

Submit 3 Copies
to Appropriate
District Office

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2008

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

WELL API NO.

30-025-31985

5. Indicate Type of Lease

STATE ☐

FEE ☒

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name

South Justis Unit "F"

8. Well No.

240

9. Pool Name or Wildcat

Justis Blbry-Tubb-Dkrd

SUNDRY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR DEEPEN OR PLUG BACK TO A
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT"
(FORM C-101) FOR SUCH PROPOSALS)

1. Type of Well:

OIL
WELL ☐

GAS
WELL ☐

other Water Injection

2. Name of Operator

ARCO OIL and GAS COMPANY

3. Address of Operator

P.O. Box 1610, Midland, Texas 79702

4. Well Location

Unit Letter F : 2500 Feet From The North Line and 1500 Feet from The West Line

Section 25 Township 25S Range 37E NMPM Lea County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)

3058 GR

11. 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) ☒

12. Describe Proposed or completed Operation (Clearly state all pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

10-13-93. RUPU. POH w/CA. RIH w/Inj CA: 2-3/8 IPC tbg & pkr set @ 5021. Press test csg to 500# for 30 min.

R-9247 inject

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

SIGNATURE Johnny Shields

TITLE Drilling Team Leader

DATE 11-02-93

TYPE OR PRINT NAME Johnny Shields

TELEPHONE 915 688-5674

(This space for State Use)

**ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR**

TITLE _____ DATE _____

NOV 05 1993

APPROVED BY _____
CONDITIONS FOR APPROVAL, IF ANY:

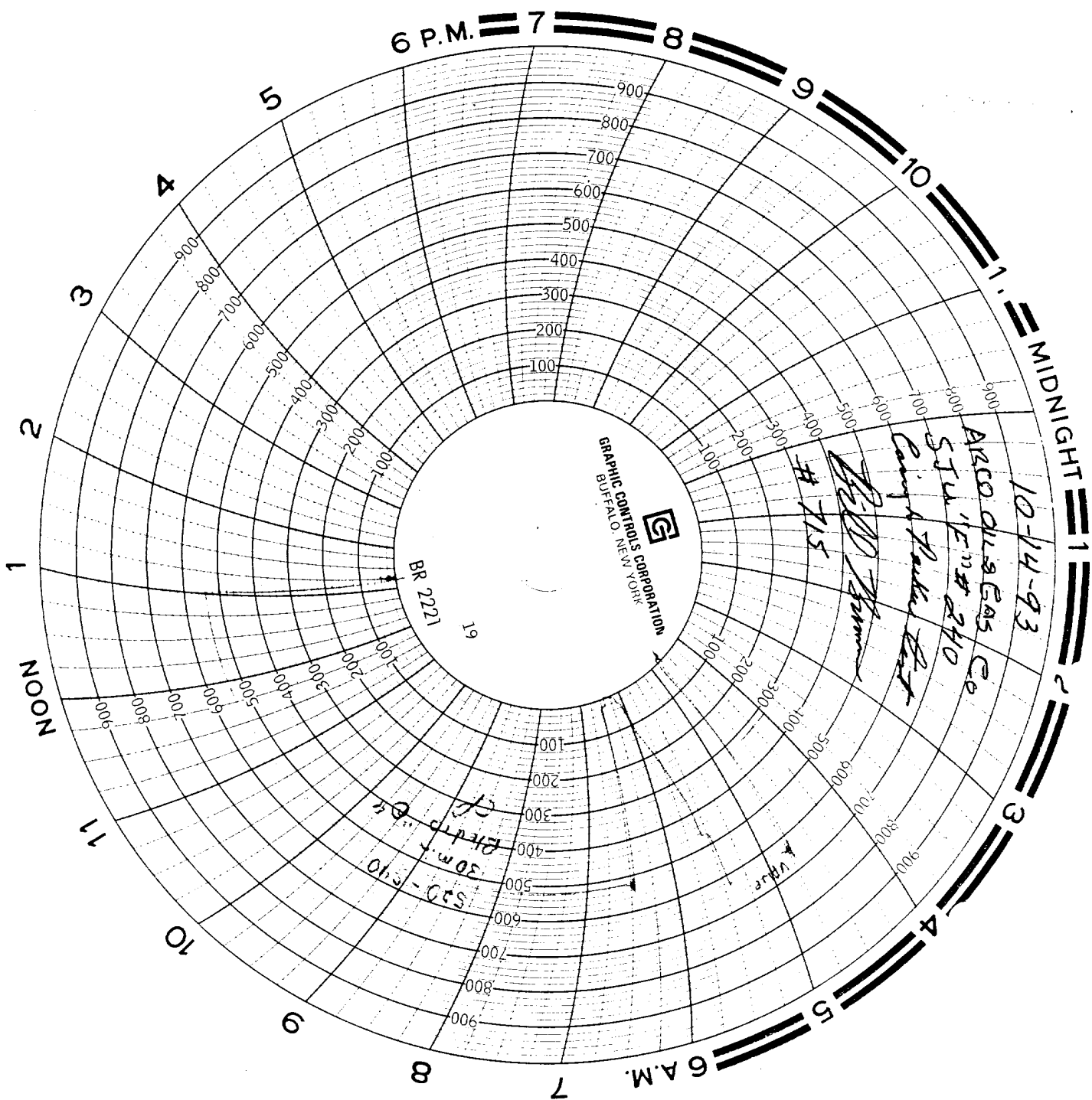
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COMMUNICATIONS
OFFICE



