

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.

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 Continental Oil Company					
3. ADDRESS OF OPERATOR Box 460, Hobbs, N.M. 88240					
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*					
At surface 790' FNL + 966' FEL					
At top prod. interval reported below Same					
At total depth Same					
14. PERMIT NO.		DATE ISSUED			
15. DATE SPUDDED 4-25-78		16. DATE T.D. REACHED 5-6-78		17. DATE COMPL. (Ready to prod.) 7-7-78	
18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 6504' GR		19. ELEV. CASINGHEAD			
20. TOTAL DEPTH, MD & TVD 5268'		21. PLUG, BACK T.D., MD & TVD 5215		22. IF MULTIPLE COMPL., HOW MANY*	
23. INTERVALS DRILLED BY Rotary		ROTARY TOOLS		CABLE TOOLS	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 4848-4997' MESAVERO 5051-5138		25. WAS DIRECTIONAL SURVEY MADE yes		26. TYPE ELECTRIC AND OTHER LOGS RUN SPIES GR CAL CNL FDC	
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
9 5/8"	36	216	13 1/4"	265 SX	Circ.
7"	23	3266	8 7/16"	450 SX	
29. LINER RECORD					
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	
4 1/2"	3167	5238	235		
30. TUBING RECORD					
SIZE	DEPTH SET (MD)	PACKER SET (MD)			
2 3/8"	5159'				
31. PERFORATION RECORD (Interval, size and number)					
1848, 50, 52, 60, 64, 4918', 20, 30, 32, 43, 45					
47, 68, 70, 72, 74, 93, 95, 97, 1 JSPF					
5051-53, 5093-96, 5126-28, 5136-38 1 JSPF					
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.					
DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED			
4848-4997		5200 lbs. gelled acid, 92,000 # 20/40 sd.			
5051-5138		70,000 # 20/40 sd.			
33.* PRODUCTION					
DATE FIRST PRODUCTION 7-11-78		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Flowing			
DATE OF TEST 7-28-78		HOURS TESTED 24	CHOKE SIZE 2	PROD'N. FOR TEST PERIOD →	OIL—BBL. 0
FLOW. TUBING PRESS. 125		CASING PRESSURE 300	CALCULATED 24-HOUR RATE →	OIL—BBL. 0	GAS—MCF. 654 CAOF
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Sold		TEST WITNESSED BY AUG 11 1978			
35. LIST OF ATTACHMENTS					
36. I hereby certify that the foregoing and attached information is complete and correct as determined from _____					
SIGNED Wm A. Butterfield		TITLE Administrative Supervisor		DATE 8-2-78	

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

USGS-Durango (5), GSS Co. N.M., EXXON, AMT, BEA, F, 10

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	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	GEOLOGIC MARKERS		
				NAME	MEAS. DEPTH	TRUE VERT. DEPTH
Chacra	3645	3670		Chacra	3645	
Mesa Verde	4420	5146		Mesa Verde	4420	