

O. C. C. COPY

SUBMIT IN DUPLICATE

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY(See other in-
structions on
reverse side)Form Approved.
Budget Bureau No. 42-R3555.

5. LEASE DESIGNATION AND SERIAL NO.

NM-0223201

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Amoco Federal

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Undesignated Dome Ranch
Grayburg (Premier)11. SEC. T. R., M., OR BLOCK AND SURVEY
OR AREASection 9,
T14S, R28E12. COUNTY OR
PARISH
Chaves13. STATE
NM

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1. TYPE OF WELL: OIL WELL ☐ GAS WELL ☒ DRY ☐ Other _____2. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESER. ☐ Other _____

3. NAME OF OPERATOR

E. L. Latham, Jr. and Roy G. Barton, Jr.

4. ADDRESS OF OPERATOR

P.O. Box 1392, Hobbs, New Mexico 88240

5. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*

At surface 660' From South and West Lines Sec 9 T14S

At top prod. interval reported below
R28E

At total depth

14. PERMIT NO.

DATE ISSUED

MAR 21 1977

16. DATE SPUNDED

2/1/77

16. DATE T.D. REACHED

2/8/77

17. DATE COMPL. (Ready to prod.)

2/8/77

18. ELEVATIONS (DF, RKB, RT, OR, ETC.)*

ARTESIA, OFFICE 3568' GL

19. ELEV. CASINGHEAD

3568'

20. TOTAL DEPTH, MD & TVD

1657'

21. PLUG, BACK T.D., MD & TVD

22. IF MULTIPLE COMPL.,
HOW MANY23. INTERVALS
DELETED BY

ROTARY TOOLS

CABLE TOOLS

1657'

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*

Top of Premier Sand @ 1651' to 1657'

MAR 18 1977

25. WAS DIRECTIONAL
SURVEY MADE

26. TYPE ELECTRIC AND OTHER LOGS RUN

Gamma Ray Neutron

U.S. GEOLOGICAL SURVEY

27. WAS WELL CORED

No

28.

CASING RECORD (Report for each casing)

ARTESIA, NEW MEXICO

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
8 5/8"	29#	212'		Circulated 100 Sx	
5 1/2"	15 1/2#	1623'		Circulated 250 Sx	

29.

LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					2 3/8"	1657'	

31. PREPARATION RECORD (Interval, size and number)

Open Hole 1623
1651' to 1657'

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED

33.*

PRODUCTION

DATE FIRST PRODUCTION PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) WELL STATUS (Producing or shut-in) Shut-In

DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
2/22/77	24	14/64	→		462		
FLOW, TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)	
443		→		530			

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)

TEST WITNESSED BY

35. LIST OF ATTACHMENTS

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records

SIGNED

E. L. Latham, Jr.

TITLE

Operator

DATE 3/15/77

*(See Instructions and Spaces for Additional Data on Reverse Side)

General: This form is designed for submitting a complete and correct well completion report and log on all types of lands and leases to either a Federal agency or a State agency, or both, pursuant to applicable Federal and/or State laws and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State office. See instructions on items 22 and 24, and 33, below regarding separate reports for separate completions.

tion and pressure tests, and directional surveys, should be attached hereto, to the extent required by applicable Federal and/or State laws and regulations. All attachments should be listed on this form, see item 35.

Item 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

Item 18: Indicate which elevation is used as reference (where not otherwise shown) for depth measurements given in other spaces on this form and in any attachments. Items 23 and 24: If this well is completed for separate production from more than one interval zone (multiple completion), so state in item 22, and in item 24 show the producing interval, or intervals, top(s), bottom(s) and name(s) (if any) for only the interval reported in item 33. Submit a separate report (page) on this form, adequately identified, for each additional interval to be separately produced, showing the additional data pertinent to such interval.

Item 29: "Sacks Cement": Attached supplemental records for this well should show the details of any multiple stage cementing and the location of the cementing tool.

Item 33: Submit a separate completion report on this form for each interval to be separately produced. (See instruction for items 22 and 24 above.)

*GPO, 782-9229