

RECEIVED BY
UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYNM Oil Com. COMETS
Drawer 80
SUBMIT IN DUPLICAT.
Artesia, NM 88210
Other in-
structions on
reverse side)Form approved.
Budget Bureau No. 42-R355.5.

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. RESVR. ☐ Other ☐

2. NAME OF OPERATOR

Stevens Operating Corporation

3. ADDRESS OF OPERATOR

P. O. Box 2203 Roswell, NM 88201

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)
At surface 990 FWL, 330 FSL, Sec. 11, T-7-S, R-26-E

At top prod. interval reported below same

At total depth same

14. PERMIT NO.

DATE ISSUED

5. LEASE DESIGNATION AND SERIAL NO.

NM 19421-A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Hanagan A Federal

9. WELL NO.

2

10. FIELD AND POOL, OR WILDCAT

Pecos Slope Abo

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

Sec. 11, T-7-S, R-26-E

12. COUNTY OR PARISH

Chaves

13. STATE

NM

15. DATE SPUDDED

4-27-84

16. DATE T.D. REACHED

5-4-84

17. DATE COMPL. (Ready to prod.)

6-29-84

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

3730.7 GR

19. ELEV. CASINGHEAD

3730.7

20. TOTAL DEPTH, MD & TVD

4700'

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

4658'

22. IF MULTIPLE COMPL., HOW MANY*

23. INTERVALS DRILLED BY

ROTARY TOOLS

CABLE TOOLS

0-TD

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

4415-30

4167-4340.5

Abo

25. WAS DIRECTIONAL SURVEY MADE

26. TYPE ELECTRIC AND OTHER LOGS RUN

DLL-MSFL

CNL-LDT

27. WAS WELL CORED

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

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
8 5/8	24#	912'	12 1/4	850 SXS	
4 1/2	11.6#	4696'	7 7/8	900 SXS	

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					2 3/8	4274	

31. PERFORATION RECORD (Interval, size and number)

4415-30 (16 shots)
4167-4340.5 (25 shots)

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
4415-30	3000 gals 7 1/2%, Frac 30,000 gals YF-3 PSD (33% CO ₂)
	43,000# 20/40 sand, 26,000# 10/20 sand.

33.* PRODUCTION

DATE FIRST PRODUCTION SI PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Flowing WELL STATUS (Producing or shut-in) SI (See Back)

DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
6-26-84	4 hrs.	10.5/64					
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)	
667				1406			

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

To be sold

ACCEPTED FOR RECORD

PETER W. CHESTER

TEST WITNESSED BY

Mike Vowell

35. LIST OF ATTACHMENTS

DLL-MCFL CNL-LDT

JUL 11 1984

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

SIGNED

TITLE Prod. Controller

DATE 7-5-84

*(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.)

1167-4340.5 5000 gals 7 3/8, frac 60,000 gals YF-4 PSD, (33% CO2) 86,000# 20/40 sand, 52,000#
10/20 sand.

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

FORMATION	TOP	BOTTOM	DESCRIPTION	MEAS. DEPTH	TRUE VERT. DEPTH
San Andres	828	2008	Dolomite, Anhydrite		
Glorieta	2008	3439	Sandstone, Dolomite, Anhydrite		
Tubb	3439	4112	Sandstone, Anhydrite		
Abo	4112	4700	Red Shale		

071-22