

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLI E*

(See other in-
structions on
reverse side)Form approved.
Budget Bureau No. 42-R355.5.

Copy to SF

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

NEWMONT OIL COMPANY ✓

3. ADDRESS OF OPERATOR

P. O. BOX 1305, ARTESIA, NEW MEXICO

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

At surface 1980' FSL & 2080' FEL of Section 34

At top prod. interval reported below Same

At total depth Same

14. PERMIT NO.

ARTESIA OFFICE

5. LEASE DESIGNATION AND SERIAL NO.

LC-056302 (b)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

Square Lake Flood, East

8. FARM OR LEASE NAME

Johnson

9. WELL NO.

18

10. FIELD AND POOL, OR WILDCAT

Square Lake (G. SA)

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

34-16S-31E. NMPM

12. COUNTY OR PARISH

Eddy

13. STATE

New Mexico

15. DATE SPUDDED 3/29/76	16. DATE T.D. REACHED 4/9/76	17. DATE COMPL. (Ready to prod.) 4/17/76	18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 4017' GLM	19. ELEV. CASINGHEAD
20. TOTAL DEPTH, MD & TVD 3775' GLM	21. PLUG, BACK T.D., MD & TVD 3747'	22. IF MULTIPLE COMPL., HOW MANY*	23. INTERVALS DRILLED BY →	ROTARY TOOLS 3775'
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 3486' - 3496', 3541' - 3548', 3586' - 3594' GLM				25. WAS DIRECTIONAL SURVEY MADE Yes

26. TYPE ELECTRIC AND OTHER LOGS RUN

Dual Laterolog - BHC Acoustilog

27. WAS WELL CORED

No

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

CASINO SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
13 3/8"	61#	38'	17 1/2"	Circulated	-0-
4 1/2"	10.5#	3775'	11" (top)	274 sacks	-0-
			7 7/8" (Btm)	650 sacks	-0-

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					2 3/8"	3598'	---

31. PERFORATION RECORD (Interval, size and number)

3486' - 96, 3541' - 48', 3586' - 94' GLM

0.43" hole 2 shots/ft.

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED

33.* PRODUCTION

DATE FIRST PRODUCTION 4/17/76		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Pumping			WELL STATUS (Producing or shut-in) Producing		
DATE OF TEST 4/26/76	HOURS TESTED 24	CHOKE SIZE None	PROD'N. FOR TEST PERIOD →	OIL—BBL. 70	WATER—BBL. 3	GAS-OIL RATIO TSTM	
FLOW. TUBING PRESS. ----	CASINO PRESSURE -----	CALCULATED 24-HOUR RATE →	OIL—BBL. 70	GAS—MCF. ---	WATER—BBL. 3	OIL GRAVITY-API (CORR.) 38°	

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

TEST WITNESSED BY

Frank Hammond

35. LIST OF ATTACHMENTS

Dual Laterolog - BHC Acoustilog

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

SIGNED

C. E. Joy

TITLE

Superintendent

DATE

4/28/76

*(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, 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: 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.)

[illegible]

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					
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH TRUE VERT. DEPTH
Salt	670'	1825'			
Yates	1850'				
Seven Rivers	2665'				
Queen	2895'				
Grayburg	2300'				
Metex	3486'				
Upper Premier	3541'				
Lower Premier	3586'				