

UNITED STATES DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY  
ARTESIA, NM 88210SUBMIT IN DUPLICATE  
TO THE COMMISSIONER OF THE GEOLOGICAL SURVEY  
(See other instructions 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

Harper Oil Company

3. ADDRESS OF OPERATOR

904 Hightower Bldg., Oklahoma City, Oklahoma 73102

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

At surface 330' FSL &amp; 990 FWL

At top prod. interval reported below Same

At total depth Same

14. PERMIT NO.

RECEIVED BY

JAN 9 1986

O.C.D.  
DATE ISSUED  
ARTESIA, OFFICE

5. LEASE DESIGNATION AND SERIAL NO.

36605

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. AGREEMENT NO.

8. WELL NO.

9. FIELD AND POOL, OR WILDCAT

10. SECTION, TOWNSHIP, OR BLOCK AND SURVEY OR AREA

11. SECTION, TOWNSHIP, OR BLOCK AND SURVEY OR AREA

Section 19-15S-22E

12. COUNTY OR PARISH

Chaves

13. STATE

NM

15. DATE SPUDDED 10-21-84 16. DATE T.D. REACHED 11-6-84 17. DATE COMPL. (Ready to produce) --- 18. ELEVATIONS (DF, REB, RT, GR, ETC.)\* GL 4224.4' 19. ELEV. CASINGHEAD ---

20. TOTAL DEPTH, MD &amp; TVD 4250' 21. PLUG, BACK T.D., MD &amp; TVD --- 22. IF MULTIPLE COMPL., HOW MANY\* None 23. INTERVALS DRILLED BY Rotary 24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)\* None 25. WAS DIRECTIONAL SURVEY MADE Yes

26. TYPE ELECTRIC AND OTHER LOGS RUN Dual Laterlog Micro-SFL &amp; Compensated Neutron-Litho Density 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
8 5/8"	24#	1051'	11"	975 sacks	None

29. LINER RECORD					30. TUBING RECORD		
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
None					None		

31. PERFORATION RECORD (Interval, size and number)				32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
None				DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
				None	

33.\* PRODUCTION  
DATE FIRST PRODUCTION --- PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) --- WELL STATUS (Producing or shut-in) ---

DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
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FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)	
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34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) --- TEST WITNESSED BY PETER W. CHESTER

35. LIST OF ATTACHMENTS Logs listed in Item #26 JAN 18 1985

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

SIGNED

TITLE

Operations Manager

DATE

11-30-84

\*(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 33.

**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: 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
Surface	0	403	Glorietta Yates Tubbs Abo Wolfcamp  Tight Hole	1002'	
Surface rock	403	1296		1090'	
Sh & lm	1296	1691		2515'	
Dolo & lm	1691	2225		3194'	
Dolo & anhy	2225	2746		3915'	
Sh & dolo	2746	3034			
Dolo & anhy	3034	3348			
Sh & dolo	3348	3905			
Sh	3905	4182			
Sh & dolo	4182	4250			
	4182	TD			