

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.

0436118

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Amoco Federal

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Wildcat

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

Sec. 19, T-5-S, R-34-E

12. COUNTY OR PARISH

Roosevelt

13. STATE

New Mexico

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 **P & A**

2. NAME OF OPERATOR

Dalton H. Cobb

3. ADDRESS OF OPERATOR

1300 Gihls Tower West Midland, Texas 79701

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

At surface **1980' FEL & 1650' FSL, Section 19, T-5-S, R-34-E**

At top prod. interval reported below

Same

At total depth

Same

14. PERMIT NO. _____ DATE ISSUED _____

15. DATE SPUDDED **8-31-73** 16. DATE T.D. REACHED **10-4-73** 17. DATE COMPL. (Ready to prod.) _____ 18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* **4323' GR** 19. ELEV. CASINGHEAD **4323' GR**

20. TOTAL DEPTH, MD & TVD **8200' MD** 21. PLUG, BACK T.D., MD & TVD **P & A** 22. IF MULTIPLE COMPL., HOW MANY* _____ 23. INTERVALS DRILLED BY _____ ROTARY TOOLS **82'-8200'** CABLE TOOLS **0'-82'**

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* _____ 25. WAS DIRECTIONAL SURVEY MADE **No**

26. TYPE ELECTRIC AND OTHER LOGS RUN **GR Density, Dual Induction** 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 PULLED
20"	94#	30'	26"	3 yds Redi-Mix	-0-
12 3/4"	24#	347'	17 1/2"	375 SK Class 'C'	-0-
8 5/8"	24#	3575'	11"	350 SK Class 'C'	-0-

29. LINER RECORD 30. TUBING RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)

31. PERFORATION RECORD (Interval, size and number) 32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED

33.* PRODUCTION

DATE FIRST PRODUCTION _____ PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) _____ WELL STATUS (Producing or shut-in) **Producing**

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, or 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 **Dalton H. Cobb** TITLE **Operator** DATE **10-30-73**

*(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	TOP TRUE VERT. DEPTH
Yates	2173'	2248'	Sand	San Andres	3193'	3193'
Queen	2790'	2800'	Sand	Abo	6580'	6580'
San Andres	4074'	4105'	Dolomite	Detrital	7790'	7790'
Glorieta	4440'	4510'	Lime			
Wolfcamp	7270'	7280'	Lime			
Hueco	7324'	7335'	Lime			