

ORIGINAL COPY

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE

(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 ☐ OTHER ☐

b. TYPE OF COMPLETION:

NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESV. ☐ OTHER ☐

2. NAME OF OPERATOR

J. M. WELCH

3. ADDRESS OF OPERATOR

P. O. Box 496 - ARTESIA, NEW MEXICO

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

At surface 500' FROM W. LINE & 1980' FROM S. LINE
OF SEC. 18-16S-31E

At top prod. interval reported below

At total depth

14. PERMIT NO.

DATE ISSUED

12. COUNTY OR PARISH

13. STATE

BDDY

NEW MEXICO

15. DATE SPUDDED

3/28/66

16. DATE T.D. REACHED

4/12/66

17. DATE COMPL. (Ready to prod.)

4/21/66

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

3914 GR.

19. ELEV. CASINGHEAD

20. TOTAL DEPTH, MD & TVD

3360

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

3360

22. IF MULTIPLE COMPL., HOW MANY*

-

23. INTERVALS DRILLED BY

ROTARY TOOLS

CABLE TOOLS

1

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

3250 to 3276 - OIL
2710 to 2720 - GAS

25. WAS DIRECTIONAL SURVEY MADE

-

26. TYPE ELECTRIC AND OTHER LOGS RUN

None (SHELL LOGGED ORIGINAL HOLE)

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"		498		CEMENTED TO TOP	NONE
5 1/2"		2100-3360		280 (1960)	
5 1/2"		0 - 2100		100 SACKS TRAD BOWL	1966

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					3-3/8	3250	NONE

31. PERFORATION RECORD (Interval, size and number)

3250 to 3276 - OIL
2710 to 2720 - GAS

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
TREATED FROM 3250-76	WITH 20,000# SAND AND 1000 BBL. OF OIL.
TREATED FROM 2710-20	WITH 10,000# SAND AND 500 BBL. OF OIL.

33.*

PRODUCTION

DATE FIRST PRODUCTION

4/21/66

PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)

FLOWING

WELL STATUS (Producing or shut-in)

PRODUCING

DATE OF TEST

4/21/66

HOURS TESTED

10

CHOKE SIZE

1/2"

PROD'N. FOR TEST PERIOD

→

OIL—BBL.

30

GAS—MCF.

1000 MCF

WATER—BBL.

NONE

GAS-OIL RATIO

-

FLOW. TUBING PRESS.

100

CASING PRESSURE

300

CALCULATED 24-HOUR RATE

→

OIL—BBL.

65

GAS—MCF.

1000 MCF

WATER—BBL.

NONE

OIL GRAVITY-API (CORR.)

APPROX. 35

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

PHILLIPS PETROLEUM Co.

TEST WITNESSED BY

J.M. WELCH

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

TITLE

OWNER

DATE

6/16/66

*(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 19: 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