

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

Form approved.
Budget Bureau No. 42-R355.5.

LEASE DESIGNATION AND SERIAL NO.

NM 51830

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Ruth XK Federal

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Pecos Slope Abo

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

Unit J, Sec. 1-T7S-R25E

1a. TYPE OF WELL:

OIL
WELL ☐GAS
WELL ☒DRY ☐

Other

b. TYPE OF COMPLETION:

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

Other

2. NAME OF OPERATOR

Yates Petroleum Corporation

3. ADDRESS OF OPERATOR

207 South 4th St., Artesia, NM 88210

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

At surface 2180 FSL & 1980 FEL, Sec. 1-T7S-R25E

At top prod. interval reported below

At total depth

14. PERMIT NO.

DATE ISSUED

12. COUNTY OR
PARISH

Chaves

13. STATE

NM

15. DATE SPUDDED

12-31-83

16. DATE T.D. REACHED

1-12-84

17. DATE COMPL. (Ready to prod.)

2-2-84

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

3679' GR

19. ELEV. CASINGHEAD

20. TOTAL DEPTH, MD & TVD

4225'

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

4146'

22. IF MULTIPLE COMPL.,
HOW MANY*23. INTERVALS
DRILLED BY

ROTARY TOOLS

0-4225'

CABLE TOOLS

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

3666-3937' Abo

25. WAS DIRECTIONAL
SURVEY MADE

No

26. TYPE ELECTRIC AND OTHER LOGS RUN

CNL/FDC; DLL

27. WAS WELL CORED

No

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

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
10-3/4"	40.5#	841'	14-3/4"	550	
4-1/2"	9.5#	4225'	7-7/8"	665	

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					2-3/8"	3630'	3630'

31. PERFORATION RECORD (Interval, size and number)

3666-3937' w/30 .40" Holes

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
3666-3937'	w/3000g. 7 1/2% acid. SF
	w/60000g. gel KCl. wtr.
	120000# 20/40 sd.

33.* PRODUCTION

DATE FIRST PRODUCTION 2-2-84		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Flowing				WELL STATUS (Producing or shut-in) SIWOPLC	
DATE OF TEST 2-2-84	HOURS TESTED 3	CHOKE SIZE 1/2"	PROD'N. FOR TEST PERIOD →	OIL—BBL. -	GAS—MCF. 205	WATER—BBL. -	GAS-OIL RATIO -
FLOW. TUBING PRESS. 250	CASING PRESSURE Pkr	CALCULATED 24-HOUR RATE →	OIL—BBL. -	GAS—MCF. 1647	WATER—BBL.	OIL GRAVITY-API (CORR.) N1	

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

Vented - Will be sold

TEST WITNESSED BY

Bill Hansen

ACCEPTED FOR RECORD

PETER W. CHESTER

35. LIST OF ATTACHMENTS

Deviation Survey

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

SIGNED

TITLE Production Supervisor

DATE 2-3-84

*(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: "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:				38. GEOLOGIC MARKERS	
SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF: CORDED INTERVALS; AND ALL DEPTH-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CUSHION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES				NAME	MEAS. DEPTH
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.		TOP TRUE VERT. DEPTH
				San Andres Glorieta Fullerton Abo	457 1552 2767 3616