

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

5a. Indicate Type of Lease
State Fee

5. State Oil & Gas Lease No.

1a. TYPE OF WELL
OIL WELL GAS WELL DRY OTHER _____

b. TYPE OF COMPLETION
NEW WELL WORK OVER DEEPEN PLUG BACK DIFF. RESVR. OTHER Convert to Water-Well

7. Unit Agreement Name

8. Farm or Lease Name
T. L. Roach

9. Well No.
1

10. Field and Pool, or Wildcat
Wildcat

2. Name of Operator
HNG Resources, Inc.

3. Address of Operator
P. O. Box 1188, Houston, Texas 77001

4. Location of Well
UNIT LETTER H LOCATED 1980 FEET FROM THE North LINE AND 660 FEET FROM

THE East LINE OF SEC. I TWP. 29N RGE. 25E NMPM

12. County
Colfax

15. Date Spudded 6/28/79 16. Date T.D. Reached 7/19/79 17. Date Compl. (Ready to Prod.) _____ 18. Elevations (DF, RKB, RT, GR, etc.) 6660' GR 19. Elev. Casinghead _____

20. Total Depth 3797 21. Plug Back T.D. 2100 22. If Multiple Compl., How Many _____ 23. Intervals Drilled By: Rotary Tools 0-3797 Cable Tools _____

24. Producing Interval(s), of this completion - Top, Bottom, Name _____ 25. Was Directional Survey Made _____

26. Type Electric and Other Logs Run
Compensated Density Compensated Neutron, Dual Induction-LateroLog 27. Was Well Gored _____

28. CASING RECORD (Report all strings set in well)

CASING SIZE	WEIGHT LB./FT.	DEPTH SET	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
<u>9 5/8"</u>	<u>32.30</u>	<u>348</u>	<u>12 1/4</u>	<u>200 sacks</u>	
<u>7"</u>	<u>20.00</u>	<u>2160</u>	<u>8 3/4</u>	<u>75 sacks</u>	

29. LINER RECORD

SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN

30. TUBING RECORD

SIZE	DEPTH SET	PACKER SET

31. Perforation Record (Interval, size and number)

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

DEPTH INTERVAL	AMOUNT AND KIND MATERIAL USED

33. PRODUCTION

Date First Production _____ Production Method (Flowing, gas lift, pumping - Size and type pump) _____ Well Status (Prod. 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 information shown on both sides of this form is true and complete to the best of my knowledge and belief.

SIGNED _____ TITLE Project Manager DATE August 16, 1984