

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE

(See other in-
structions on
reverse side)Form approved.
Budget Bureau No. 42-R365.5.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL: OIL WELL ☒ GAS WELL ☐ Other _____		5. LEASE DISPOSITION AND SERIAL NO. LC 069280-A	
b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
2. NAME OF OPERATOR JACK L. McCLELLAN		7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR Box 848, ROSWELL, NEW MEXICO 88201		8. FARM OR LEASE NAME LISA "A" FEDERAL	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements) At surface At top prod. interval reported below 1650' FSL & 660' FWL At total depth 1650' FSL & 660' FWL		9. WELL NO.	
14. PERMIT NO.		DATE ISSUED	
15. DATE SPUDDED 8/06/69		16. DATE T.D. REACHED 8/21/69	
17. DATE COMPL. (Ready to prod.) 8/27/69		18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 3948' GL	
19. ELEV. CASINGHEAD		20. TOTAL DEPTH, MD & TVD 2003	
21. PLUG, BACK T.D., MD & TVD 1999		22. IF MULTIPLE COMPL., HOW MANY*	
23. INTERVALS DRILLED BY		ROTARY TOOLS	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 1967-1975'		25. WAS DIRECTIONAL SURVEY MADE NO	
26. TYPE ELECTRIC AND OTHER LOGS RUN GAMMA RAY NEUTRON IN CASING		27. WAS WELL CORED NO	
28. CASING RECORD (Report all strings set in well)			
CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE
8-5/8"	24 LB.	390'	10"
5-1/2"	14 LB.	2003'	8"
CEMENTING RECORD		AMOUNT PULLED	
50 SX		NONE	
150 SX		NONE	
29. LINER RECORD			
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*
30. TUBING RECORD		PACKER SET (MD)	
SIZE	DEPTH SET (MD)		
2"	1930'		
31. PERFORATION RECORD (Interval, size and number) 1967-1975' - 2 SHOTS/FT.			
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED	
1967-1975		200 GALS. ACID, 25,000 GALS. OIL, 25,000# SAND	
33.* PRODUCTION			
DATE FIRST PRODUCTION 9/01/69		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) FLOWING	
DATE OF TEST 8/28/69		WELL STATUS (Producing or shut-in) PRODUCING	
HOURS TESTED 24	CHOKE SIZE 24/32	PROD'N. FOR TEST PERIOD 85	GAS—MCF. 100 EST.
FLOW. TUBING PRESS. 100	CASING PRESSURE 650	WATER—BBL. 0	GAS-OIL RATIO 1170/1
CALCULATED 24-HOUR RATE 85	GAS—MCF. 100 EST.	WATER—BBL. 0	OIL GRAVITY-API (CORR.) 35
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) VENTED (WAITING ON CONNECTION)			
35. LIST OF ATTACHMENTS 2 COPIES OF LOGS (SEPARATE COVER)			
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records			
SIGNED J. L. McClellan		TITLE OPERATOR	
DATE 9/04/69			

*(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 respect 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 or State office. Such instructions are in 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 applicable 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: "Sack's 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.)

PLEASE HOLD TOPS CONFIDENTIAL

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 DOWN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES

38. GEOLOGIC MARKERS

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	TOP	
					MEAS. DEPTH	TRUE VERT. DEPTH
SALADO	0	400	RED SHALE & ANHYDRITE - GRAVEL	RUSTLER	358	
	400	1020	SALT	TOP SALT	403	
	1020	1225	ANHYDRITE	BASE SALT	1020	
YATES	1225	1350	RED SAND AND SHALE	YATES	1226	
7-RIVERS	1350	1960	DOLOMITE, ANHYDRITE AND RED SAND	QUEEN	1963	
QUEEN	1960	1970	GRAY SAND			
	1970	2003	RED SAND, ANHYDRITE			