

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 <input type="checkbox"/>	GAS WELL <input type="checkbox"/>	DRY <input checked="" type="checkbox"/>	Other _____										
b. TYPE OF COMPLETION:		NEW WELL <input checked="" type="checkbox"/>	WORK OVER <input type="checkbox"/>	DEEP-EN <input type="checkbox"/>	PLUG BACK <input type="checkbox"/>	DIFF. RESVR. <input type="checkbox"/>	Other _____								
2. NAME OF OPERATOR						7. UNIT AGREEMENT NAME									
Humble Oil & Refining Company						5. FARM OR LEASE NAME									
3. ADDRESS OF OPERATOR						Federal-Cherokee "E"									
P. O. Box 1600, Midland, Texas 79701						9. WELL NO.									
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*						1									
At surface 2,200' FSL & 440' FEL of Section 19						10. FIELD AND POOL, OR WILDCAT									
At top prod. interval reported below Same						Wildcat									
At total depth Same						11. SEC. T., R., M., OR BLOCK AND SURVEY OR AREA									
Section 19 T-16-N, R-36-E						12. COUNTY OR PARISH									
14. PERMIT NO.						13. STATE									
- -						Quay New Mexico									
15. DATE SPUDDED		16. DATE T.D. REACHED		17. DATE COMPL. (Ready to prod.)		18. ELEVATIONS (DF, R&B, RT, GR, ETC.)*		19. ELEV. CASINGHEAD							
11-9-71		11-13-71		Dry Hole		4,282 GR		- -							
20. TOTAL DEPTH, MD & TVD		21. PLUG, BACK T.D., MD & TVD		22. IF MULTIPLE COMPL., HOW MANY*		23. INTERVALS DRILLED BY		ROTARY TOOLS CABLE TOOLS							
1,275'		- -		- -		→		0 - 1,275' - -							
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*								25. WAS DIRECTIONAL SURVEY MADE							
Dry Hole								No							
26. TYPE ELECTRIC AND OTHER LOGS RUN								27. WAS WELL CORED							
None								Yes							
28. CASING RECORD (Report all strings set in well)															
CASING SIZE		WEIGHT, LB./FT.		DEPTH SET (MD)		HOLE SIZE		CEMENTING RECORD		AMOUNT PULLED					
7-5/8"		26.4#		176'		9-7/8"		100 sx		None					
29. LINER RECORD										30. TUBING RECORD					
SIZE		TOP (MD)		BOTTOM (MD)		SACKS CEMENT*		SCREEN (MD)		SIZE		DEPTH SET (MD)		PACKER SET (MD)	
None															
31. PERFORATION RECORD (Interval, size and number)										32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.					
None										DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED			
										None					
33.* PRODUCTION															
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)						WELL STATUS (Producing or shut-in)							
Dry Hole		- -						P&A 11-14-71							
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 foregoing and attached information is complete and correct as determined from all available records															
SIGNED		<u>D. L. Clemmer</u>				TITLE		Proration Specialist		DATE		11-17-71			
		D. L. Clemmer													

*(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 16: Indicate which elevation is used as reference (where not otherwise shown) for depth measurements given in the 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 completions), so state in item 22, and in item 24 show the production 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 POROSITY ZONES:

SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF; CORREL INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CUSHION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH	TRUE VERT. DEPTH
Sand & Red Bed	0	184		Lower Santa	400	
Sand, Shale, & Red Bed	184	563		Rosa Sand	560	
Sand & Shale	563	1157		Permian	875	
Dolo & Salt	1157	1216		Sand Andres		
Dolomite	1216	1275 T.D.				
Core No. 1 from 1107' to 1157', Cut 50', recovered 9' of salt, no show of oil or gas.						

38.

GEOLOGIC MARKERS

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

NM 13561

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> Dry		7. UNIT AGREEMENT NAME	
2. NAME OF OPERATOR Humble Oil & Refining Company		8. FARM OR LEASE NAME Federal - Cherokee "E"	
3. ADDRESS OF OPERATOR P. O. Box 1600, Midland, Texas 79701		9. WELL NO. 1	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 2,200' FSL & 440' FEL		10. FIELD AND POOL, OR WILDCAT Wildcat	
14. PERMIT NO. Approved 8-19-71		15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4,282' GR	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 19, T-16-N, R-36-E	
		12. COUNTY OR PARISH Quay	
		13. STATE New Mexico	

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐FRACTURE TREAT ☐SHOOT OR ACIDIZE ☐REPAIR WELL ☐(Other) ☐PULL OR ALTER CASING ☐MULTIPLE COMPLETE ☐ABANDON* ☐CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☒FRACTURE TREATMENT ☐SHOOTING OR ACIDIZING ☐(Other) Commence drilling operations

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

REPAIRING WELL ☐ALTERING CASING ☐ABANDONMENT* ☒

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

MIRU. Spudded 9-7/8" hole at 5:00 PM 11-9-71. Drilled to 184', rigged up and ran 168' of 7-5/8" OD 26.4# casing, set at 176", cemented with 100 sacks, circulated approximately 35 sacks of cement. WOC 13 hours. Tested 7-5/8" casing w/300 psi for 30 minutes, test O.K. Resumed drilling and drilled to 1107'. Cut Core #1 from 1,107' to 1,157', cut 50', rec. 9' of salt, no show of oil or gas. Resumed drilling, lost returns, dry drilled to a TD of 1,275'. Plugged and abandoned well as follows:

Plug No. 1 25 sx Class "H" Cement from 897' to 780'.
Plug No. 2 25 sx Class "H" Cement from 417' to 300'.
Plug No. 3 35 sx Class "H" Cement from 177' to surface.

Placed mud laden fluid between each plug, installed dry hole marker. Job complete at 10:00 AM 11-14-71 FRR & FRW.

18. I hereby certify that the above is true and correct

SIGNED

D. L. Clemmer
D. L. Clemmer

TITLE

Proration SpecialistDATE 11-17-71

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side