

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE

See authority
for use of this form

CASE OR DESIGNATION AND DATE

LC 028731 (A)

WELL COMPLETION OR RECOMPLETION REPORT **READY LOG D**1a. TYPE OF WELL: OIL WELL ☒ GAS WELL ☐ DRY ☐ OTHER ☐

b. TYPE OF COMPLETION:

NEW WELL ☐ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. ELEV. ☐ OTHER ☐

2. NAME OF OPERATOR

Sun Oil Company

3. ADDRESS OF OPERATOR

P. O. Box 1861 - Midland, Texas 79702

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)

At surface 660 FSL & 660 FEL

At top prod. interval reported below

At total depth

14. PERMIT NO.

Blanket

APR 11 1979
U.S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO
2-20-79APR 13 1979
Conversion to OilO. C. C.
ARTESIA, OFFICE

RECEIVED

5. LAND ACQUISITION TYPE

6. FARM OR LEASE NAME

M. Dodd -A-

7. WELL NO.

13

10. FIELD AND POOL OR WILDCAT

Grbg Jackson Queen G-SA

11. SECTION, TOWNSHIP, RANGE
OF AREA

Sec. 15, T17S, R29E

12. COUNTY OR PARISH

Eddy

13. STATE

New Mexico

15. DATE SPUDDED

1-25-56

16. DATE T.D. REACHED

17. DATE COMPL. (Ready to prod.)

3-20-56

18. COORDINATES OF C.S.R. PT. OR ETC.*

3593 DF, 3586 GR

19. ELEV. CASING

20. TOTAL DEPTH, MD & TVD

3294

21. PLUG. BACK T.D., MD & TVD

2450 3294

22. IF MULTIPLE COMPL.
HOW MANY*23. INTERVALS
DELETED BY

ROTARY TOOLS

CABLE TO

X

24. PRODUCING INTERVAL(S), OF THIS COMPLETION- TOP, BOTTOM, NAME (MD AND TVD)*

2817-40 San Andres

3180-96 San Andres

25. WAS DIRECT SURVEY MADE

No

26. TYPE ELECTRIC AND OTHER LOGS RUN

CNL, Gamma Ray-Neutron

27. WAS WELL CURED

No

CASING RECORD (Report all strings set in well)

CASINO SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT FILLED
8 5/8	24	457	12 1/2	350 Sx.	
5 1/2	14	3224	7 7/8	250 Sx.	

LINER RECORD				30. SIZE	TUBING RECORD	
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	DEPTH SET (MD)	PACKER SET (MD)
					2 7/8	3242
						None

31. PERFORATION RECORD (Interval, size and number)

2578-3196 Perf w/1JSPF w/4" DML 23 GM
Csg Gun - 155 holes

32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

DEPTH INTERVAL (MD) AMOUNT AND KIND OF MATERIAL USED

2390-2406

250 Sx CLH Cmt

2817-3294

Acidize w/7850 Gals 15% NEHCl

33.*

PRODUCTION

33.

DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping -size and type of pump)					WELL STATUS (Producing or shut-in)	
3-13-79		1 1/2" Insert Pump					Producing	
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL- BBL.	GAS- MCF.	WATER- BBL.	GAS-OIL RATIO	
4-5-79	24	None	→	10	TSTM	28		
FLOW, TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL- BBL.	GAS- MCF.	WATER- BBL.	OIL GRAVITY-API (CORR.)		
	30#	→				37.6		

TEST WITNESSED BY

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)

Sold

35. LIST OF ATTACHMENTS

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records

SIGNED

TITLE

Production Staff Associate

DATE

4-6-79

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

INSTRUCTIONS

General: This form is designed for submitting a complete and correct well completion report and log on all types of lands and leases to either a Federal agency or a State agency, or both, pursuant to applicable Federal and/or State laws and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State office. See instructions on Items 22 and 24, and 28, below regarding separate reports for separate completions. If not filed prior to the time this summary record is submitted, copies of all currently available logs (drillers, geologists, sample and core analysis, all types electric, etc.), formation and pressure tests, and directional surveys, should be attached hereto, to the extent required by applicable Federal and/or State laws and regulations. All attachments should be listed on this form, see Item 35.

Item 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

Item 18: Indicate which elevation is used as reference (where not otherwise shown) for depth measurements given in other spaces on this form and in any attachments. Items 22 and 24: If this well is completed for separate production from more than one interval zone (multiple completion), so state in Item 22, and in Item 24 show the producing interval, or intervals, top(s), bottom(s) and name(s) (if any) for only the interval reported in Item 23. Submit a separate report (page) on this form, adequately identified, for each additional interval to be separately produced, showing the additional data pertinent to such interval.

Item 29: "Gacks Cement": Attached supplemental records for this well should show the details of any additional stage cementing and the location of the cementing tool.

Item 33: Submit a separate completion report on this form for each interval to be separately produced. (See instruction for Items 22 and 24 above.)

Comp. 3-20-56 F/60 B0, No Wtr., 16/64" in 12 hrs. F/Keely zone
 Convert to injection 3-15-66
 TAd 8-1-73

37. SUMMARY OF FORMER ZONES:

SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF; CORED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CUSHION TEST, TIME TOOL, OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH	TRUE VERT. DEPTH
	147	153	Water Sand	Queen	1825	
	250	260	Water Sand	Grayburg	2152	
				Loco Hills	2290	
				Metex	2390	
				Premier	2500	
				Lovington	2610	
				Selenic	3150	
				Keelley	3235	