

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYC. C. COP
SUBMIT IN DUPLICATE

(See other instructions on reverse side)

Copy to 17
Form approved,
Budget Bureau No. 42-R355.5.

5. LEASE DESIGNATION AND SERIAL NO.

NM 0477614

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Midwest Federal

9. WELL NO.

3

10. FIELD AND POOL, OR WILDCAT

Sand Ranch - ~~Atoka~~ ^{Morrison}

11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA

22-10S-29E

12. COUNTY OR PARISH

Chaves

13. STATE

N. M.

19. ELEV. CASINGHEAD

3921

23. INTERVALS DRILLED BY

ROTARY TOOLS

0-9630

CABLE TOOLS

25. WAS DIRECTIONAL SURVEY MADE

No.

27. WAS WELL CORED

No.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL: OIL WELL ☐ GAS WELL ☒ DRY ☐ Other _____

b. TYPE OF COMPLETION:

NEW WELL ☒WORK OVER ☐DEEP-EN ☐PLUG BACK ☐DIFF. RESRV. ☐

2. NAME OF OPERATOR

DEPCO, Inc. ✓

3. ADDRESS OF OPERATOR

800 Central, Odessa, Texas 79761

4. LOCATION OF WELL (Report location clearly and in accordance with any State or Federal regulations)

At surface 1980' FNL & 660 FEL, Letter H, Sec. 22, T10S, R29E

At top prod. interval reported below

At total depth

14. PERMIT ^{ISSUED}

15. DATE SPUDDED 16. DATE T.D. REACHED 17. DATE COMPL. (Ready to prod.)

11-20-78

1-2-79

2-14-79

3920.6 GR

20. TOTAL DEPTH, MD & TVD

9630

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

9166

22. IF MULTIPLE COMPL., HOW MANY*

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

9058-68 Atoka

26. TYPE ELECTRIC AND OTHER LOGS RUN

CNL-FD, DLL/RXO/GR

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

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
13 3/8	48	354	17 1/2	350 SX.	0
8 5/8	24 & 32	2848	11	500 SX.	0
4 1/2	11.6	9630	7 7/8	400 SX.	0

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					2 3/8	9014	9014

30. TUBING RECORD

31. PERFORATION RECORD (Interval, size and number)

9058-68 2SPF .39" & .44"

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
9058-68	3000 gal 7 1/2% MSA

33.* PRODUCTION

DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)					WELL STATUS (Producing or shut-in)	
2-2-79		Flowing					Shut-in	
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL--BBL.	GAS--MCF.	WATER--BBL.	GAS-OIL RATIO	
2-26-79	4 hrs.	8/64-16/64	→	0.33	49.5	1	150,000	
FLOW, TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL--BBL.	GAS--MCF.	WATER--BBL.	OIL GRAVITY-API (CORR.)		
1461-599	Packer	→	2	297	6	55		

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

TEST WITNESSED BY

Awaiting pipeline connection

35. LIST OF ATTACHMENTS

Dev. Survey, Logs, Form C-122

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

SIGNED

D. R. Mason

TITLE

Chief Clerk

DATE

3-14-79

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

INSTRUCTIONS

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.

If not filed prior to the time this summary record is submitted, copies of all currently available logs (drillers, geologists, sample and core analysis, all types electric, etc.), formation 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 22 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: "Stuck 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.)

37. SUMMARY OF POROUS ZONES: SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF: CORED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CUSHION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES		38. GEOLOGIC MARKERS	
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.
			DST#1 8996-9076 IHP 4635#, 30 min. IF 878-839, 60 min. SI 3028#, 60 min. FF 386-351#, 180 min. SI 3028#, FHP 4600#, Rec. 375' DM. Sampler: 250#, 6CFG, 100 cc DF. Temp 165°
			Yates San Andres Glor. Tubbs Abo Wolfcamp Cisco Canyon Strawn Atoka Miss. Chester Miss. Lime
			MEAS. DEPTH 1192 2522 3810 5298 6120 7120 7790' 8106 8502 8742 9115 9180
			TRUE VERT. DEPTH