

NEW MEXICO OIL CONSERVATION  
WELL COMPLETION OR RECOMPLETION REPORT

**RECEIVED**  
**SEP 18 1983**

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| U.S.G.S.    |
| LAND OFFICE |
| OPERATOR    |

Form No. 1  
Revised 1-78

1. Well Type: ☐ Oil ☒ Gas

2. Well Name: ☐ State ☐ Loc ☒

|                                                                                                                                                                             |                 |                                                                                                                                                                                                                         |                         |                                                |                   |                                                      |               |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------|------------------------------------------------|-------------------|------------------------------------------------------|---------------|
| 19. TYPE OF WELL                                                                                                                                                            |                 | OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> CO2 DRY <input type="checkbox"/> OTHER <input type="checkbox"/>                                                                          |                         | OIL CONSERVATION DIVISION<br>SANTA FE          |                   | 7. Well Acreage Name<br>BDCDGU                       |               |
| b. TYPE OF COMPLETION                                                                                                                                                       |                 | NEW WELL <input checked="" type="checkbox"/> WORK OVER <input type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input type="checkbox"/> DIFF. RESVR. <input type="checkbox"/> OTHER <input type="checkbox"/> |                         |                                                |                   | 8. Name of Lease Name<br>BDCDGU 1935                 |               |
| 2. Name of Operator<br>Amoco Production Company                                                                                                                             |                 |                                                                                                                                                                                                                         |                         |                                                |                   | 9. Well No.<br>081                                   |               |
| 3. Address of Operator<br>P. O. Box 68, Hobbs, NM 88240                                                                                                                     |                 |                                                                                                                                                                                                                         |                         |                                                |                   | 10. Field and Pool, or Wildcat<br>Und. Tubb          |               |
| 4. Location of well                                                                                                                                                         |                 |                                                                                                                                                                                                                         |                         |                                                |                   | 11. County<br>Union                                  |               |
| UNIT LETTER <u>J</u> LOCATED <u>1980</u> FEET FROM THE <u>South</u> LINE AND <u>1980</u> FEET FROM <u>East</u> LINE OF SEC. <u>8</u> TWP. <u>19-N</u> RGE. <u>35-E</u> NMPN |                 |                                                                                                                                                                                                                         |                         |                                                |                   |                                                      |               |
| 15. Date Spudded<br>4-19-81                                                                                                                                                 |                 | 16. Date T.D. Reached                                                                                                                                                                                                   |                         | 17. Date Compl. (Ready to Prod.)<br>P X A      |                   | 18. Elevations (DF, RAB, RI, GR, etc.)<br>4625' GL   |               |
| 20. Total Depth                                                                                                                                                             |                 | 21. Plug Back T.D.                                                                                                                                                                                                      |                         | 22. If Multiple Compl., How Many               |                   | 23. Intervals Drilled By<br>Rotary Tools Cable Tools |               |
| 24. Producing Interval(s), of this completion - Top, Bottom, Name                                                                                                           |                 |                                                                                                                                                                                                                         |                         |                                                |                   | 25. Was Directional Survey Made                      |               |
| 26. Type Electric and Other Logs Run                                                                                                                                        |                 |                                                                                                                                                                                                                         |                         |                                                |                   | 27. Was Well Cored                                   |               |
| 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"                                                                                                                                                                      | 24#             | 704'                                                                                                                                                                                                                    | 12-1/4"                 | 500 SX Class H                                 |                   | Circ. 50 SX                                          |               |
| 29. LINER RECORD                                                                                                                                                            |                 |                                                                                                                                                                                                                         |                         |                                                |                   |                                                      |               |
| SIZE                                                                                                                                                                        | TOP             | BOTTOM                                                                                                                                                                                                                  | SACKS CEMENT            | SCREEN                                         | 30. TUBING RECORD |                                                      |               |
|                                                                                                                                                                             |                 |                                                                                                                                                                                                                         |                         |                                                | SIZE              | DEPTH SET                                            | PACKER SET    |
| 31. Perforation Record (Interval, size and number)                                                                                                                          |                 |                                                                                                                                                                                                                         |                         | 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. Per 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 <u>Matthew</u>                                                                                                                                                       |                 |                                                                                                                                                                                                                         |                         | TITLE <u>Admin. Analyst</u>                    |                   | DATE <u>5-12-81</u>                                  |               |
| 0+2-NMOCD, SF 1-Hou 1-Susp 1-MKE 1-Amerada 1-UGI 1-Cities Svc.<br>1-Conoco 1-CO2 in Action 1-Excelsior 1-Sun Tex.                                                           |                 |                                                                                                                                                                                                                         |                         |                                                |                   |                                                      |               |