

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

(See other In-
structions on
reverse side)

RECEIVED

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

FEB 12 1991

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

O. C. D.
ARTESIA OFFICE

2. NAME OF OPERATOR
ABO PETROLEUM CORPORATION

3a. Area Code & Phone No.
505/748-1471

3. ADDRESS OF OPERATOR
105 South 4th St., Artesia, NM 88210

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*
At surface 2310' FSL & 330' FEL, Sec. 9-15S-29E

At top prod. interval reported below

At total depth

9a. API Well No.
30-005-62814

14. PERMIT NO. DATE ISSUED

5. LEASE DESIGNATION AND SERIAL NO.
NM 70891

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Mark Federal

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Lucky Lake Queen

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

Unit I, Sec. 9-T15S-R29E

12. COUNTY OR
PARISH
Chaves

13. STATE
NM

15. DATE SPUDDED 12-26-90 16. DATE T.D. REACHED 1-1-91 17. DATE COMPL. (Ready to prod.) Dry 18. ELEVATIONS (DV, RKR, RT, GR, ETC.)* 3852' GR 19. ELEV. CASINGHEAD

20. TOTAL DEPTH, MD & TVD 1891' 21. PLUG. BACK T.D., MD & TVD - 22. IF MULTIPLE COMPL., HOW MANY* - 23. INTERVAL DRILLED BY - ROTARY TOOLS 0-TD CABLE TOOLS

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

25. WAS DIRECTIONAL
SURVEY MADE

No

26. TYPE ELECTRIC AND OTHER LOGS RUN
CNL/LDT

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#	312'	12-1/2"	200 sx	

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)

31. PERFORATION RECORD (Interval, size and number)

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
	Post ID-2
	2-8-91
	P & A

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—BSL.	GAS—MCF.	WATER—BSL.	GAS-OIL RATIO
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED	OIL—BSL.	GAS—MCF.	WATER—BSL.	OIL GRAVITY-API (CORR.)	

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

FEB - 8 1991

TEST WITNESSED BY

35. LIST OF ATTACHMENTS

Deviation Survey, Logs

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

SIGNED *[Signature]*

TITLE Production Supervisor

DATE 1-24-91

*(See Instructions and Spaces for Additional Data on Reverse Side)

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, CONTENTS, ETC.	NAME	TOP	
					MEAS. DEPTH	TRUE VERT. DEPTH
				Anhydrite Salt Yates Seven Rivers Queen	198. 300 1065 1584 1806	