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

5a. Indicate Type of Lease
State Fee

5. State Oil & Gas Lease No.
K-5548

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. Farm or Lease Name
State Tract 18

9. Well No.
1

10. Field and Pool, or Wildcat
Wildcat (Strat Test)

2. Name of Operator
Hughes & Hughes

3. Address of Operator
P. O. Box 649, Beeville, Texas 78102

4. Location of Well

UNIT LETTER **L** LOCATED **2,640** FEET FROM THE **South** LINE AND **100** FEET FROM
THE **West** LINE OF SEC. **32** TWP. **19 N** RGE. **12 W** NMPM

12. County
McKinley

15. Date Spudded
12-1-66

16. Date T.D. Reached
12-1-66

17. Date Compl. (Ready to Prod.)

18. Elevations (DF, RKB, RT, GR, etc.)
6481 Ground

19. Elev. Casinghead

20. Total Depth
577'

21. Plug Back T.D.

22. If Multiple Compl., How Many

23. Intervals Drilled By
Surface-TD

24. Producing Interval(s), of this completion - Top, Bottom, Name

25. Was Directional Survey Made
No

26. Type Electric and Other Logs Run
Correlation Electric Logger

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 |
|-------------|----------------|-----------|-----------|------------------|---------------|
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

29. LINER RECORD

| SIZE | TOP | BOTTOM | SACKS CEMENT | SCREEN |
|------|-----|--------|--------------|--------|
| | | | | |
| | | | | |
| | | | | |

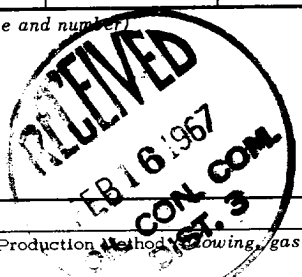
30. TUBING RECORD

| SIZE | DEPTH SET | PACKER SET |
|------|-----------|------------|
| | | |
| | | |
| | | |

31. Perforation Record (Interval, size and number)

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

| DEPTH INTERVAL | AMOUNT AND KIND MATERIAL USED |
|---------------------|-------------------------------|
| Plugged | |
| 100'-Surface | 3 sz cement |
| | |
| | |



33. PRODUCTION

Date First Production

Production Method (Flowing, gas lift, pumping - Size and type pump)

Well Status (Prod. 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 information shown on both sides of this form is true and complete to the best of my knowledge and belief.

SIGNED *A.D. Baker* TITLE **Office Manager** DATE **12-21-66**

