

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

Form C-105  
Revised 10-1-78

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

5a. Indicate Type of Lease	
State <input type="checkbox"/>	Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.	

1a. TYPE OF WELL		OIL WELL <input type="checkbox"/>		GAS WELL <input type="checkbox"/>		DRY <input checked="" type="checkbox"/>		OTHER <u>JUNKED &amp; ABANDONED</u>		7. Unit Agreement Name	
b. TYPE OF COMPLETION		NEW WELL <input type="checkbox"/>		WORK OVER <input type="checkbox"/>		DEEPEN <input type="checkbox"/>		PLUG BACK <input type="checkbox"/>		DIFF. RESVR. <input type="checkbox"/>	
2. Name of Operator		BRUCE WILSON		8. Farm or Lease Name		JUDD		9. Well No.		1	
3. Address of Operator		Rt 2 Box F-231, MORIARITY NM		10. Field and Pool, or Wildcat		WILDCAT		11. County		TUCUMAN	
4. Location of Well		UNIT LETTER <u>I</u> LOCATED <u>1691</u> FEET FROM THE <u>SOUTH</u> LINE AND <u>257</u> FEET FROM		12. County		TUCUMAN		13. Date Spudded		6-15-87	
15. Date Spudded		6-15-87		16. Date T.D. Reached		6-25-87		17. Date Compl. (Ready to Prod.)		18. Elevations (DF, RKB, RT, GR, etc.)	
20. Total Depth		500'		21. Plug Back T.D.				22. If Multiple Compl., How Many		23. Intervals Drilled By	
24. Producing Interval(s), of this completion - Top, Bottom, Name		N/A		25. Was Directional Survey Made		NO		26. Type Electric and Other Logs Run		N/A	
27. Was Well Cored		NO		28. CASING RECORD (Report all strings set in well)				29. LINER RECORD		30. TUBING RECORD	
CASING SIZE		WEIGHT LB./FT.		DEPTH SET		HOLE SIZE		CEMENTING RECORD		AMOUNT PULLED	
N/A											
SIZE		TOP		BOTTOM		SACKS CEMENT		SCREEN		PACKER SET	
N/A											
31. Perforation Record (Interval, size and number)		N/A		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.							
DEPTH INTERVAL		AMOUNT AND KIND MATERIAL USED									
33. PRODUCTION		Date First Production		Production Method (Flowing, gas lift, pumping - Size and type pump)		Well Status (Prod. or 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.	
34. Disposition of Gas (Sold, used for fuel, vented, etc.)		Test Witnessed By									
35. List of Attachments											
36. I hereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief.											
SIGNED <u>Bruce Wilson</u>		TITLE <u>Owner</u>		DATE <u>9-6-87</u>							