

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other in-
structions on
reverse side)Form approved
Budget Bureau No. 42-R355.5.

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 Arwood Stowe							
3. ADDRESS OF OPERATOR P O Box 2265, Wichita Falls, Texas 76307							
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 694' F/NL 667' EL (as per corrected survey) At top prod. interval reported below Same At total depth							
14. PERMIT NO.			DATE ISSUED Sept. 24-65			12. COUNTY OR PARISH Sandoval	13. STATE New Mexico
15. DATE SPUDDED Sept 26-65	16. DATE T.D. REACHED Sept. 30-65	17. DATE COMPL. (Ready to prod.) October 18, 1965		18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 6503 GL		19. ELEV. CASINGHEAD	
20. TOTAL DEPTH, MD & TVD 450'		21. PLUG, BACK T.D., MD & TVD		22. IF MULTIPLE COMPL., HOW MANY*		23. INTERVALS DRILLED BY ALL	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 320' to 360' 390' to 410'						25. WAS DIRECTIONAL SURVEY MADE	
26. TYPE ELECTRIC AND OTHER LOGS RUN Mike Rathman Electric Log. - G I Wire Line Service, Inc.						27. WAS WELL CORED Yes	
28. CASING RECORD (Report all strings set in well)							
CASING SIZE 2 7/8"		WEIGHT, LB./FT. 34"		DEPTH SET (MD) 442'		HOLE SIZE 6"	
						CEMENTING RECORD Circulated out top	
29. LINER RECORD							
SIZE		TOP (MD)		BOTTOM (MD)		SACKS CEMENT*	
						SCREEN (MD)	
30. TUBING RECORD							
SIZE		DEPTH SET (MD)		PACKER SET (MD)			
31. PERFORATION RECORD (Interval, size and number) 338 to 348 20 holes 390 to 396 10 holes							
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.							
DEPTH INTERVAL (MD)				AMOUNT AND KIND OF MATERIAL USED Washed with mud acid			
33. PRODUCTION							
DATE FIRST PRODUCTION November 1-65		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Pumping				WELL STATUS (Producing or shut-in) shut in	
DATE OF TEST November 1-65		HOURS TESTED 24		CHOKE SIZE 3/4		PROD'N. FOR TEST PERIOD 3/4	
						OIL—BBL. 3/4	
						GAS—MCF. -0-	
						WATER—BBL. trace	
						GAS-OIL RATIO 40	
FLOW. TUBING PRESS. -0-		CASING PRESSURE -0-		CALCULATED 24-HOUR RATE 3/4		OIL GRAVITY-API (CORE.) 40	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) ran into tanks						TEST WITNESSED BY Miller	
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 Arwood Stowe		TITLE Operator		DATE 3-1-71			

*(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.)

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

FORMATION	1	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.
Sandy Shale	0	112	112	
Sandy sand		112	118	
Shale		118	140	
Sandy Shale		140	320	
Sand		320	360	
Shale		360	390	
Sand		390	410	
Shale		410	450	
				TOTAL DEPTH INTERVALS LOG

38.

GEOLOGIC MARKERS

NAME	MEAS. DEPTH	TOP	TRUE VERT. DEPTH