

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

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

5. LEASE DESIGNATION AND SERIAL NO.

NM 26037

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

9. WELL NO.

Federal #8

10. FIELD AND POOL, OR WILDCAT

Wild cat

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

S/2 S29 T17N-R4W

12. COUNTY OR PARISH

Sendover

13. STATE

N. Mex

1a. TYPE OF WELL:

OIL

☐

GAS

☐

DRY

☒

Other

b. TYPE OF COMPLETION:

NEW

☐

WORK

☐

DEEP-

☐

PLUG

☐

DIFF.

☐

Other

2. NAME OF OPERATOR

Wm. B. Martin Jr

3. ADDRESS OF OPERATOR

1300 West Nuevo Emgtn N. Mex 87401

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

At surface 915 fsl & 775 fwl sec 29 T17N-R4W

At top prod. interval reported below

At total depth

14. PERMIT NO.

DATE ISSUED

8/31/79

15. DATE SPUDDED

9/3/79

16. DATE T.D. REACHED

9/3/79

17. DATE COMPL. (Ready to prod.)

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

6329 ground

19. ELEV. CASINGHEAD

20. TOTAL DEPTH, MD & TVD

100

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

Plug 0-100'

22. IF MULTIPLE COMPL., HOW MANY*

23. INTERVALS DRILLED BY

ROTARY TOOLS

CABLE TOOLS

0-100

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

None Menefee Dry Surface to T.D.

25. WAS DIRECTIONAL SURVEY MADE

No

26. TYPE ELECTRIC AND OTHER LOGS RUN

Southwest Surveys Gamma Ray-Density

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
None	—	—	6 1/4	—	—

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
None							

31. PERFORATION RECORD (Interval, size and number)

None

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
None	

33.* PRODUCTION

DATE FIRST PRODUCTION		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
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)	

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

Wm. B. Martin Jr

TITLE

Operator

DATE

9/17/79

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