

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE\*

(See other instructions on reverse side)

Form approved.  
Budget Bureau No. 42-R355.5.

5. LEASE DESIGNATION AND SERIAL NO.

Las Cruces 029426 (b)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

H. E. West "B"

9. WELL NO.

23

10. FIELD AND POOL, OR WILDCAT

Grayburg-Jackson Pool

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

Sec 3-T17S-R31E NMPM

12. COUNTY OR PARISH

Eddy

13. STATE

New Mexico

## WELL COMPLETION OR RECOMPLETION REPORT AND LOG \*

1a. TYPE OF WELL: OIL WELL ☐ GAS WELL ☐ DRY ☐ Other Water Injection

b. TYPE OF COMPLETION:

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

2. NAME OF OPERATOR

Sinclair Oil &amp; Gas Company

3. ADDRESS OF OPERATOR

520 E. Broadway, Hobbs, New Mexico

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

At surface 1980' from South and West Lines of Sec. 3-T17S-R31E  
Eddy Co., New Mexico.

At top prod. interval reported below

At total depth

14. PERMIT NO.

DATE ISSUED

15. DATE SPUDDED

3-8-64

16. DATE T.D. REACHED

3-21-64

17. DATE COMPL. (Ready to prod.)

3-29-64

Inject

18. ELEVATIONS (DF, RKB, RT, GR, ETC.)\*

3948 G.L.

19. ELEV. CASINGHEAD

20. TOTAL DEPTH, MD &amp; TVD

3557'

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

3454'

22. IF MULTIPLE COMPL., HOW MANY?

Dual Wtr Inj.

23. INTERVALS DRILLED BY

ROTARY TOOLS

CABLE TOOLS

3454'-3557'

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

Injection well

25. WAS DIRECTIONAL SURVEY MADE

No

26. TYPE ELECTRIC AND OTHER LOGS RUN

None

27. WAS WELL CORED

No

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

| CASING SIZE | WEIGHT, LB./FT. | DEPTH SET (MD) | HOLE SIZE | CEMENTING RECORD | AMOUNT CEMENT |
|-------------|-----------------|----------------|-----------|------------------|---------------|
| 8-5/8"      | 44              | 797'           | 10"       | 100 sks.         |               |
| 5"          | 11.5#           | 3456'          | 7"        | 100 sks.         |               |

29. LINER RECORD

| SIZE | TOP (MD) | BOTTOM (MD) | SACKS CEMENT | SCREEN (MD) | SIZE   | DEPTH SET (MD) | PACKER SET (MD) |
|------|----------|-------------|--------------|-------------|--------|----------------|-----------------|
| None |          |             |              |             | 2-3/8" | 3443'          | 3447'           |

31. PERFORATION RECORD (Interval, size and number)

Premier Formation  
3456-3557' (Open Hole)  
Metex Formation  
3374-84' w/ 20-1/2" holes  
SquareLake Formation  
3413-21' and 3429-35' 56-1/2" holes

ARTESIAN OFFICE

ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

| DEPTH INTERVAL (MD)   | AMOUNT AND KIND OF MATERIAL USED |
|-----------------------|----------------------------------|
| 3456-57'              | 250 Gal. acid                    |
| 3374-84'              | 250 Gal. acid                    |
| 3413-21' and 3429-35' |                                  |

33.\*

PRODUCTION

DATE FIRST PRODUCTION Water Injection PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) WELL STATUS (Producing or 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

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

SIGNED

TITLE

District Superintendent

DATE

4-7-64

\*(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 12:** 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 intervals, 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.

23: Submit a separate completion report on this form for each interval to be cemented (e.g., "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.)

| 37. SUMMARY OF POROUS ZONES:<br>SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF; AND ALL DRILL-STEM TESTS, INCLUDING<br>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          | TOP | TRUE VERT. DEPTH |
| Square Lake                                                                                                                                                                                                                          | 3413' | 3435'  | Oil                         |      |                      |     |                  |