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

Operator ARCO Oil & Gas Company		Well API No. 30-025- 31985
Address Box 1610, Midland, TX 79702		
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)		
New Well <input checked="" type="checkbox"/>	Change in Transporter of:	
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/>	Dry Gas <input type="checkbox"/>
Change in Operator <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/>	Condensate <input type="checkbox"/>
If change of operator give name and address of previous operator		

II. DESCRIPTION OF WELL AND LEASE

Lease Name South Justis Unit "F"	Well No. 240	Pool Name, including Formation Justis Blbry-Tubb-Dkrd	Kind of Lease Some Interest Fee	Lease No.
Location				
Unit Letter F	2500	Feet From The North	Line and 1500	Feet From The West
Section 25	Township 25S	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) Box 2528, Hobbs, NM 88240	
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) 74102	
Sid Richardson Gasoline/Texaco E&P Co.	Box 1226, Jal NM 88292/Box 3000, Tulsa, OK	
If well produces oil or liquids, give location of tanks.	Unit	Sec.
	Twp.	Rge.
	Is gas actually connected?	When ?
	yes	9-19-93

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 X	Gas Well	New Well X	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded 8-7-93	Date Compl. Ready to Prod. 9-19-93	Total Depth 6050		P.B.T.D. 6006				
Elevations (DF, RKB, RT, GR, etc.) 3058 GR	Name of Producing Formation Blbry-Tubb-Dkrd	Top Oil/Gas Pay 5070		Tubing Depth 5987				
Perforations 5070-5956			Depth Casing Shoe 6050					
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE 12-1/4	CASING & TUBING SIZE 8-5/8		DEPTH SET 980		SACKS CEMENT 770			
7-7/8	4-1/2		6050		1650			
	2-3/8		5987					

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 9-19-93	Date of Test 9-28-93	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 hrs	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls. 9	Water - Bbls. 62	Gas- MCF 37

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.

Johnny Shields
Signature
Johnny Shields Drlg Team Leader
Printed Name
9-30-93
Date
915 688-5674
Telephone No.

OIL CONSERVATION DIVISION

Date Approved OCT 04 1993
By Paul Kautz
Orig. Signed by
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.

RECEIVED
JUL 1993

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JUL 1993

JOHN HOBBS
JUL 1993