BOP Nr 2 harvest
584000 gals

LOG

[illegible]