

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

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 Ken Blackford						
3. ADDRESS OF OPERATOR P. O. Box 108, Lubbock, Texas 79408						
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 800' fnl & 800' fel At top prod. interval reported below same At total depth same						
14. PERMIT NO.				DATE ISSUED		
15. DATE SPUDDED 11-14-81		16. DATE T.D. REACHED 11-18-81		17. DATE COMPL. (Ready to prod.) 11-30-81		18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 6664 GL
20. TOTAL DEPTH, MD & TVD 2623		21. PLUG BACK T.D., MD & TVD 2577		22. IF MULTIPLE COMPL., HOW MANY*		23. INTERVALS DRILLED BY all
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* Kpc 2329 - 2453						25. WAS DIRECTIONAL SURVEY MADE Yes
26. TYPE ELECTRIC AND OTHER LOGS RUN IES, GR, Neutron, 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
8-5/8"	20	120	12-1/4"	100 sx - circulated		
4-1/2"	10.5	2577	6-3/4"	140 sx		
29. LINER RECORD						
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)		
30. TUBING RECORD						
SIZE	DEPTH SET (MD)	PACKER SET (MD)				
2-3/8"	2362					
31. PERFORATION RECORD (Interval, size and number) 2346-2360, 2392-2398, 2410-2418 all @ 1 hole per foot						
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.						
DEPTH INTERVAL (MD)			AMOUNT AND KIND OF MATERIAL USED			
2346-2418			Nitrogen Foam Frac with 600 sx 10-20 sand			
33. PRODUCTION						
DATE FIRST PRODUCTION ---		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) flowing			WELL STATUS (Producing or shut-in) shut-in	
DATE OF TEST 12-6-81	HOURS TESTED 3	CHOKE SIZE 3/4"	PROD'N. FOR TEST PERIOD →	OIL—BBL. --	GAS—MCF. --	WATER—BBL. --
FLOW. TUBING PRESS. 85 psi	CASING PRESSURE 150	CALCULATED 24-HOUR RATE →	OIL—BBL. 1,230	GAS—MCF. 1,230	WATER—BBL. 1,230	OIL GRAVITY-API (CORR.)
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) will be sold to EPNG Co.						TEST WITNESSED BY Roger McCown
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

Thomas B. Grandin

TITLE

Agent

DATE

DEC 14 1981

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

FARMINGTON DISTRICT

BY

Smm

NMOCC

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				38. GEOLOGIC MARKERS		
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH	TRUE VERT. DEPTH
				Tw	Spud	--
				Toa	1850	--
				Kk	2007	--
				Kf	2180	--
				Kpc	2329	--
				Kl	2453	--

