

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 ☐ DRY ☒ Other _____										5. LEASE DESIGNATION AND SERIAL NO. NM-0560429					
b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other _____										6. IF INDIAN, ALLOTTEE OR TRIBE NAME None					
2. NAME OF OPERATOR Read & Stevens, Inc. /										7. UNIT AGREEMENT NAME None					
3. ADDRESS OF OPERATOR P. O. Box 2126, Roswell, New Mexico, 88201										8. FARM OR LEASE NAME Sun-Federal					
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 1980' FSL & 660' FEL Sec. 30-16S-30E, NMPM At top prod. interval reported below At total depth same										9. WELL NO. 1					
14. PERMIT NO. _____ DATE ISSUED _____										10. FIELD AND POOL, OR WILDCAT Wildcat					
15. DATE SPUDDED 7-30-71 16. DATE T.D. REACHED 8-11-71 17. DATE COMPL. (Ready to prod.) 8-12-71 18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 3725 GR 19. ELEV. CASINGHEAD -										11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA Sec. 30-16S-30E NMPM					
20. TOTAL DEPTH, MD & TVD 240' 21. PLUG. BACK T.D., MD & TVD None 22. IF MULTIPLE COMPL., HOW MANY* None 23. INTERVALS DRILLED BY →										12. COUNTY OR PARISH Eddy					
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* Dry & Abandoned										13. STATE New Mexico					
26. TYPE ELECTRIC AND OTHER LOGS RUN None										25. WAS DIRECTIONAL SURVEY MADE No					
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					
None															
29. LINER RECORD												30. TUBING 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			
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—BBL.		GAS—MCF.		WATER—BBL.		OIL—API (CORR.)	
FLOW. TUBING PRESS.		CASING PRESSURE		CALCULATED 24-HOUR RATE		OIL—BBL.		GAS—MCF.		WATER—BBL.					
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)															
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>John L. Anderson Jr.</u> TITLE Agent												DATE 8-19-71			

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

RECEIVED
AUG 28 1971
U. S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO

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.)

M

(M)

SHINE

SHOT PROTECT

(M)

(of bump)

NES--NICK.

WATER

tained from

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

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		MEAS. DEPTH		TOP	
NOTE: If the foregoing and attached information is complete and correct, certify that the foregoing and attached information is complete and correct. TITLE _____		FORMERLY TESTED TESTED BY _____ TESTED DATE _____ TESTED FOR _____		FORMERLY TESTED TESTED BY _____ TESTED DATE _____ TESTED FOR _____		DESCRIPTION, CONTENTS, ETC.		NAME		MEAS. DEPTH		TOP	
1. Name of formation		2. Thickness of formation		3. Location of formation		4. Description of formation		5. Name of formation		6. Measured depth of formation		7. Top of formation	
8. Name of formation		9. Thickness of formation		10. Location of formation		11. Description of formation		12. Name of formation		13. Measured depth of formation		14. Top of formation	
15. Name of formation		16. Thickness of formation		17. Location of formation		18. Description of formation		19. Name of formation		20. Measured depth of formation		21. Top of formation	
22. Name of formation		23. Thickness of formation		24. Location of formation		25. Description of formation		26. Name of formation		27. Measured depth of formation		28. Top of formation	
29. Name of formation		30. Thickness of formation		31. Location of formation		32. Description of formation		33. Name of formation		34. Measured depth of formation		35. Top of formation	
36. Name of formation		37. Thickness of formation		38. Location of formation		39. Description of formation		40. Name of formation		41. Measured depth of formation		42. Top of formation	
43. Name of formation		44. Thickness of formation		45. Location of formation		46. Description of formation		47. Name of formation		48. Measured depth of formation		49. Top of formation	
50. Name of formation		51. Thickness of formation		52. Location of formation		53. Description of formation		54. Name of formation		55. Measured depth of formation		56. Top of formation	
57. Name of formation		58. Thickness of formation		59. Location of formation		60. Description of formation		61. Name of formation		62. Measured depth of formation		63. Top of formation	
64. Name of formation		65. Thickness of formation		66. Location of formation		67. Description of formation		68. Name of formation		69. Measured depth of formation		70. Top of formation	
71. Name of formation		72. Thickness of formation		73. Location of formation		74. Description of formation		75. Name of formation		76. Measured depth of formation		77. Top of formation	
78. Name of formation		79. Thickness of formation		80. Location of formation		81. Description of formation		82. Name of formation		83. Measured depth of formation		84. Top of formation	
85. Name of formation		86. Thickness of formation		87. Location of formation		88. Description of formation		89. Name of formation		90. Measured depth of formation		91. Top of formation	
92. Name of formation		93. Thickness of formation		94. Location of formation		95. Description of formation		96. Name of formation		97. Measured depth of formation		98. Top of formation	
99. Name of formation		100. Thickness of formation		101. Location of formation		102. Description of formation		103. Name of formation		104. Measured depth of formation		105. Top of formation	