

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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.	

7. Unit Agreement Name

8. Farm or Lease Name

9. Well No.

10. Field and Pool, or Wildcat

12. County

12. County

12. County

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12. County

1a. TYPE OF WELL

b. TYPE OF COMPLETION

2. Name of Operator

3. Address of Operator

4. Location of Well

UNIT LETTER

THE EAST LINE OF SEC. 13

15. Date Spudded

20. Total Depth

24. Producing interval(s), of this completion - Top, Bottom, Name

26. Type Electric and Other Logs Run

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

WEIGHT LB./FT.

DEPTH SET

HOLE SIZE

CEMENTING RECORD

AMOUNT PULLED

29. LINER RECORD

SIZE

TOP

BOTTOM

SACKS CEMENT

SCREEN

30. TUBING RECORD

SIZE

DEPTH SET

PACKER SET

31. Perforation Record (Interval, size and number)
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32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.
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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.

Oil Gravity - API (Corr.)

34. Disposition of Gas (Sold, used for fuel, vented, etc.)
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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 Jim WilsonTITLE 10-2-83DATE GEOLOGIST