

UNITED 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 ☐		
b. TYPE OF COMPLETION:		NEW WELL ☐	WORK OVER ☐	DEEP-EN ☒	PLUG BACK ☐	DIFF. RESVR. ☐	Other ☐
2. NAME OF OPERATOR Kennedy Oil Company, Inc.						5. LEASE DESIGNATION AND SERIAL NO. MM-05186	
3. ADDRESS OF OPERATOR P. O. Box 151 - Artesia, New Mexico						6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 1980 FNL and 1650 FNL At top prod. interval reported below Sec. 27, T-16S, R-31E At total depth NMPH						7. UNIT AGREEMENT NAME	
14. PERMIT NO.						DATE ISSUED	
15. DATE SPUDDED 2-15-67						16. DATE T.D. REACHED 3-8-67	
17. DATE COMPL. (Ready to prod.) 3-10-67						18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 4070 DF	
19. ELEV. CASINGHEAD 4060						20. TOTAL DEPTH, MD & TVD 3820	
21. PLUG, BACK T.D., MD & TVD						22. IF MULTIPLE COMPL., HOW MANY*	
23. INTERVALS DRILLED BY						24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* (Old) 3579-83, 3592-96, 3614-16, 3622-24 - Grayburg 3733-55 - San Andres	
25. WAS DIRECTIONAL SURVEY MADE No						26. TYPE ELECTRIC AND OTHER LOGS RUN Gamma Ray - Neutron	
27. WAS WELL CORED Yes						28. CASING RECORD (Report all strings set in well)	
CASING SIZE		WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED	
(Old) 8 5/8"	32	396	11	150 Sacks	None		
5 1/2"	14	3768	7 7/8	200 "			
29. LINER RECORD						30. TUBING RECORD	
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
None					2 3/8	3774	None
31. PERFORATION RECORD (Interval, size and number) (Old) 3579-83, 3592-96, 3614-16, 3622-24 3733-55 - 4/ft.						32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
33.* PRODUCTION						34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Sold	
DATE FIRST PRODUCTION 12-61		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Pumping			WELL STATUS (Producing or shut-in) Producing		
DATE OF TEST 3-9-67	HOURS TESTED 24	CHOKE SIZE 2"	PROD'N. FOR TEST PERIOD 55	OIL—BBL. 55	GAS—MCF. ?	WATER—BBL. -	GAS-OIL RATIO -
FLOW. TUBING PRESS. Pump	CASING PRESSURE 20	CALCULATED 24-HOUR RATE 55	OIL—BBL. 55	GAS—MCF. -	WATER—BBL. -	OIL GRAVITY-API (CORR.) 35	
35. LIST OF ATTACHMENTS						TEST WITNESSED BY W. Cooper	
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records							
SIGNED R. S. Kennedy		TITLE ARTESIA, NEW MEXICO		DATE 3-10-67			

*(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: 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	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH	TRUE VERT. DEPTH
San Andres	3768	3820	Line			