NM OIL CONS. COMMISSION

Form 9-330 (Rev. 5-63)	L	NITED S	STATES	SUBMIT	IN DU	awer I	D MM 88	Form app	proved. ureau No. 42- R 355.	5
	DEPARTM	ENT OF	THE IN		(St e stri	rotherm= actions on erse side)			ON AND SERIAL NO	_
	GE	DLOGICAL	SURVEY		300		NM 1	.4983		
WELL CON	MPLETION O	r recomi	PLETION	PORT A	ND Le		6. IF INDIA	N, ALLOTT	TEE OR TRIBE NAM	Е
ia. TYPE OF WELI		GAS WELL X	-				7. UNIT AG	REEMENT	NAME	-
b. TYPE OF COMP	LETION:		DIES -	Other	100-	\ <i>U\</i>				
NEW WELL X	WORK DEEP EN	BACK	PIFF. RESVR.	Other	1903		S. FARM OF	an OV	Federal	
	Petroleum Co	rporation	RE	SERALS FIGURE	1 S		9. WELL NO). O	TEUCIAL	
3. ADDRESS OF OPER	ATOR			VERALS FIGHT. DSWELL, NEW A	SERVICE					_
207 Sc	outh 4th St.,	Artesia,	NM 88210	" SOCCEMEN	Date)	12	10. FIELD A		OR WILDCAT	
	0 FSL & 660 F			.,		\$, R., M., OR	BLOCK AND SURVE	Y
At top prod. inte	erval reported below			JAN 24 19	83	\$			ao meo r	9077
At total depth			•	JAN SE 10	03	3	Unit	M, Sec	c. 28-T5S-R	.Z4£
				O. C. D.		_ 	12. COUNTY PARISH		13. STATE	_
15. DATE SPUDDED.	16. DATE T.D. REACH	2 27 72		ARTESIA, OFFI		-\$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	Chave	_	NM .EV. CASINGHEAD	
12-1.2-82	12-18-82		10-83		104.5		r, GR, ETC.)	10. 33	21, 01,01	
20. TOTAL DEPTH, MD 4	21. PLUG, BA	CK T.D., MD & TVI	22. IF MUL HOW M	TIPLE COMPL.,		TERVALS RILLED BY	0-4300		CABLE TOOLS	-
	VAL(S), OF THIS COM	PLETION TOP, B	OTTOM, NAME (1	MD AND TVD)*		> 1			WAS DIRECTIONAL SURVEY MADE	
	3655-3927	Abo						No		
26. TYPE ELECTRIC A	NO OTHER LOGS RUN								S WELL CORED	-
	CNL/FDC; I	DLL			_			No	0	_
28. CASING SIZE	WEIGHT, LR./FT.			oort all strings so		EMENTING	RECORD	 ,	AMOUNT PULLED	_
10-3/4"	40.5#	1005		4-3/4"		700		13	The state of	-
4-1/2**	9.5i	4282	7	-7/8"		675			2 8	-
								Y	X **	_
29.	LIN	ER RECORD			30.		TUBING RE	CORD	- Jamil	-
SIZE	TOP (MD) BO	rtom (MD) s.	ACKS CEMENT*	SCREEN (MD)	Stz		DEPTH SET (MD)		PACKER SET (MD)	
					- -2-3	/8"	3620'		3620'	
31. PERFORATION BEC	CORD (Interval, size a	nd number)		32.	ACID, SHO	T, FRACT	URE, CEME	NT SQUE	EZE, ETC.	-
				DEPTH INTER					ATERIAL USED	
3655-3927' w/13 .42" holes				3655-392	27'				gel KCL wtr,	
3033-3927	M/TO .47 III	01.62					0# 20/4		ROD WCI,	
										_
33.* DATE FIRST PRODUCT	10N PRODUCTI	ON METHOD (Flo		DUCTION , numpingsize an	id type of p	ump)			(Producing or	
1-10-83		Flowi	ng					hut-in) IWOPLC	}	
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N, FOR TEST PERIOD	OIL-BBL.	GAS		WATER-B	BL. G	AS-OIL RATIO	-
1-10-83 FLOW. TUBING PRESS.	CASING PRESSURE	20/64"	OILBBL.	GASMC	125 CF.	WATER-	BBL.	OIL GR.	- AVITY-API (CORR.)	
200	PKR	24-HOUR RATE	<u> </u>	498	D FOR REC	200	-	_	•	
	AS (Sold, used for fue			(ORIG. SG			LASS 1			
35. LIST OF ATTACH	Vented - Will	be solu					DILL	Hansen		_
36. I hereby certify	eviation Sur	vey nd attached info	rmation is con	plete and correct	20 198	ined from	al available	records		_
	· an what		1	~49 9£\$ \$\$\$\$	NAGEMEN Supers	IT SERVICE		TE <u>1-1</u>	2-83	
//		1		KOJITELI						_

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INSTRUCTIONS

and/or State office. See instructions on items 22 and 24, and 33, below regarding separate reports for a separate comportance.

If not ided 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 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 completions.

Hem 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.

Hem 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. Hems 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. Shomit a separate report (page) on this form, adequately identified,

Hem 29: "Nucls Cement": Attached supplemental records for this well should show the details of any multiple stage cementing and the location of the cementing tool. for each additional interval to be separately produced, showing the additional data pertinent to such interval Submit a separate report (page) on this form, adequately identified,

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.)

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		TESTED, CUSHION
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	DESCRIPTION, CONTENTS, 2017.	INAKET OF FOROT S ZONEN: SHOW ALL DEFORMSTY AND CONTENTS THEREOF; CORED INTERVALS; AND ALL DELIASTEM TESTS, ISOLIDING DEETH INTERVAL TESTED, CUSHION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES ORMATION TOP ROTTOR ROTTOR
San Andres Glorieta Abo	NAME .	
572 1559 3617	MEAS, DEPTH	GEOLOGIC MARKERS
	TOP TRUE VERT, DEPTH	: