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# NEW MEXICO OIL CONSERVATION COMMISSION WELL COMPLETION OR RECOMPLETION REPORT AND LOG

Form O-113  
Revised 1-1-61

1. Indicate Type of Lease	
State <input type="checkbox"/>	Fee <input checked="" type="checkbox"/>
2. State Oil & Gas Lease No.	

1a. TYPE OF WELL				7. Unit Agreement Name			
OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> DRY <input checked="" type="checkbox"/> OTHER _____ 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"/> OTHER _____				None			
2. Name of Operator				8. Farm or Lease Name			
M. H. Farr				M. H. Farr			
3. Address of Operator				9. Well No.			
P. O. Box 1697 Amarillo, Texas				No. 1			
4. Location of Well				10. Field and Pool, or Wildcat			
				Wildcat			
UNIT LETTER _____ LOCATED 1845 FEET FROM THE North LINE AND 1476 FEET FROM _____				11. County			
THE East LINE OF SEC. 6 TWP. 31N RGE. 34E NMPM				Union			
15. Date Spudded	16. Date T.D. Reached	17. Date Compl. (Ready to Prod.)	18. Elevations (DF, RKB, RT, GR, etc.)	19. Elev. Casinghead			
9-19-66	1-7-67	Dry	4753				
20. Total Depth	21. Plug Back T.D.	22. If Multiple Compl., How Many	23. Intervals Drilled By	Rotary Tools	Cable Tools		
780	None	None	→	780			
24. Producing Interval(s), of this completion - Top, Bottom, Name					25. Was Directional Survey Made		
None					No		
26. Type Electric and Other Logs Run					27. Was Well Cored		
None					No		
28. CASING RECORD (Report all strings set in well)							
CASING SIZE	WEIGHT LB./FT.	DEPTH SET	HOLE SIZE	CEMENTING RECORD		AMOUNT PULLED	
8 5/8	20#	50'	10"	Circulated to top		None	
5 1/2	15#	300'	6 7/8	Circulated to top		None	
29. LINER RECORD							
SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN	30. TUBING RECORD		
None					SIZE	DEPTH SET	PACKER SET
						None	
31. Perforation Record (Interval, size and number)				32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
None				DEPTH INTERVAL      AMOUNT AND KIND MATERIAL USED None			
33. PRODUCTION							
Date First Production		Production Method (Flowing, gas lift, pumping - Size and type pump)			Well Status (Prod. or Shut-in)		
None		None			Plugged		
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 information shown on both sides of this form is true and complete to the best of my knowledge and belief.							
SIGNED		TITLE			DATE		
M. H. Farr		Owner			12/12/70		