

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other in-
structions 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 _____		
b. TYPE OF COMPLETION:		NEW WELL ☒	WORK OVER ☐	DEEP-EN ☐	PLUG BACK ☐	DIFF. RESVR. ☐	Other _____
2. NAME OF OPERATOR Cities Service Company						7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR P.O. Box 1919, Midland, Texas 79702						8. FARM OR LEASE NAME Federal E	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements) At surface 480' FNL & 2200' FWL At top prod. interval reported below Same as above At total depth Same as above						9. WELL NO. 4	
10. FIELD AND POOL, OR WILDCAT Undesignated Entrada						11. SEC. T., R., M., OR BLOCK AND SURVEY OR AREA Sec. 28-T19N-R5W	
12. PERMIT NO. _____ DATE ISSUED 5-3-82						13. STATE New Mexico	
15. DATE SPUDDED 6-22-82		16. DATE T.D. REACHED 7-2-82		17. DATE COMPL. (Ready to prod.)		18. ELEVATIONS (DT, RKB, RT, GR, ETC.)* 6698' GR	
19. ELEV. CASINGHEAD		20. TOTAL DEPTH, MD & TVD 5222'		21. PLUG, BACK T.D., MD & TVD		22. IF MULTIPLE COMPL., HOW MANY*	
23. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)						24. WAS DIRECTIONAL SURVEY MADE No	
25. TYPE ELECTRIC AND OTHER LOGS RUN No logs were run.						26. WAS WELL CORED No	
29. CASING RECORD (Report all strings set in well)							
CASING SIZE		WEIGHT, LB./FT.		DEPTH SET (MD)		HOLE SIZE	
9-5/8		32.3		219'		13-1/2"	
30. CEMENTING RECORD							
				185 sacks		AMOUNT PULLED circulated	
31. LINER RECORD							
SIZE		TOP (MD)		BOTTOM (MD)		SACKS CEMENT*	
32. TUBING RECORD							
SIZE		DEPTH SET (MD)		PACKER SET (MD)			
33. PRODUCTION							
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Well plugged and abandoned 7-5-82				WELL STATUS (Producing or shut-in)	
DATE OF TEST		HOURS TESTED		CHOKE SIZE		PROD'N. FOR TEST PERIOD	
FLOW. TUBING PRESS.		CASING PRESSURE		CALCULATED 24-HOUR RATE		OIL—BBL.	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)						TEST WITNESSED BY	
35. LIST OF ATTACHMENTS Deviation Survey							
36. I hereby certify that the foregoing and attached information is complete and correct as determined from a							
SIGNED		E. J. M. Startz		TITLE		Reg. Oper. Mgr. - Prod.	
						DATE 7-9-82	

*(See Instructions and Spaces for Additional Data on Reverse Side)

FARMINGTON DISTRICT

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	NAME	MEAS. DEPTH TOP TRUE VERT. DEPTH
LMCP		Todilto	5140'
15 min IF		Entrada	5217'
60 min ISIP			
60 min FP			
120 min FSIP			
FMCP			
BHT			

RAN DRILL STEM TEST AS FOLLOWS:		DESCRIPTION, CONTENTS, ETC.
BOTTOM	TOP	
Top Chart @ 5181'	Bottom Chart @ 5219'	
2485#	2485#	
318-1525	325-1499	
1782	1769	
1593-1782	1566-1769	
1796	1796	
2444	2458	
1580F	1580 F	