

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE\*

(See other instructions on reverse side)

Form approved.  
Budget Bureau No. 42-R355.5.

5. LEASE DESIGNATION AND SERIAL NO.

LC-055264

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

Grayburg Jackson S.A.

8. FARM OR LEASE NAME

9. WELL NO.

40

10. FIELD AND POOL, OR WILDCAT

Grayburg Jackson, GB-SA

11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA

Sec. 24-17S-30E.

12. COUNTY OR PARISH

Eddy

13. STATE

New Mexico

WELL COMPLETION OR RECOMPLETION REPORT AND LOG\*

1a. TYPE OF WELL: OIL WELL  GAS WELL  DRY  Other **Water Injection**

b. TYPE OF COMPLETION: NEW WELL  WORK OVER  DEEP-EN  PLUG BACK  DIFF. RESVR.  Other \_\_\_\_\_

2. NAME OF OPERATOR  
**WINDFOHR OIL COMPANY**

3. ADDRESS OF OPERATOR  
**1202 First National Bank Bldg., Fort Worth, Texas 76102**

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)\*  
At surface **1650' from north and 1980' from west lines of Section 24-17S-30E.**  
At top prod. interval reported below  
At total depth

14. PERMIT NO. DATE ISSUED

15. DATE SPUNDED 16. DATE T.D. REACHED 17. DATE COMPL. (Ready to prod.) 18. ELEVATIONS (DF, REB, RT, GR, ETC.)\* 19. ELEV. CASINGHEAD

Mar. 5, 1969 Mar. 15, 1969

3728 KB

20. TOTAL DEPTH, MD & TVD 21. PLUG, BACK T.D., MD & TVD 22. IF MULTIPLE COMPL., HOW MANY\* 23. INTERVALS DRILLED BY ROTARY TOOLS CABLE TOOLS

3605

3604

0 - T.D.

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, MD (MD & TVD)

**RECEIVED** →

25. WAS DIRECTIONAL SURVEY MADE

**3495-3596 - Injection interval**

**APR 29 1969**

**APR 25 1969**

27. WAS WELL CORRED  
**No**

26. TYPE ELECTRIC AND OTHER LOGS RUN

**Gamma Ray-Neutron**

**No**

28. CASING RECORD (Report all strings in well)

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	PIPE SIZE	CEMENTING RECORD	AMOUNT PULLED
8-5/8"	20# - H	480'	12-1/4	200 Sx. 2% CaCl.	
4 1/2"	9.5# J	3605'	7-7/8	200 sx. 50/50 pozmix with 6% gel + 225 sx. Incor.	

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					2-3/8"	3414	3414

31. PERFORATION RECORD (Interval, size and number)  
**3495-97, 3502-05, 3510-13, 3523-3551, 3563-68, 3578-86 and 3591-96 with 2 shots/ft.**

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
3495-3596	Acidized with 5,000 gals. 28% with ball sealers.

33.\* PRODUCTION

DATE FIRST PRODUCTION **Not Produced.** PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) WELL STATUS (Producing or shut-in)

DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO

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

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 Ralph Gray TITLE Consultant DATE April 25, 1969

\*(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 33, 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 33. 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:** "Sacks Cement": Attached supplemental records for this well should show the details of any multiple 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.)

FORMATION		TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH	TOP
		3495	3596			325	TRUE VERT. DEPTH
<b>San Andres</b>				38.	38.	325	325
				38.	38.	540	540
				38.	38.	1236	1236
				38.	38.	2338	2338
				38.	38.	3098	3098