

UNITED STATES DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

Other Instructions on reverse side

Form approved.
Budget Bureau No. 42-R355.6.

C/SF

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

5. LEASE DESIGNATION AND SERIAL NO.

LC 029353A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

McFadden Federal

9. WELL NO.

7

10. FIELD AND POOL, OR WILDCAT

Shugart

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

3-19S-31E

1a. TYPE OF WELL: OIL WELL GAS WELL DRY Other

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

2. NAME OF OPERATOR

Jack Plemons

3. ADDRESS OF OPERATOR

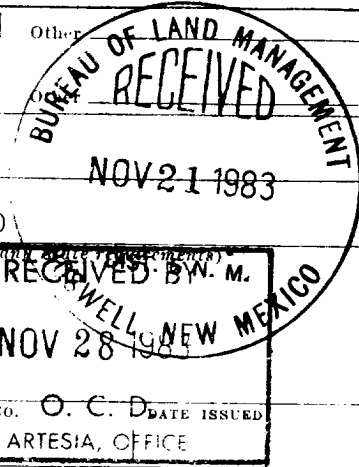
P.O. Box 385, Artesia, New Mexico 88210

4. LOCATION OF WELL (Report location clearly and in accordance with the well completion)

At surface 1650'N 990'E

At top prod. interval reported below

At total depth



14. PERMIT NO. O. C. D. DATE ISSUED
ARTESIA, OFFICE

12. COUNTY OR PARISH

Eddy

13. STATE

New Mexico

15. DATE SPUNDED

9-6-83

16. DATE T.D. REACHED

9-16-83

17. DATE COMPL. (Ready to prod.)

10-30-83

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

3607.6

19. ELEV. CASINGHEAD

20. TOTAL DEPTH, MD & TVD

3943

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

22. IF MULTIPLE COMPL., HOW MANY*

23. INTERVALS DRILLED BY

ROTARY TOOLS

0-3943

CABLE TOOLS

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

3802½-3909

25. WAS DIRECTIONAL SURVEY MADE

26. TYPE ELECTRIC AND OTHER LOGS RUN

Neutron-Gamma Ray

27. WAS WELL CORED

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

| CASING SIZE | WEIGHT, LB./FT. | DEPTH SET (MD) | HOLE SIZE | CEMENTING RECORD | AMOUNT PULLED |
|-------------|-----------------|----------------|-----------|------------------------------------|---------------|
| 8 5/8" | 24 | 692' | 10" | 450 sacks - circulated | None |
| 5 1/2" | 15.5 | 3943' | 8" | 1500 sacks - circulated to surface | None |

29. LINER RECORD

| SIZE | TOP (MD) | BOTTOM (MD) | SACKS CEMENT* | SCREEN (MD) | SIZE | DEPTH SET (MD) | PACKER SET (MD) |
|------|----------|-------------|---------------|-------------|--------|----------------|-----------------|
| | | | | | 2 1/2" | 2734 | |

31. PERFORATION RECORD (Interval, size and number)

3802½, 03½, 04½
3840, 41, 42
3859, 60, 62
3899
3909

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

| DEPTH INTERVAL (MD) | AMOUNT AND KIND OF MATERIAL USED |
|---------------------|--|
| 3802½-3909 | 300 bbls. water 6,000 lbs. 20/40 sand |

33.* PRODUCTION

| DATE FIRST PRODUCTION | PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) | WELL STATUS (Producing or shut-in) | | | | | |
|-----------------------|--|------------------------------------|-------------------------|----------|------------|-------------------------|---------------|
| 10-30-83 | Pumping | Producing | | | | | |
| DATE OF TEST | HOURS TESTED | CHOKED SIZE | PROD'N. FGR TEST PERIOD | OIL—BBL. | GAS—MCF. | WATER—BBL. | GAS-OIL RATIO |
| 10-30-83 | 24 | | | 10 | -0- | -0- | |
| FLOW. TUBING PRESS. | CASING PRESSURE | CALCULATED 24-HOUR RATE | OIL—BBL. | GAS—MCF. | WATER—BBL. | OIL GRAVITY-API (CORR.) | |
| | | | 10 | -0- | -0- | | |

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

TEST WITNESSED BY

TSTM

35. LIST OF ATTACHMENTS

ACCEPTED FOR RECORD

(ORIG. SGD.) DAVID R. GLASS

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

SIGNED

TITLE

Agent

DATE

11-17-83

*(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 25.

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 special 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.)

37. SUMMARY OF POROSITY ZONES:

SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF: CORRE INTERVALS; AND ALL DESIGNATED TESTS, INCLUDING DEPTH INTERVAL, PRESSURE, CUSHION TEST, TIME TOOL, OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES

| FORMATION | TOP | BOTTOM | DESCRIPTION, CONTENTS, ETC. | NO. | GEOLOGIC MARKERS | |
|-----------|------|--------|-----------------------------|-----|------------------|------------------|
| | | | | | NAME | TOP |
| | | | | | MEAS. DEPTH | TRUE VERT. DEPTH |
| Shale | 0 | 610 | | | | |
| Salt | 610 | 2295 | | | | |
| Anhydrite | 2295 | 3790 | | | | |
| Lime | 2790 | 3950 | | | | |