

**UNITED STATES DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY**

Form approved.
Budget Bureau No. 42-R355.5.

5. LEASE DESIGNATION AND SERIAL NO.

NM-9987

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Ryan Federal

9. WELL NO.

2

10. FIELD AND POOL, OR WILDCAT

High Pressure & designated

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

Sec. 19, 16S, 29E

12. COUNTY OR PARISH

Eddy

13. STATE

New Mexico

1a. TYPE OF WELL:

OIL

WELL

☒

GAS

WELL

☐

DRY

☐

Other

JUL 1 1982

b. TYPE OF COMPLETION:

NEW

☐

WORK

☐

DEEP-

EN

☐

PLUG

BACK

☐

DIFF.

RESVR.

☐

Other

O.C.D.

2. NAME OF OPERATOR

Exxon Corporation

3. ADDRESS OF OPERATOR

Box 1600, Midland, TX 79702

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

At surface 1780' FNL and 660' FEL of Section

At top prod. interval reported below

At total depth

14. PERMIT NO.

DATE ISSUED

15. DATE SPUDDED

4-28-82

16. DATE T.D. REACHED

4-30-82

17. DATE COMPL. (Ready to prod.)

6-20-82

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

GR 3630

19. ELEV. CASINGHEAD

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20. TOTAL DEPTH, MD & TVD

2310

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

2227

ACCEPTED FOR RECORD

HOW MANY*

--

23. INTERVALS

DRILLED BY

ROTARY TOOLS

0-2310

CABLE TOOLS

--

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

1688 - 1804

25. WAS DIRECTIONAL

SURVEY MADE

No

26. TYPE ELECTRIC AND OTHER LOGS RUN

DLL/MLL, CN/CDL/GR, Prolog, Spectralog

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
8 5/8	24#	348	12 1/4	330	
5 1/2	14#	2300	7 7/8	650 - TOC 500' TS	

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					2 7/8	1658	1658

31. PERFORATION RECORD (Interval, size and number)

1688-1804 8 shots

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
1688-1804	Acidize w/1500 gal 7 1/2% FEHCl acid. Frac w/5000 gal jelled 2% KCl & 40,000# 20-40 sand, 20,000# 10-20 sand.

33.* PRODUCTION

DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)				WELL STATUS (Producing or shut-in)	
5-21-82		Pump				Pump	
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
6-20-82	24	Pump	→	19	10	0	526
FLOW, TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)	
--	--	→	19	10	0	31.7	

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

D. H. Lowe

TITLE Sr. Administrator

DATE

6-24-82

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

INSTRUCTIONS

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.)

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.	38. GEOLOGIC MARKERS		
				NAME	MEAS. DEPTH	TRUE VERT. DEPTH
Queen	1504	1909		Yates	763	763
				Seven Rivers	909	909
				Queen	1504	1504
				Penrose	1745	1745
				Grayburg	1909	1909