

Form 3160-4  
(August 2007)UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENTFORM APPROVED  
OMB No. 1004-0137  
Expires: July 31, 2010

## WELL COMPLETION OR RECOMPLETION REPORT AND LOG

1a. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Dry <input type="checkbox"/> Other b. Type of Completion <input type="checkbox"/> New Well <input type="checkbox"/> Work Over <input type="checkbox"/> Deepen <input type="checkbox"/> Plug Back <input type="checkbox"/> Diff. Resvr. Other _____				5. Lease Serial No. NMNM96222	
2. Name of Operator SHACKELFORD OIL COMPANY    Contact: BRADY SHACKELFORD E-Mail: brady@choctawservices.com				6. If Indian, Allottee or Tribe Name	
3. Address    11417 W COUNTY ROAD 33 MIDLAND, TX 79707			3a. Phone No. (include area code) Ph: 432-682-9784		7. Unit or CA Agreement Name and No.
4. Location of Well (Report location clearly and in accordance with Federal requirements)*  At surface    SWSE 760FSL 1830FEL  At top prod interval reported below    SWSE 760FSL 1830FEL  At total depth    SWSE 760FSL 1830FEL				8. Lease Name and Well No. ORE IDA 14 FED 8  9. API Well No. 30-015-29277-00-S2	
14. Date Spudded 08/14/2019		15. Date T.D. Reached 09/24/2019		10. Field and Pool, or Exploratory CEDAR CANYON-DELAWARE  11. Sec., T., R., M., or Block and Survey or Area    Sec 14 T24S R29E Mer NMP  12. County or Parish EDDY    13. State NM	
16. Date Completed <input type="checkbox"/> D & A <input checked="" type="checkbox"/> Ready to Prod. 11/05/2019		17. Elevations (DF, KB, RT, GL)*			
18. Total Depth:    MD TVD		19. Plug Back T.D.:    MD    7588 TVD    7588		20. Depth Bridge Plug Set:    MD TVD	
21. Type Electric & Other Mechanical Logs Run (Submit copy of each) 300152927700S2				22. Was well cored? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Submit analysis) Was DST run? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Submit analysis) Directional Survey? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Submit analysis)	

## 23. Casing and Liner Record (Report all strings set in well)

Hole Size	Size/Grade	Wt. (#/ft.)	Top (MD)	Bottom (MD)	Stage Cementer Depth	No. of Sk. & Type of Cement	Slurry Vol. (BBL)	Cement Top*	Amount Pulled
17.500	13.375 H-40	48.0	0	355				0	
12.250	8.625 J-55	32.0	0	3127				0	
7.875	5.500 J-55	17.0	0	8340				0	

## 24. Tubing Record

Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)

## 25. Producing Intervals

Formation	Top	Bottom	Perforated Interval	Size	No. Holes	Perf. Status
A) DELAWARE	6662	6672	6432 TO 6446		28	OPEN
B)			6662 TO 6672		20	OPEN
C)						
D)						

## 26. Perforation Record

## 27. Acid, Fracture, Treatment, Cement Squeeze, Etc.

Depth Interval	Amount and Type of Material
6432 TO 6446	ACIDIZE WITH 2000 GALS OF ACID
6662 TO 6672	ACIDIZE WITH 2000 GALS OF ACID

## 28. Production - Interval A

Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
11/05/2019	10/25/2019	24		22.0	82.0	220.0			ELECTRIC PUMPING UNIT
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	
				22	82	220		POW	

## 28a. Production - Interval B

Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	

(See Instructions and spaces for additional data on reverse side)

ELECTRONIC SUBMISSION #495236 VERIFIED BY THE BLM WELL INFORMATION SYSTEM

\*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\*

## 28b. Production - Interval C

Date First Produced	Test Date	Hours Tested	Test Production →	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate →	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	

## 28c. Production - Interval D

Date First Produced	Test Date	Hours Tested	Test Production →	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate →	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	

29. Disposition of Gas(*Sold, used for fuel, vented, etc.*)

SOLD

## 30. Summary of Porous Zones (Include Aquifers):

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.

