

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 ☐		14. PERMIT NO. -----		DATE ISSUED 7-15-64	
b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other ☐		15. DATE SPUDDED 8-29-64		16. DATE T.D. REACHED 9-5-64	
2. NAME OF OPERATOR Coastal States Gas Producing Company		17. DATE COMPL. (Ready to prod.) 9-13-64		18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 4322' GR	
3. ADDRESS OF OPERATOR P. O. Box 385, Abilene, Texas		19. ELEV. CASINGHEAD 4500'		20. TOTAL DEPTH, MD & TVD 4500'	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 1980' from North line & 664' from East line, At top prod. interval reported below Sec 29, T-9S, R-33E, Lea County, At total depth New Mexico		21. PLUG, BACK T.D., MD & TVD -----		22. IF MULTIPLE COMPL., HOW MANY? -----	
5. LEASE DESIGNATION AND SERIAL NO. NM-058102		23. INTERVALS DRILLED BY -----		24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 4435-39' (San Andres)	
6. IF INDIAN, ALLOTTEE OR TRIBE NAME -----		25. WAS DIRECTIONAL SURVEY MADE Yes		26. TYPE ELECTRIC AND OTHER LOGS RUN Gamma Ray-Neutron & Cement Bond	
7. UNIT AGREEMENT NAME -----		27. WAS WELL CORED No		28. CASING RECORD (Report all strings set in well)	
8. FARM OR LEASE NAME Gonzales Federal		29. LINER RECORD		30. TUBING RECORD	
9. WELL NO. 2-29		31. PERFORATION RECORD (Interval, size and number) 4435-39', two jet shots/ft.		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC. 4435-39' 1000 Gals BDA	
10. FIELD AND POOL, OR WILDCAT Flying "M" (San Andres)		33. PRODUCTION DATE FIRST PRODUCTION 8-14-64 PRODUCTION METHOD Pumping WELL STATUS Producing		34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Vented	
11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA 29, 9S, 33E		35. LIST OF ATTACHMENTS 9-331		36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records	
12. COUNTY OR PARISH Lea		36. SIGNED <i>John P. Howard</i>		36. TITLE Production Superintendent	
13. STATE New Mexico		36. DATE September 15, 1964		36. TEST WITNESSED BY John Witherspoon	

*(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 83, 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 VERT. DEPTH
Queen	2970'	3010'	Limestone w/ sd streaks (Dense)	Queen	2970'
San Andres	3665'	4510'	Dolomite w/ Good Oil Show @ 4470-90'	San Andres	3665'