

wer DD
Artesia, NM 88210UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See 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 ☐				5. LEASE DESIGNATION AND SERIAL NO. NM-54400			
b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other ☐				6. IF INDIAN, ALLOTTEE OR TRIBE NAME			
2. NAME OF OPERATOR McClellan Oil Corporation				7. UNIT AGREEMENT NAME			
3. ADDRESS OF OPERATOR P.O. Drawer 730, Roswell, N.M. 88202				8. FARM OR LEASE NAME Shell 15 Fed.			
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements) At surface 660 FNL & 1650 FWL At top prod. interval reported below At total depth				9. WELL NO. 2			
14. PERMIT NO.				DATE ISSUED			
15. DATE SPUNDED 7-7-88				16. DATE T.D. REACHED 8-17-88			
17. DATE COMPL. (Ready to prod.) 9-12-88				18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 3897 G.L.			
19. ELEV. CASINGHEAD 3895				20. TOTAL DEPTH, MD & TVD 1863			
21. PLUG, BACK T.D., MD & TVD 1861				22. IF MULTIPLE COMPL., HOW MANY* No			
23. INTERVALS DRILLED BY ROTARY TOOLS				CABLE TOOLS Yes			
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 1838-1861 Queen				25. WAS DIRECTIONAL SURVEY MADE No			
26. TYPE ELECTRIC AND OTHER LOGS RUN Gamma Ray - Neutron				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		276		12 1/4	
5 1/2		14		1861		8"	
						160 sx Class "C" 2% Ca	
						100 sx Class "C" 2% CFR3	
						Hallad 4, 2% Ca Cl	
						None	
						None	
29. LINER RECORD							
SIZE		TOP (MD)		BOTTOM (MD)		SACKS CEMENT*	
30. TUBING RECORD							
SIZE		DEPTH SET (MD)		PACKER SET (MD)			
2 3/8		1837		None			
31. PERFORATION RECORD (Interval, size and number)							
1841' - 1844' .38 9 Shots							
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.							
DEPTH INTERVAL (MD)				AMOUNT AND KIND OF MATERIAL USED			
1841 - 1841				20,000 gals geled H ₂ O			
				20,000# 20/40 sand			
33. PRODUCTION							
DATE FIRST PRODUCTION 8-27-88		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Pumping				WELL STATUS (Producing or shut-in) Producing	
DATE OF TEST 9-12-88		HOURS TESTED 24		CHOKE SIZE 32		PROD'N. FOR TEST PERIOD 32	
FLOW. TUBING PRESS.		CASING PRESSURE 12		CALCULATED 24-HOUR RATE 32		OIL—BBL. T.S.T.M.	
						GAS—MCF. 67	
						WATER—BBL. 34	
						OIL GRAVITY-API (CORR.)	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Used for fuel							
35. LIST OF ATTACHMENTS							
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records							
SIGNED Mitch Lee		TITLE Dir. & Production Eng.		DATE 9-12-88		TEST WITNESSED BY M. Lee	

* (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:

SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF; CORDED 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, CONTENTS, ETC.	38. GEOLOGIC MARKERS		
				NAME	MEAS. DEPTH	TRUE VERT. DEPTH
Queen	1838	1861	Gray sand, Oil/Water/Gas	Salt Yates 7 - Rivers Queen	908 1108 1642 1838	908 1642 1838 1861