

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.

5. LEASE DESIGNATION AND SERIAL NO.

USA (NM-04591)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Federal T

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

EK Yates 7-Rivers Queen

11. SEC. T., R., M., OR BLOCK AND SURVEY
OR AREA

Sec. 24, T18S, R33E

12. COUNTY OR
PARISH

Lea

13. STATE

NM

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL: OIL WELL ☒ GAS WELL ☐ DRY ☐ Other T.A. 'd

b. TYPE OF COMPLETION:

NEW
WELL ☐WORK
OVER ☒DEEP-
EN ☐PLUG
BACK ☒DIFF.
RESVR. ☒

Other

2. NAME OF OPERATOR

Mobil Producing TX. & N.M. Inc.

3. ADDRESS OF OPERATOR

Nine Greenway Plaza, Suite 2700, Houston, Texas 77046

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*

At surface 660'FNL & 660'FEL Sec.24, T18S, R33E

At top prod. interval reported below same as surface

At total depth same as surface

14. PERMIT NO.

DATE ISSUED

15. DATE SPUDDED

04/24/84

16. DATE T.D. REACHED

17. DATE COMPL. (Ready to prod.)

05/15/84

18. ELEVATIONS (DF, REB, RT, GE, ETC.)*

3958 GR, 3963 RKB

19. ELEV. CASINGHEAD

20. TOTAL DEPTH, MD & TVD

4398

21. PLUG, BACK T.D., MD & TVD

3650

22. IF MULTIPLE COMPL.,
HOW MANY*23. INTERVALS
DRILLED BY

ROTARY TOOLS

CABLE TOOLS

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*

3535-3575 Yates

25. WAS DIRECTIONAL
SURVEY MADE

26. TYPE ELECTRIC AND OTHER LOGS RUN

27. WAS WELL CORED

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

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
13-3/8	44#	120	Original Casing		
5-1/2	15.5#	4357	Undisturbed		

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	OPMA @ 3640	SN @ 3607

31. PERFORATION RECORD (Interval, size and number)

Perf @ 3730 (4 holes)
Perf @ 3528 (2 holes)
Perf W/1JSPF @ 3535-45, 3557-75
(30 holes)

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
4336-4393	Sqzd w/25x C cmt
4275-4225	Cmt Ret w/5x cmt cap
3730	Sqzd w/2000x C cmt
3700-3650	Cmt Ret w/5x cmt cap

33.* PRODUCTION

SEE REVERSE

DATE FIRST PRODUCTION

NONE

PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)

WELL STATUS (Producing or
shut-in)

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

Form 9-331

NEW MEXICO

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records

SIGNED

Paula A. Collins

TITLE

Authorized Agent

DATE

06/20/84

*(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.)

#32. continued from front:

3528	Sqzd w/100x C cmt
3535-3575	Acdzd w/4500 gals 15% NEA Fe foam 70 quality w/N2
	SWF/40,000 gals gelled 2% KCl fr wtr + 35,500# 20/40 sd +
	15,500# 10/20 sd.

37. SUMMARY OF POROUS ZONES:

SHOW ALL INTERVAL 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.	38. GEOLOGIC MARKERS		
				NAME	MEAS. DEPTH	TRUE VERT. DEPTH

RECEIVED
JUN 29 1984
O.C.B.
HOBBS OFFICE