

U. S. GEOLOGICAL SURVEY
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

(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 ☐b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other ☐2. NAME OF OPERATOR
Amoco Production Company

NOV - 7 1973

3. ADDRESS OF OPERATOR
BOX 68, HOBBS, N. M. 882404. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)
At surface 1650 FSL x 2310 FEL Sec. 27 (Unit J, NW 1/4 SE 1/4)

At top prod. interval reported below

At total depth

14. PERMIT NO. DATE ISSUED

15. DATE SPUNDED 9-5-73 16. DATE T.D. REACHED 10-9-72 17. DATE COMPL. (Ready to prod.) 10-22-73 18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 3492' RDB 19. ELEV. CASINGHEAD

20. TOTAL DEPTH, MD & TVD 9778' 21. PLUG, BACK T.D., MD & TVD 22. IF MULTIPLE COMPL., HOW MANY* 23. INTERVALS DRILLED BY 0-TD 24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 9314-35, 9474-77, 9528-31, 37, 45 MORROW

25. WAS DIRECTIONAL SURVEY MADE No

26. TYPE ELECTRIC AND OTHER LOGS RUN FORM DENSITY, DUAL LOG, MICRO-MICROLOG

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
11 3/4" CONDUCTOR		21	15"		
8 5/8"	32#	1792	11"	Circ.	
5 1/2"	15.5-17#	9778	7 7/8"	8355 Circ	
				375 SX	

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	30. TUBING RECORD
					SIZE 2 3/8" DEPTH SET (MD) 9239' PACKER SET (MD) 9236'

31. PERFORATION RECORD (Interval, size and number)

9314-35, 9474-77, 9528-31, 37, 45
W/2 JSPF

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

DEPTH INTERVAL (MD) AMOUNT AND KIND OF MATERIAL USED

NONE RECEIVED

NOV 6 1973

33.* PRODUCTION U. S. GEOLOGICAL SURVEY

DATE FIRST PRODUCTION 10-21-73 PRODUCTION METHOD (Flowing, gas lift, pumping—size and type) FLOWING

DATE OF TEST 10-26-73 HOURS TESTED 4 CHOKES SIZE VARIOUS PROD'N. FOR TEST PERIOD 12 GAS—MCF. 657 WATER—BBL. - GAS-OIL RATIO 54323

FLOW. TUBING PRESS. 1098-2362 CASING PRESSURE 910 CALCULATED 24-HOUR RATE 54 OIL—BBL. GAS—MCF. WATER—BBL. OIL GRAVITY-API (CORR.)

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) TO BE SOLD. SHUT IN AWAITING MARKET OUTLET

35. LIST OF ATTACHMENTS NONE

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

SIGNED [Signature] TITLE AREA ENGINEER

DATE OCT 30 1973

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

General: This form is designed for submitting a complete and correct well completion report covering all types of laterals and completions in oil or gas wells, whether Federal or State owned or both, pursuant to applicable Federal and/or State laws and regulations. Any needs or special instructions concerning the use of this form are set forth in the instructions which accompany it. If submitted, particularly with regard to local, regional, or national procedures and practices, either are shown below or will be indicated by the appropriate code number. See instructions on items 27 and 28, below regarding separate reports for exploratory completions.

If not filed prior to the time this summary record is submitted, copies of all currently available logs (drilling, geologists, sampling, etc.) shall be submitted to the State Land and Natural Resources Division. All additional tests and directional surveys, to the extent required by applicable Federal and/or State laws and regulations, should be listed on this form, see item 33.

Item 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult the Bureau of Land Management 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.

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Items 22 and 24: If this well is completed for separate production from more than one interval zone (multiple completion), so state in Item 24; show the intervals, or intervals, top(s), bottom(s), and name(s) (if any) for only the interval reported in Item 32. Submit a separate report (page) on this form, adequately identifying each additional interval to be separately produced, showing the additional data pertinent to such interval.

Item 29: Attached supplemental records for this well should show the details of any multiple stage cementing and the location of the cementing tool.
to be separately produced, showing the additional interval pertinent to such interval.

item 30: Submit a separate completion report on this form for each interval to be separately produced. (See instruction for items 22 and 24 above.)

item 31:

item 32:

item 33:

37. SUMMARY OF POROUS ZONES:					38. GEOLOGIC MARKERS	
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH	TRUE VERT. DEPTH
Moreau	9314	9545	Gas Producing Zone	TOPS SAN AND GLOR ABO WOLF CISCO CANYON STEADY ATOKA MORROW ENCOSTA	1567 2906 5050 6155 7476 8115 8506 8995 9220 9612	