

REVISED

Form C-105
Revised 11-1-8

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LAND OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION
WELL COMPLETION OR RECOMPLETION REPORT AND LOG

6a. Indicate Type of Lease
 State Fee
 6b. 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 _____

7. Unit Agreement Name
 8. Form or Lease Name
Bates
 9. Well No.
3
 10. Field and Pool, or Wildcat
Jalmat

2. Name of Operator
Doyle Hartman
 3. Address of Operator
P. O. Box 10426, Midland, Texas 79702

4. Location of Well
 UNIT LETTER **L*/K** LOCATED **1210** FEET FROM THE **West** LINE AND **1635** FEET FROM
 THE **South** LINE OF SEC. **20** TWP. **25S** RGE. **37E** N.M.P.M.

11. Locality
Lea

15. Date Spudded **9-3-31** 16. Date T.D. Reached **9-12-31** 17. Date Ready to Prod. **9-21-31** 18. Elevations (DF, RKB, RT, GR, etc.) **3040 GL** 19. Elev. Consumable **3051**

20. Total Depth **3481** 21. Plug Back T.D. **3470** 22. If Multiple Compl., How Many **---** 23. Intervals Drilled By **0-3481** Cable Tools _____

24. Producing interval(s), of this completion - Top, bottom, Name
2773-3337 w/17 (Yates-Seven Rivers)
 25. Was Directional Survey Made
Yes

26. Type Electric and Other Logs Run
CDL-DSN-GR and Guard-Foxo
 27. Was Well Cored
No

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

CASING SIZE	WEIGHT LB./ FT.	DEPTH SET	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
10 3/4	40.5	652	14 3/4	450 (circ)	None
5 1/2	17	3477	7 7/8	550 (circ)	None

29. LINER RECORD

SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN

30. TUBING RECORD

SIZE	DEPTH SET	PACKER SET
2 3/8	3452	---

31. Perforation Record (Interval, size and number)
17 holes with one shot each at: 2773, 2786, 2793, 2801, 2813, 2819, 2830, 2835, 2840, 2847, 2873, 2879, 3301, 3307, 3311, 3329, 3337

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

DEPTH INTERVAL	AMOUNT AND KIND MATERIAL USED
2773-3337	A/5000 15% MCA

33. PRODUCTION

Date First Production **9-19-31** Production Method (*Flowing, gas lift, pumping - Size and type pump*) **pumping** Well Status (*Prod. or Shut-in*) **Shut-in**

Date of Test	Hours Tested	Choke Size	Flow'n. For Test Period	Oil - BBL.	Gas - MCF	Water - BBL.	Gas - Oil Ratio
9-24-31	24	20/64	→	---	101	4	---

Flow Tubing Press.	Casing Pressure FCP=	Calculated 24-Hour Rate	Oil - Bbl.	Gas - MCF	Water - BBL.	Oil Gravity - API (Corr.)
---	32	→	---	101	4	---

34. Disposition of Gas (*Sold, used for fuel, vented, etc.*) **Vented** Test Witnessed By **Harold Swain**

35. List of Attachments
None

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 Larry A. Newmyer TITLE Engineer DATE 10-16-31

*Surface Location

Revised