Submit to Appropriate District Office State Lease - 6 copies Fee Lease - 5 copies

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-105

Revised 1-1-89

ee Lease - 5 copies									WELL	API NO.			
DISTRICT I P.O. Box 1980, Hobbs, NM 88240		OI	OIL CONSERVATION DIVISION					N	30-025-11761				
	1111 00440			P.O. Box 2	2088					licate Type			
DISTRICT II P.O. Drawer DD, Artesia, NM 88210 Santa Fe, 1				New Mexic	o 8750)4-2088	5			nte Oil & Ga	ST	ATE 🗌	FEE X
DISTRICT III	man NINA 0741	10							o. Sta	ne On & Ga	as Lease I	NO.	
1000 Rio Brazos Rd., A			COMPLETIO	N REPORT	AND	LOG			/////				
WELL COMPLETION OR RECOMPLETION REPORT AND LOG									7. Lease Name or Unit Agreement Name				
OIL WELL	GAS W	VELL 🗌	dry 🔲	OTHER					Į.	OUTH JU		_	
b. Type of Completio		rr	ne —	188 men 991									
NEW WORK OVER	DEEPE!	N X BA	UG CK R	ESVR X OTI	IER				1				
2. Name of Operator				-,					1 -	ell No.		_ _	
ARCO Permian									9. Pool name or Wildcat				
3. Address of Operator P.O.BOX 1610, MIDLAND, TX 79702									JUSTIS BLBRY-TUBB-DKRD				
P.O.BOX 1610, 4. Well Location	MIDLAND	J, IX /	3/02						<u> </u>	02112	PLOK 1.	- 1 ODD-L	
	- 660) F	et From The N	ORTH		Line	and 99	90		_ Feet Fro	m The	WEST	Line
Ollit Letter D		^``	110								_		
Section 25		т	ownship 25S		Range				NMPM				LEA County
10. Date Spudded	11. Date T.D.		12. Date Co	ompl.(Ready to						KB, RT, GI	R, etc.)	14. Elev.	Casinghead
09-08-94	09-26-	-94	_	4-94				6 GR					
15. Total Depth		lug Back T	. D . 1	7. If Multiple Many Zone:	Compl.	How		ntervals Filled E		Rotary Tool	ls	Cable To	ois
7000	5	980		•					<u> </u>	120	. Was Di	rectional Si	urvey Made
19. Producing Interval 4992-5957 BL				ii ic							NO		
21. Type Electric and									22.	Was Well	Cored		
GR/CCL GR/C	CL/CPNL					-			120	NO			
23.			SING REC					in w		NITINIC DE	COPP	I ABA	OUNT PULLED
CASING SIZE		HT LB./FT		H SET	НО	LE SIZE		400		NTING RE		0 0	CORT FULLED
13 3/8	36		497						SX	TOC 1			
9 5/8	36 &	40	3277						OSX				
7	23		6937					<u>465 SX TOC 322</u> 550 SX "C" CMT					
4 1/2	10.5		6014					ວວບ) SK	C" CM	i CIKI		
			INTER RECO	DD				125		TIIDI	NG PE	CORD	
24.	TOP			TTOM SACKS CE		MENT SCREEN		123			NG RECORD DEPTH SET PACKER SET		
SIZE	TOP		BOLLOM	SACKS CEN	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	301		1	2 3/8		5543		
	-					· · · · ·		 -			5515		
26. Perforation rece	ord (interval	size, and	number)		1					CTURE	, CEMI	ENT, SQ	EEZE, ETC.
20. Ferroradon leco	ora (microal,	JEC, and				DEF	TH IN	TERVA	T	AMOU	TAND	KIND MA	TERIAL USED
FF7F F0F7							8-418			SOZ'D W			
5575-5957				5575-5957					F W/3475 BBLS & 196,000 F W/3500 BBLS & 208,000				
4992-5505				PRODUC	TION	499	2-550	15		- W/350	O RBI	<u>3 % 20</u>	<u>18,000# 50</u>
28. Date First Production		Production	Method (Flowing	ng, gas lift. pu	mping -	Size and	d type p	ump)			Well S	tatus (Prod.	or Shut-in)
10-4-94	li i	PUMPIN		. a, a, P				• *			PRO	D	
Date of Test	Hours Tes		Choke Size	Prod'n Fo	-	Oil - B bl	•		MCF		- Bbl.		Oil Ratio
10-06-94	24			Test Perio	d	8		48		50	160 -	600	
Flow Tubing Press.	Casing Pr	essure	Calculated 24 Hour Rate	- Oil - Bbl. 8		Gas -	MCF		Vater - I	Bbl.	Oil Gra	avity - API	-(Corr.)
29. Disposition of Ga	as (Sold, used	for fuel, v	1			1 -10			-	Test Wi	tnessed B	By	
SOLD													
30. List Attachments													
ELEC LOG			b 43 43	of this face !	e trace	nd com	lete to *	he heet	t of my	knowledge	and belie		
31. I hereby certify t	that the inforn	nation sho	wn on both sides	s of this local t	s true a	ча сощь	nete to t	HC NEST	. or my		-II- Delle		
n/	010	P. 1 .	00	Printed KF	N W	GOSNE	Li.		Title	AGENT	•	ח	ate 10-21-94
Signature Ke	nw s	ome	<u> </u>	Name KE		UU JIIL			1 1116				

