

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

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SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

5a. Indicate Type of Lease
State Fee XX

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 XX Re-entry

7. Unit Agreement Name

8. Farm or Lease Name
Toni

2. Name of Operator
Arrowhead Oil Corp.

3. Address of Operator
P. O. Box 548, Artesia, New Mexico 88210

9. Well No.
1

10. Field and Pool, or Wildcat
Wildcat

4. Location of Well
UNIT LETTER H LOCATED 1980 FEET FROM THE North LINE AND 660 FEET FROM
THE East LINE OF SEC. 22 TWP. 19-S RGE. 38-E NMPM

12. County
Lea

15. Date Spudded
Re-entered
12-26-86

16. Date T.D. Reached
Re-entry
1/5/87

17. Date Compl. (Ready to Prod.)
P&A 1/8/87

18. Elevations (DF, RKB, RT, GR, etc.)
3614' K.B.

19. Elev. Casinghead

20. Total Depth
Orig. TD 8000'
3541.41'

21. Plug Back T.D.
drilled out to
3541.41'

22. If Multiple Compl., How Many

23. Intervals Drilled By
Rotary Tools
Cable Tools

24. Producing Interval(s), of this completion - Top, Bottom, Name
NONE

25. Was Directional Survey Made

26. Type Electric and Other Logs Run
GR-PDC

27. Was Well Cored

28. All casing set by original operator - CEMENTING RECORD (Report all strings set in well)

CASING SIZE	WEIGHT LB./FT.	DEPTH SET	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
30"	50#	30'	26"	Redi-Mix	none
13-3/8"	40#	358	17-1/2"	375 sacks	none
8-5/8"	24#	3236'	12-1/4"	1150 sacks	none
5-1/2"	17#	8000.60	7-7/8"	1440 sacks	none

29. LINER RECORD

SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN

30. TUBING RECORD

SIZE	DEPTH SET	PACKER SET

31. Perforation Record (Interval, size and number)

3404' - 3409' (20 holes)
3346' - 3350' (10 holes)

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

DEPTH INTERVAL	AMOUNT AND KIND MATERIAL USED
3404 - 3409'	total 350 gallons 10% acetic
3346' - 3350'	total of 2350 gallons 15% nefe

33. PRODUCTION

Date First Production _____ Production Method (Flowing, gas lift, pumping - Size and type pump) _____ Well Status (Prod. or Shut-in)
Plugged & Abandoned

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
GR-PDC Log

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 James A. ... TITLE Agent DATE 1/28/87