

**UNITED STATES DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY**

Copy to 51
Form approved.
Budget Bureau No. 42-R355.5.

5. LEASE DESIGNATION AND SERIAL NO.

LC-064488-E

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Arco 10 Federal

9. WELL NO.

2

10. FIELD AND POOL, OR WILDCAT

Boyd (Morrow)

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

Sec. 10, T19S, R25E

12. COUNTY OR PARISH
Eddy

13. STATE

New Mexico

18. ELEVATIONS (DF, REB, RT, GR, ETC.)*

3498 KB

19. ELEV. CASINGHEAD

3482'

23. INTERVALS DRILLED BY

0-9293

ROTARY TOOLS

CABLE TOOLS

25. WAS DIRECTIONAL SURVEY MADE

No

27. WAS WELL CORED

No

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL:

OIL WELL ☐

GAS WELL ☒

DRY ☐

Other

RECEIVED

b. TYPE OF COMPLETION:

NEW WELL ☒

WORK OVER ☐

DEEP-EN ☐

PLUG BACK ☐

DIFF. RESVR. ☐

Other

2. NAME OF OPERATOR

David Fasken

3. ADDRESS OF OPERATOR

608 First Natl. Bank Bldg., Midland, Texas

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

At surface **1980' FEL & 1980' FNL Sec. 10**

At top prod. interval reported below

At total depth

14. PERMIT NO.

DATE ISSUED

OCT 17 1972

O.C.C. STATE OFFICE

15. DATE SPUDDED

7-12-72

16. DATE T.D. REACHED

8-11-72

17. DATE COMPL. (Ready to prod.)

8-20-72

20. TOTAL DEPTH, MD & TVD

9293

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

9215

22. IF MULTIPLE COMPL., HOW MANY*

3498 KB

0-9293

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

9026-9068 w/1 J.S.P.F. - Morrow

26. TYPE ELECTRIC AND OTHER LOGS RUN

C.N.L. & D.I.L.L.

28. CASING RECORD (Report all strings set in well)

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
13 3/8	48	428	17 1/2	400 SX	-0-
8 5/8	24	1160	12 1/4	800 SX	-0-
4 1/2	10.5 & 11.6	9291	7 7/8	450 SX	-0-

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					2 3/8"	8625	8625

31. PERFORATION RECORD (Interval, size and number)

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
Natural	Completion

33.* PRODUCTION RECORD

DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)					WELL STATUS (Producing or shut-in)	
8-18-72		Flowing					Shut-in	
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO	
8-22-72	1	20/64	→	Dry		-0-	-	
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)		
2160	Pkr.	→	Dry	5270	-0-	Dry Gas		
34. DISPOSITION OF GAS (Sold, used for fuel vented etc.)								

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

Vented

TEST WITNESSED BY

Mr. John Gray

35. LIST OF ATTACHMENTS

Logs & DST Resumes

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

SIGNED

TITLE

Agent

DATE

10-13-72

*(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: "Socks 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.)

37. SUMMARY OF POROSITY ZONES:

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

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	38. GEOLOGIC MARKERS
				NAME
				MEAS. DEPTH
				TOP
				TRUE VERT. DEPTH
				Grayburg 344
				San Andres 812
				Glorietta 2310
				Blinberry 2425
				Bone Springs 5125
				Wolfcamp 5710
				Canyon 7595
				Atoka 8780
				Morrow 8945
				Mississippi 9215
				Chester Lm 9258

See Attachment