INSTRUCTIONS

This form is to be filed with the appropriate District Office of the Division not later than 20 days after the completion of any newly-drilled or deepened well. It shall be accompanied by one copy of all electrical and radio-activity logs run on the well and a summary of all special tests conducted, including drill stem tests. All depths reported shall be measured depths. In the case of directionally drilled wells, true vertical depths shall also be reported. For multiple completions, Items 25 through 29 shall be reported for each zone. The form is to be filed in quintuplicate except on state land, where six copies are required. See Rule 1105.

INDICATE FORMATION TOPS IN CONFORMANCE WITH GEOGRAPHICAL SECTION OF STATE

T. Canyon T. Ojo Alamo

Southeastern New Mexico

T. Anhy ____

Northeastern New Mexico

_ T. Penn. "B<u>"</u>

			. 1. Carryon	1. Ojo 1	namo_	141 1	T. D	
T. Salt					and-Fru	itiand	T. Penn. "C" T. Penn. "D"	
B. Salt			T. Atoka			ffs		
				T. Cliff	House_		T. Leadville	
							T. Madison	
T. San Ar	ndres		T. Simpson	T. Gallu	ль <u> </u>		T. Ignacio Otzte	
T. Glorie	ta		T. McKee				T. Granite	
T. Paddoo	ck							
T. Blineb	ry	4950	T. Gr. Wash	T. Mor	rison		T	
Γ. Tubb		5655	T. Delaware Sand	T. Todi	ilto		T	
T. Drinka	ard	5795	T. Bone Springs	T. Entra	ada		T	
			_ T.	T. Wing	gate		T	
T. Wolfe:	amp		Т.	T. Chin	ıle		1.	
T. Penn	Γ. Wolfcamp Γ. Penn		1.	T. Perm	nain		1	
T. Cisco	(Bough	C)	Т.	T. Penr	ı "A"			
	`			S SANDS OR 2	ZONES			
No. 1, fr	om		to	No. 3	3. from.		to	
			to		from.		to	
110. 2, 11.	OIII	•••••••••••		NT WATER S				
Include d	lata on m	ate of water in	flow and elevation to which v					
No 1 fe	om	ate of water in	to	vater rese in ner	.	feet		
No. 2 fr	om		to		************	feet		
No. 3, fr	OM		to		***************************************	feet		
110. 5. 11	OIII							
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From		L				nal sheet if		
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