

Submit to Appropriate
District Office
State Lease - 6 copies
Fee Lease - 5 copies
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brucos Rd., Aztec, NM 87410

State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

OIL CONSERVATION FORM 9-1991 DIVISION
RECEIVED

WELL AP NO.
3080 211 20 24148 49

5. Indicate Type of Lease
STATE ☐ FEE ☒

6. State Oil & Gas Lease No.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

1a. Type of Well: OIL WELL ☐ GAS WELL ☒ DRY ☐ OTHER _____

b. Type of Completion: **CO₂**
NEW WELL ☐ WORK OVER ☐ DEEPEN ☐ PLUG BACK ☐ DIFF. RESER. ☐ OTHER _____

2. Name of Operator
Amoco Production Company

3. Address of Operator
P.O. Box 606 Clayton, New Mexico 88415

4. Well Location
Unit Letter **F**: **1969** Feet From The **West** Line and **1978** Feet From The **North** Line
Section **2** Township **21N** Range **33E** NMPM **Harding** County

8. Well No.
021F

9. Pool name or Wildcat
Tubb

10. Date Spudded **5/31/93** 11. Date T.D. Reached **8/6/93** 12. Date Compl. (Ready to Prod.) **8/6/93** 13. Elevations (DF & REB, RT, GR, etc.) **4796** 14. Elev. Casinghead

15. Total Depth **2450** 16. Plug Back T.D. **2450** 17. If Multiple Compl. How Many Zones? _____ 18. Intervals Drilled By: Rotary Tools **O-TD** Cable Tools

19. Producing Interval(s), of this completion - Top, Bottom, Name
2190-2450

20. Was Directional Survey Made
Yes

21. Type Electric and Other Logs Run
logs previously sent

22. Was Well Cased
NO

CASING RECORD (Report all strings set in well)

CASING SIZE	WEIGHT LB./FT.	DEPTH SET	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
8 5/8	24 #	685	12 1/4	450 SX	Circ.
4 1/2	EG	2190	7 7/8	325 SX	Circ.

LINER RECORD

SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN	25. TUBING RECORD SIZE	DEPTH SET	PACKER SET

26. Perforation record (interval, size, and number)
2190-2450 Open hole

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

DEPTH INTERVAL	AMOUNT AND KIND MATERIAL USED

PRODUCTION

28. Date First Production **N/A** Production Method (Flowing, gas lift, pumping - See and type pump) **Well PXA** Well Status (Prod. or Shut-in) **PXA**

Date of Test **8/5/93** Hours Tested **2** Choke Size _____ Prod'n For Test Period _____ Oil - Bbl _____ Gas - MCF **190** Water - Bbl _____ Gas - Oil Ratio _____

Flow Tubing Press. _____ Casing Pressure _____ Calculated 24-Hour Rate _____ Oil - Bbl _____ Gas - MCF **190** Water - Bbl _____ Oil Gravity - API - (Corr.) _____

29. Disposition of Gas (Sold, used for fuel, vented, etc.)
Vent

Test Witnessed By

30. List Attachments

31. 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

Signature

Billy E. Prichard

Printed Name

Billy E. Prichard

Title

Field Foreman Date **3/29/94**