

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. ☐
2. NAME OF OPERATOR Gulf Oil Corp.						
3. ADDRESS OF OPERATOR P.O. Box 670, Hobbs NM 88240						
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 2080' FNL + 2140' FEL At top prod. interval reported below At total depth						
14. PERMIT NO. DATE ISSUED BUREAU OF LAND MANAGEMENT						
15. DATE SPUDDED 8-31-84		16. DATE T.D. REACHED 9-2-84		17. DATE COMPL. (Ready to prod.) 9-23-84		
20. TOTAL DEPTH, MD & TVD 1465'		21. PLUG, BACK T.D., MD & TVD -		22. IF MULTIPLE COMPL., HOW MANY? Single		
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 1204-1210 1046-56' Fruitland		23. INTERVALS DRILLED BY 10-1465'		19. ELEV. CASINGHEAD -		
26. TYPE ELECTRIC AND OTHER LOGS RUN GR. Density, Nuclear Induction Electric, SP		27. WAS WELL CORED No		25. WAS DIRECTIONAL SURVEY MADE No		
28. CASING RECORD (Report all strings set in well)						
CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED	
7"	26#	100'	8 3/4"	31.8 cu ft		
2 7/8"	6.4#	1464'	6 1/4"	383.5 cu ft		
29. LINER RECORD						
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)		
31. PERFORATION RECORD (Interval, size and number) 1046-56, 1204-1041 2) 1/8" JH			32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
			DEPTH INTERVAL (MD)			
			1041-1210			
			AMOUNT AND KIND OF MATERIAL USED			
			23000 gals. acid, 42000# 10/20 sand			
33. PRODUCTION						
DATE FIRST PRODUCTION 9-23-84		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Flowing				
DATE OF TEST 10-4-84		HOURS TESTED 34	CHOKE SIZE 12 1/4"	PROD'N. FOR TEST PERIOD →	WELL STATUS (Producing or shut-in) Shut in	
FLOW. TUBING PRESS. 70#	CASING PRESSURE 95#	CALCULATED 24-HOUR RATE →	OIL—BBL. 0	GAS—MCF. 68	WATER—BBL. 0	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Waiting on Connection		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

RDP Rite

TITLE

AREA ENGINEER

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

OPERATOR
OPERATOR

HARRINGTON RESOURCE AREA

RV

Smm

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	MEAN. DEPTH	TRUE VERT. DEPTH
Fruitland	1038	1056	Producing sand zone	Fruitland	1038	
APC	1085					