

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.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL: OIL WELL ☒ GAS WELL ☐ DRY ☐ Other ☐		FEB 8 1979	
b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other ☐		U.S. GEOLOGICAL SURVEY ARTESIA, NEW MEXICO	
2. NAME OF OPERATOR WINDFOHR OIL COMPANY			
3. ADDRESS OF OPERATOR Box #198, Artesia, New Mexico 88210			
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements) At surface 1980' f. N. & 660' f. W. Lines, Sec. 1-17S-30E At top prod. interval reported below At total depth			
14. PERMIT NO. O. G. O. ARTESIA, OFFICE		15. DATE SPUDDED 10-13-78	
16. DATE T.D. REACHED 10-20-78		17. DATE COMPL. (Ready to prod.) 2-3-79	
18. ELEVATIONS (DF, RKB, BT, GR, ETC.)* 3728 KB		19. ELEV. CASINGHEAD 0-3200	
20. TOTAL DEPTH, MD & TVD 3200		21. PLUG, BACK T.D., MD & TVD 3163	
22. IF MULTIPLE COMPL., HOW MANY*		23. INTERVALS DRILLED BY →	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 2883-3153		25. WAS DIRECTIONAL SURVEY MADE No	
26. TYPE ELECTRIC AND OTHER LOGS RUN Gamma ray - BC Neutron and Cement Bond		27. WAS WELL CORED No	
28. CASING RECORD (Report all strings set in well)			
CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE
8-5/8	24#-J	486	12-1/4
4 1/2	9.5# J	3167	7-7/8
29. LINER RECORD		30. TUBING RECORD	
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*
			SCREEN (MD)
			SIZE
			DEPTH SET (MD)
			PACKER SET (MD)
			2-3/8 OD 3108
31. PERFORATION RECORD (Interval, size and number)			
Lower MeTex: 2883, 85, 87, 89, 91, 93 and 2905, 07, 09, 15, 17, 19, 21 and 23. Premier: 2981, 83, 85, 87, 93, 95, 97, 99 and 3005, 07, 09, 11 and 13. Lovington: 3141, 43, 45, 51 and 53.			
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED	
2883-3153		Acidize w/3918 gals. 15%.	
2883-3153		Frac/50,000 gals. gelled water + 46,000# sd. in 3 stages	
33.* PRODUCTION			
DATE FIRST PRODUCTION 2-4-79		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Pump	
DATE OF TEST 2-5-79		WELL STATUS (Producing or shut-in) Producing	
HOURS TESTED 24	CHOKE SIZE	PROD'N. FOR TEST PERIOD →	OIL—BBL. 69
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE →	GAS—MCF. 5
			WATER—BBL. 5
			OIL GRAVITY-API (CORR.)
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Sold			
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 <i>Ralph L. Gray</i>		TITLE Consulting Engineer	
DATE Feb. 8, 1979			

*(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.)

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 DEPTH
Grayburg Lower MeTex	2882	94		Salt	530	
Premier	2904	24		Red Sand	2311	
Lovington	2980	3016		Grayburg	2728	
	3139	54		San Andres	3016	
				Lovington Sand	3100	