

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.

LC 069276

6. INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Hudson "29" Federal

9. WELL NO.

#2

10. FIELD AND POOL, OR WILDCAT

Undesignated

11. SEC. T. R., M., OR BLOCK AND SURVEY
OR AREASection 29, T-18-S,
R-33-E.12. COUNTY OR
PARISH

Lea

13. STATE

N.M.

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

PENNZOIL UNITED, INC.

3. ADDRESS OF OPERATOR

P. O. Drawer 1828 - Midland, Texas 79701

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

At surface

1980' FSL & 1980' FWL of Section 29, T-18-S, R-33-E.

At top prod. interval reported below

At total depth

14. PERMIT NO.

DATE ISSUED

15. DATE SPUDDED

9-30-68

16. DATE T.D. REACHED

12-5-68

17. DATE COMPL. (Ready to prod.)

12-22-68

18. ELEVATIONS (DF, RKB, RT, GR, ETC.)*

3783 R.K.B.

19. ELEV. CASINGHEAD

3766

20. TOTAL DEPTH, MD & TVD

13,575' T.D.

21. PLUG, BACK T.D., MD & TVD

13,540' P.B.T.D.

22. IF MULTIPLE COMPL.,
HOW MANY*

--

23. INTERVALS
DRILLED BY

ROTARY TOOLS

CABLE TOOLS

ALL

NONE

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*

Producing Interval - 13283-304, 13435-436, 13485-515 - Morrow

25. WAS DIRECTIONAL
SURVEY MADE

NO

26. TYPE ELECTRIC AND OTHER LOGS RUN

Gamma Ray-Sonic, IES, Microlog

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
13-3/8"	48#	415	17-1/2	360 sx.	None
8-5/8"	32#	4351	11	735 sx.	None
4-1/2"	11.6# & 13.5#	13575	7-7/8	500 sx.	None

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
	None Used				2-3/8 EUE	13199	12254

31. PERFORATION RECORD (Interval, size and number)

Perforated One hole @ following depths:
13283, 288, 293, 298, 304, 435, 485, 488,
493, 496, 504, 509, 513 and 515'. - Perf.
2 holes @ 13437, 439, 441, 443, 459, 460,
462 and 464'.

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
Natural	Completion.

33.* PRODUCTION

DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)				WELL STATUS (Producing or shut-in)	
12-22-68		Flowing (See N.M. Form C-122 Attached)				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.)

To be sold to Phillips Petroleum Company

TEST WITNESSED BY

Mr. Joe Coleman

35. LIST OF ATTACHMENTS

DST Data, Logs, Hole deviation data

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records

SIGNED

TITLE

Manager of Drilling & Production

DATE

1-3-69

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

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 38, below regarding separate reports for separate completions.

tion 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 3c.

Item 7. 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.

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 production from each interval zone.

Item 29: "Stack's Cement". Attached supplemental records for this well should show the following:
For each additional interval to be separately produced, showing the additional data pertinent to such interval.
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 interval, or intervals, top(s), bottom(s), and in item 27 show the producing formation.

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.)

DEPTH INTERVAL TESTED, CUSHION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES

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