

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.

5. LEASE DESIGNATION AND SERIAL NO.

025527

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

9. WELL NAME

10. FIELD AND POOL, OR WILDCAT

11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA

23 Twn 178 R 27E

12. COUNTY OR PARISH

Eddy

13. STATE

N. Mex.

14. PERMIT NO.

7-7-75

19. ELEV. CASINGHEAD

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

Leonard Latch

3. ADDRESS OF OPERATOR

1812 Texas Ave.

Lubbock, Texas 79401

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

At surface

700' S 1980' East Sec. 23 Twn 178 R

At top prod. interval reported below

At total depth

14. PERMIT NO.

ARTESIA OFFICE

7-7-75

15. DATE SPUNDED

4-13-75

16. DATE T.D. REACHED

8-4-75

17. DATE COMPL. (Ready to prod.)

12-15-76

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

19. ELEV. CASINGHEAD

20. TOTAL DEPTH, MD & TVD

2210'

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

2195'-2095'

22. IF MULTIPLE COMPL., HOW MANY*

23. INTERVALS DRILLED BY

ROTARY TOOLS

CABLE TOOLS

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

1605-22

1604-1623 Greyburg

26. TYPE ELECTRIC AND OTHER LOGS RUN

Gamma Ray

28. CASING RECORD (Report all strings set in well)

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING	AMOUNT PULLED
8 5/8"		406'	12"	150 Sx.	
7"		1193'	8"	250 Sx.	
4 1/2"		2210	6"	210 Sx.	

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					2"	2000'	none

31. PERFORATION RECORD (Interval, size and number)

cog 1605-1622 1 shot per ft.

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
1605-1622	8,000 gal acid

33.*

PRODUCTION

DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)					WELL STATUS (Producing or shut-in)	
12-4-76		Pump					Producing	
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO	
12-4-76	24		→	3.25	Small	35		
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)		
no	no	→	3.25		35	28.2		
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)						TEST WITNESSED BY		

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

TEST WITNESSED BY

35. LIST OF ATTACHMENTS

Log

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

SIGNED

Charles S. Anderson

TITLE

Accountant

DATE

12-23-76

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

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.), formations 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. Consult local State

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 intervals, top(s), bottom(s) and name(s) (if any) for only the interval reported in item 23. 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.)

FORMATION		38. 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		39. GEOLOGIC MARKERS	
From	To	Thickness In Feet	Formation	MEAS. DEPTH	TRUE VERT. DEPTH
0	170	170	Surface Salt & Shale		
170	206	206	Sandy Shale		
206	280	280	Sand		
280	400	400	Anhydrite & Salt		
400	452	452	Anhydrite		
452	476	476	Vates Sand		
476	535	535	Anhydrite & Shale		
535	580	580	Anhydrite		
580	700	700	Anhydrite Shale & Sand		
700	800	800	Anhydrite Shale & Sand		
800	900	900	Anhydrite Shale & Sand		
900	1050	1050	Anhydrite Shale		
1050	1108	1108	Anhydrite		
1108	1138	1138	Queen Sand		
1138	1204	1204	Anhydrite & Sand		
1204	1300	1300	Anhydrite		
1300	1400	1400	Anhydrite		
1400	1550	1550	Anhydrite & Sand		
1550	1606	1606	Anhydrite & Sand		
1606	1624	1624	Sand Lime (Grayburg)		
1624	1698	1698	Sand Lime		
1698	2194	2194	Dolomitic Lime (San Andre)		