## 31. Formation (Log) Markers

Formation	Top	Bottom	Descriptions, Contents, etc.	Name	Top Meas. Depth
BONE SPRING				BONE SPRING	

## 32. Additional remarks (include plugging procedure):

## 33. Circle enclosed attachments:

- |   |                    |               |                       |
|---|--------------------|---------------|-----------------------|
| 1. Electrical/Mechanical Logs (1 full set req'd.)     | 2. Geologic Report | 3. DST Report | 4. Directional Survey |
| 5. Sundry Notice for plugging and cement verification | 6. Core Analysis   | 7 Other:      |                       |

## 34. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records (see attached instructions):

**Electronic Submission #495236 Verified by the BLM Well Information System.**  
**For SHACKELFORD OIL COMPANY, sent to the Carlsbad**  
**Committed to AFMSS for processing by DINAH NEGRETE on 06/18/2020 (20DCN0111SE)**

Name(*please print*) DON SHACKELFORDTitle PRESIDENT

Signature \_\_\_\_\_ (Electronic Submission)

Date 12/10/2019

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

**\*\* REVISED \*\* REVISED \*\* REVISED \*\* REVISED \*\* REVISED \*\* REVISED \*\* REVISED \*\***

**Revisions to Operator-Submitted EC Data for Well Completion #495236**

	<b>Operator Submitted</b>	<b>BLM Revised (AFMSS)</b>
Lease:	NMNM96222	NMNM96222
Agreement:		
Operator:	SHACKELFORD OIL CO 11417 W COUNTY RD 33 MIDLAND, TX 79707 Ph: 432-682-9784	SHACKELFORD OIL COMPANY 11417 W COUNTY ROAD 33 MIDLAND, TX 79707 Ph: 432.682.9784
Admin Contact:	BRADY SHACKELFORD CFO E-Mail: brady@choctawservices.com  Ph: 432-682-9784 Fx: 432-684-5026	BRADY SHACKELFORD CFO E-Mail: brady@choctawservices.com  Ph: 432-682-9784 Fx: 432-684-5026
Tech Contact:	DON SHACKELFORD PRESIDENT E-Mail: dg-shack@swbell.net  Ph: 432-682-9784 Fx: 432-684-5026	DON SHACKELFORD PRESIDENT E-Mail: dg-shack@swbell.net  Ph: 432-682-9784 Fx: 432-684-5026
Well Name: Number:	ORE IDA 14 FEDERAL 8	ORE IDA 14 FED 8
Location: State: County: S/T/R: Surf Loc:	NM EDDY COUNTY Sec 14 T24S R29E Mer 760FSL 1830FEL	NM EDDY Sec 14 T24S R29E Mer NMP SWSE 760FSL 1830FEL
Field/Pool:	DELAWARE	CEDAR CANYON-DELAWARE
Logs Run:		300152927700S2
Producing Intervals - Formations:	DELAWARE DELAWARE	DELAWARE
Porous Zones:		BONE SPRING
Markers:		BONE SPRING

**District I**  
1625 N. French Dr., Hobbs, NM 88240  
Phone:(575) 393-6161 Fax:(575) 393-0720  
**District II**  
811 S. First St., Artesia, NM 88210  
Phone:(575) 748-1283 Fax:(575) 748-9720  
**District III**  
1000 Rio Brazos Rd., Aztec, NM 87410  
Phone:(505) 334-6178 Fax:(505) 334-6170  
**District IV**  
1220 S. St Francis Dr., Santa Fe, NM 87505  
Phone:(505) 476-3470 Fax:(505) 476-3462

**State of New Mexico**  
**Energy, Minerals and Natural Resources**  
**Oil Conservation Division**  
**1220 S. St Francis Dr.**  
**Santa Fe, NM 87505**

CONDITIONS

Action 13425

**CONDITIONS OF APPROVAL**

Operator:	SHACKELFORD OIL CO	P.O. Box 10665	Midland, TX79702	OGRID:	20595	Action Number:	13425	Action Type:	C-105
OCD Reviewer									Condition
abustamante									None