

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 ☐ Fee ☒

5. State Oil & Gas Lease No.

1a. TYPE OF WELL
OIL WELL ☒ GAS WELL ☐ DRY ☒ OTHER _____

b. TYPE OF COMPLETION
NEW WELL ☒ WORK OVER ☐ DEEPEN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ OTHER _____

7. Unit Agreement Name

8. Farm or Lease Name
STUDD

9. Well No.
JUD #1-X

10. Field and Pool, or Wildcat
WILDCAT

2. Name of Operator
BRUCE WILSON

3. Address of Operator
RT 2 BOX E-231 MORRIS, N.M. 87801

4. Location of Well
UNIT LETTER I LOCATED 1691 FEET FROM THE 15 LINE AND 767 FEET FROM

12. County
TORRELL

THE E LINE OF SEC. 6 TWP. 3N RGE. 7E NMPM

15. Date Spudded 6-87 16. Date T.D. Reached 8-87 17. Date Compl. (Ready to Prod.) 4-87 18. Elevations (DF, RKB, RT, GR, etc.) 6528 19. Elev. Casinghead

20. Total Depth 2800' 21. Plug Back T.D. #2503 22. If Multiple Compl., How Many 4 23. Intervals Drilled By: Rotary Tools ☒ Cable Tools _____

24. Producing Interval(s), of this completion - Top, Bottom, Name
NONE

25. Was Directional Survey Made
NO

26. Type Electric and Other Logs Run
ELECTRICAL RESISTIVITY, CALIPER, S.P., GAMMA RAY

27. Was Well Cored
NO

28. CASING RECORD (Report all strings set in well)

CASING SIZE	WEIGHT LB./FT.	DEPTH SET	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
4 1/2"		2503'	6 1/2"	200 SACKS(?)	NONE
10 1/2"		450'		150 SACKS(?)	NONE

29. LINER RECORD

SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN
6 5/8"	SURFACE	700'	0	

30. TUBING RECORD

SIZE	DEPTH SET	PACKER SET
2 3/8"	2440	2400
2 1/2"	2240	2200

31. Perforation Record (Interval, size and number)

2140-42 8 SHOTS
2140-42 12 SHOTS
1876-82 12 SHOTS
1628-34 12 SHOTS

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

DEPTH INTERVAL	AMOUNT AND KIND MATERIAL USED
2140-42	SHOT & ACID 1200
2140-42	" "
1876-82	" "
1628-34	" "

33. PRODUCTION

Date First Production NONE Production Method (Flowing, gas lift, pumping - Size and type pump) _____ Well Status (Prod. or Shut-in) P.A. S/B/O OF OIL & GAS

Date of Test	Hours Tested	Choke Size	Prod'n. For Test Period	Oil - Bbl.	Gas - MCF	Water - Bbl.	Gas - Oil Ratio

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 Bruce Wilson TITLE OPERATOR DATE 3-25-88