

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other instructions on reverse side)

Form approved,
Budget Bureau No. 12-R355.5.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG*

1a. TYPE OF WELL: OIL WELL ☒ GAS WELL ☐ DRY ☐ Other ☐		5. LEASE DESIGNATION AND SERIAL NO. NM 01747	
b. TYPE OF COMPLETION: NEW WELL ☐ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☒ DIFF. RESVR. ☒ Other ☐		6. IF INDIAN, ALLOTTED OR TRIBE NAME	
2. NAME OF OPERATOR Marathon Oil Company		7. UNIT AGREEMENT NAME Lea Unit	
3. ADDRESS OF OPERATOR P.O. Box 2409 Hobbs, NM 88240		8. FARM OR LEASE NAME Lea Unit	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements) At surface 1980' FSL & 1980' FEL Sec. 12, T-20S, R-34E At top prod. interval reported below Same At total depth Same		9. WELL NO. 5	
14. PERMIT NO.		10. FIELD AND POOL, OR WILDCAT Lea Bone Spring	
DATE ISSUED		11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA Sec. 12, T-20S, R-34E	
15. DATE SPDCDD		12. COUNTY OR PARISH Lea	
16. DATE T.D. REACHED		13. STATE NM	
17. DATE COMPL. (Ready to prod.)		18. ELEVATIONS (DF, RKB, RT, GR, ETC.)*	
2-6-61		GR 3665, RKB 3683	
6-8-61		3665	
10-2-80		19. ELEV. CASINGHEAD	
20. TOTAL DEPTH, MD & TVD 14476		21. PLUG, BACK T.D., MD & TVD 9730	
22. IF MULTIPLE COMPL., HOW MANY*		23. INTERVALS DRILLED BY	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* Bone Spring 9600 - 9614		25. INTERVALS SURVEYED	
26. TYPE ELECTRIC AND OTHER LOGS RUN Gamma Ray/Sonic/Caliper, Induction & Micro Log		27. WELLS CORED	
28. CASING RECORD (Report all strings set in well)		29. LINER RECORD	
30. TUBING RECORD		31. PERFORATION RECORD (Interval, size and number) Bone Spring 9600 - 9614 w/2JSPF (15 holes)	
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.		33. PRODUCTION	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Sold		35. LIST OF ATTACHMENTS None	
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records		37. SIGNED C. C. Loochhoff	
38. TITLE U.S. GEOLOGICAL SURVEY Operations Superintendent		39. DATE 10-23-80	

*(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.)

Directional Survey, Formation Record and Logs filed upon original completion.

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
RECEIVED NOV 4 1980						