

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

1. TYPE OF WELL: OIL WELL ☐ GAS WELL ☒ DRY ☐ Other ☐		5. LEASE DESIGNATION AND SERIAL NO. NM 36408			
2. NAME OF OPERATOR DEPCO, Inc. ✓		6. IF INDIAN, ALLOTTEE OR TRIBE NAME			
3. ADDRESS OF OPERATOR 800 Central, Odessa, TX 79761		7. UNIT AGREEMENT NAME RECEIVED			
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface K-1980 FSL & 1680 FWL, SEC 20, T-5-S, R-25-E At top prod. interval reported below At total depth		8. FARM OR LEASE Rose Federal			
14. PERMIT NO.		9. WELL NO. O. C. D.			
DATE ISSUED		10. FIELD AND POOL, OR WILDCAT ARTESIA, OFFICE			
15. DATE SPUDDED 2-21-83		11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA Pecos Slopes Abo			
16. DATE T.D. REACHED 4-5-83		12. COUNTY OR PARISH Chaves			
17. DATE COMPL. (Ready to prod.) 4-30-83		13. STATE New Mexico			
18. ELEVATIONS (DF, RKB, RT, CB, ETC.)* 3821 GR		19. ELEV. CASINGHEAD 3821			
20. TOTAL DEPTH, MD & TVD 4230'		21. PLUG, BACK T.D., MD & TVD 4161'			
22. IF MULTIPLE COMPL., HOW MANY*		23. INTERVALS DRILLED BY 45 - 4230'			
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 3696 - 3864' 34 - .44" Holes Abo		25. WAS DIRECTIONAL SURVEY MADE No			
26. TYPE ELECTRIC AND OTHER LOGS RUN CNL & DLL		27. WAS WELL CORED Yes			
28. CASING RECORD (Report all strings set in well)					
CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
16"		45'	22"	3 1/2 yds	None
10 3/4"	40.50#	949'	14 3/4"	700 sxs Circ 75 sxs	None
4 1/2"	10.50#	4229'	7 7/8"	1325 sxs Circ 25 sxs	None
				w/DV tool @ 2300'	
29. LINER RECORD					
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	
30. TUBING RECORD					
SIZE	DEPTH SET (MD)	PACKER SET (MD)			
2 3/8"	3612'				
31. PERFORATION RECORD (Interval, size and number)					
Perf w/1 - .44" hole @ 3696-3700', 3739', 40', 96-3806', 11-13', 20-26', 59-64'					
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.					
DEPTH INTERVAL* (MD)		AMOUNT AND KIND OF MATERIAL USED			
3696-3864'		5400 gals. 7 1/2% Abo acid w/1000 SCF N2 p/bbl., 59,000 gals Mini- Max III-30 & CO2, 46,400# 10/20 & 83,200# 20/40 sand.			
33. PRODUCTION					
DATE FIRST PRODUCTION 4-24-83		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Flowing		WELL STATUS (Producing or shut-in) Shut in	
DATE OF TEST 5-5-83	HOURS TESTED 4 hrs.	CHOKE SIZE 12-21/64	PROD'N. FOR TEST PERIOD →	OIL—BBL. 0	GAS—MCF. 221
WATER—BBL. 0	GAS—OIL RATIO 0				
FLOW. TUBING PRESS. 932-849	CASING PRESSURE 1067-1007	CALCULATED 24-HOUR RATE →	OIL—BBL. 0	GAS—MCF. 0	WATER—BBL. 0
OIL GRAVITY-API (CORR.) 0					
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Shut in Waiting on Pipeline Connection					
35. LIST OF ATTACHMENTS CNL, DLL, Dev. Survey & C-122					
36. I hereby certify that the foregoing and attached information is complete and correct from all available records					
SIGNED <u>R. L. Denney</u>		TITLE <u>Chief Production Clerk</u>		DATE <u>5-11-83</u>	

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

(Keep Read)

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.), formations 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. 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.)

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	NAME	MEAS. DEPTH	TRUE VERT. DEPTH
			MEASURED FROM KB		
			SAN ANDRES	582'	
			P-1	1006'	
			GLORIETA	1483'	
			YESO	1593'	
			TUBB	3034'	
			ABO	3617'	
			TD	4230'	