

N. M. O. C. C. COPY

Form 5-100
(Rev. 5-66)UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other in-
structions on
reverse side)Form approved,
Budget Bureau No. 42-R-3555.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG*

1a. TYPE OF WELL: OIL WELL ☐ GAS WELL ☐ DRY ☐ Other <u>WLL</u>				7. UNIT AGREEMENT NAME <u>Forest Pool</u>			
b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESER. ☐ Other <u>RECEIVED</u>				8. FARM OR LEASE NAME <u>Forest Pool Unit</u>			
2. NAME OF OPERATOR <u>Continental Oil Company</u>				9. WELL NO. <u>10</u>			
3. ADDRESS OF OPERATOR <u>Box 460, Hobbs, New Mexico 88240</u>				10. FIELD AND POOL, OR WILDCAT <u>Source Lake G-5A</u>			
4. LOCATION OF WELL (Report location clearly and in accordance with any State regulations) At surface <u>1960' FNL + 1450' FWL of Sec. 35, T-16S, R-29E, Eddy County, N. Mex.</u>				11. SEC. T., R., M., OR BLOCK AND SURVEY OR AREA <u>Sec. 35, T-16S, R-29E</u>			
At top prod. interval reported below <u>Same</u>				12. COUNTY OR PARISH <u>Eddy</u>			
At total depth <u>Same</u>				13. STATE <u>N. Mex.</u>			
14. PERMIT NO.		DATE ISSUED		15. DATE SPUNDED <u>11-7-69</u>		16. DATE T.D. REACHED <u>11-13-69</u>	
				17. DATE COMPL. <u>3-5-70</u>		18. ELEVATIONS (DF, RKB, RT, GR, ETC.) <u>3670' DF</u>	
20. TOTAL DEPTH, MD & TVD <u>2705</u>		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)* <u>Injecting 2560' - 2655' San Andres</u>	
25. TYPE ELECTRIC AND OTHER LOGS RUN <u>GR/N</u>		26. WAS DIRECTIONAL SURVEY MADE <u>yes</u>		27. WAS WELL CORED <u>N/O</u>			
28. CASING RECORD (Report all strings set in well)							
CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENT RECORD	AMOUNT PULLED		
<u>8 7/8</u>	<u>24.7</u>	<u>393</u>	<u>12 1/4</u>	<u>1.25</u>	<u>NONE</u>		
<u>3 1/2</u>	<u>9.3</u>	<u>2705</u>	<u>7 7/8</u>	<u>39.5</u>	<u>NONE</u>		
29. LINER RECORD							
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	30. TUBING RECORD		
					SIZE	DEPTH SET (MD)	PACKER SET (MD)
31. PERFORATION RECORD (Interval, size and number) <u>2655, 2653, 2651, 2649, 2647, 2645, 2588, 2584, 2582, 2580, 2572, 2570, 2568, 2562 & 2560 w/1 JSPP</u>				32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC. DEPTH INTERVAL (MD) <u>2655-2560</u> AMOUNT AND KIND OF MATERIAL USED <u>3000 gals 15% DS-50 Acid</u>			
33. PRODUCTION							
DATE FIRST PRODUCTION <u>3-5-70</u>		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
FLOW, TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)						TEST WITNESSED BY	
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 <u>[Signature]</u>		TITLE <u>Staff Supervisor</u>				DATE <u>3-9-70</u>	

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

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INSTRUCTIONS

General: This form is designed for submitting a complete and correct well completion report and log on all types of wells and boreholes for 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 or State office. See the instructions on items 22 and 24, and 32, below regarding separate reports for separate completions.

If it is not possible to file this summary report in submitted, copies of all currently available logs (cylinders, geophysics, sample and core analysis, all types electric, etc.), formation and pressure logs, and directional survey, 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 25.

Item 32: 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 33: 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 32 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 27: "Seals Cement": Attached supplemental report 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 for a for each interval to be separately produced. (See instruction for items 22 and 24 above.)

37. SUMMARY OF POROSITY ZONES: SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF; CORED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CUSHION USED, TUBE TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES				38. GEOLOGIC MARKINGS		
FORMATION	TOP	BOTTOM	DESCRIPTION, COMMENTS, ETC.	NAME	MEAS. DEPTH	TRUE VERT. DEPTH
				1000 yds		2385
				medit		2428
				Pleined		2558
				San Andrew		2590