

NMCC COPY
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.

NM-0415688-A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

Old Indian Draw Unit

8. FARM OR LEASE NAME

Old Indian Draw Unit

9. WELL NO.

22

10. FIELD AND POOL, OR WILDCAT

Indian Draw Delaware

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

18-22-28 NMPM

12. COUNTY OR PARISH
Eddy13. STATE
NM

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL: OIL WELL ☒ GAS WELL ☐ DRY ☐ Other ☐b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other ☐

2. NAME OF OPERATOR

Amoco Production Company

3. ADDRESS OF OPERATOR

P. O. Drawer A, Levelland, Texas 79336

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

At surface

2323' FSL X 796' FWL Sec. 18, (Unit L NW/4 SW/4)

At top prod. interval reported below

At total depth

Same

14. PERMIT NO.

DATE ISSUED

15. DATE SPUNDED

6-1-77

16. DATE T.D. REACHED

6-7-77

17. DATE COMPL. (Ready to prod.)

6-19-77

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

3085.9 GR

19. ELEV. CASINGHEAD

20. TOTAL DEPTH, MD & TVD

3450

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

3406

22. IF MULTIPLE COMPL., HOW MANY*

23. INTERVALS DRILLED BY

ROTARY TOOLS

CABLE TOOLS

Surf to TD

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

3215 to 3241, Delaware

25. WAS DIRECTIONAL SURVEY MADE

No

26. TYPE ELECTRIC AND OTHER LOGS RUN

Borehole Compensated Sonic Log and Dual Laterolog Micro SFL

27. WAS WELL CORED

No

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#	424'	12 1/4"	400 SX INCOR	Circ 45 SX
5 1/2"	14-15.5#	3450'	7 7/8"	600 SX INCOR x 50-50 Pozmix	Circ 85 SX

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					2 3/8"	3185'	3185'

31. PERFORATION RECORD (Interval, size and number)

3215 to 3241' - 2 JSPF

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
3215' to 3241'	3000 gal 7 1/2% acid

33.* PRODUCTION

DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)				WELL STATUS (Producing or shut-in)	
6-19-77		Pumping				Producing	
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
7-24-77	24	NA	→	44	TSTM	0	TSTM
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)	
NA	NA	→	44	TSTM	0		

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

Vented

TEST WITNESSED BY

35. LIST OF ATTACHMENTS

2 copies of logs per item 26. (Note: 1 copy of logs attached and will send other copy as soon as received from Schlumberger.)

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

SIGNED

Ray W. Cox

TITLE

Administrative Assist.

DATE

7-27-77

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: "Seals 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 POROUS 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				38. GEOLOGIC MARKERS		
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH	TRUE VERT. DEPTH
Delaware	3215	3241	Oil Zone	Base Salt	2254	
				Top Delaware Sands	2347	
				Top Old Indian Draw Sand	3214	