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

Form C-105
Revised 11-1-76

5a. Indicate Type of Lease	State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.	K 2114

14. TYPE OF WELL	OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> DRY <input type="checkbox"/> OTHER <input type="checkbox"/>
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"/>

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NOV 7 1979

2. Name of Operator	Dr. G. Co. ✓ Fred Pool, Jr.
3. Address of Operator	327 White Bldg. Roswell, N.M. 88201

**O. C. C.
ARTEBIA. OFFICE**

7. Unit Agreement Name	
8. Farm or Lease Name	Plains State
9. Well No.	4
10. Field and Pool, or Wildcat	E. Chisum, Und. S.A.

4. Location of Well	UNIT LETTER <u>K</u> LOCATED <u>2310</u> FEET FROM THE <u>S</u> LINE AND <u>2310</u> FEET FROM THE <u>W</u> LINE OF SEC. <u>16</u> TWP. <u>11S</u> RGE. <u>28E</u>
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12. County	Chaves
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15. Date Spudded	16. Date T.D. Reached	17. Date Compl. (Ready to Prod.)	18. Elevations (DF, RKB, RT, GR, etc.)	19. Elev. Casinghead
5-25-77	6-15-77	P & A 3-15-79	3678.0CL	3678.
20. Total Depth	21. Plug Back T.D.	22. If Multiple Compl., How Many	23. Intervals Drilled By	Rotary Tools <input checked="" type="checkbox"/> Cable Tools <input type="checkbox"/>
2389				

24. Production Interval(s), of this completion - Top, Bottom, Name	25. Was Directional Survey Made
	yes

26. Type Electric and Other Logs Run	27. Was Well Cored
Dual Laterolog and Tracer Survey	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	28#	303	11"	125 sx CL. C 2% CC	
1 1/2	15#	2389	7 7/8	150 sx 50/50 poz	1400

29. LINER RECORD					30. TUBING RECORD		
SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN	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. 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 <u>Paula Pool</u>	TITLE <u>Secretary</u>	DATE <u>11-5-79</u>