

**RECEIVED BY**  
**FEB 01 1986**  
**ARTESIA OFFICE**

UNITED STATES DEPARTMENT OF THE INTERIOR  
**O. C. D. GEOLOGICAL SURVEY**

957

5. LEASE DESIGNATION AND SERIAL NO.

NM-10276

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

TXO Federal

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

High Lonesome - Success

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

Sec. 8-T16S-R29E

12. COUNTY OR PARISH  
Eddy

13. STATE  
NM

**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  
McClellan Oil Corporation

3. ADDRESS OF OPERATOR  
P.O. Drawer 730 Roswell, NM 88220

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)\*  
 At surface 660 FSL & 660 FWL  
 At top prod. interval reported below  
 At total depth

14. PERMIT NO. DATE ISSUED

15. DATE STUDDED 12/26/85 16. DATE T.D. REACHED 1/1/86 17. DATE COMPL. (Ready to prod.) 1/21/86 18. ELEVATIONS (DF, RKB, RT, GR, ETC.)\* 3661' G.L. 19. ELEV. CASINGHEAD 3661'

20. TOTAL DEPTH, MD & TVD 1830' 21. PLUG, BACK T.D., MD & TVD 1820' 22. IF MULTIPLE COMPL., HOW MANY\* 23. INTERVALS DRILLED BY → Q-TD 24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)\* NONE 25. WAS DIRECTIONAL SURVEY MADE YES

26. TYPE ELECTRIC AND OTHER LOGS RUN Schlumberger CNL-LDT 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
8-5/8"	20	220'	12-1/4"	200 sx	NONE
5-1/2"	14	1830'	7-7/8"	370 sx	NONE

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)

30. TUBING RECORD

SIZE	DEPTH SET (MD)	PACKER SET (MD)
2-3/8"	PULLED	

31. PERFORATION RECORD (Interval, size and number)

1661'-1669', 40, 13  
1718'-1756', 40, 9

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
1661'-1669'	1,000 gals 10% NE acid
1718'-1756'	1,000 gals 10% NE acid,
	20,000 gals gelled water,
	18,500 lbs 20-40, 25,000 lbs 12-20

33.\* PRODUCTION

DATE FIRST PRODUCTION \_\_\_\_\_ PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) \_\_\_\_\_ WELL STATUS (Producing or shut-in) \_\_\_\_\_

Dry Hole

DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
			→				

ACCEPTED FOR RECORD

FLOW, TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)
		→				

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) \_\_\_\_\_ TEST WITNESSED BY \_\_\_\_\_

JAN 27 1986

35. LIST OF ATTACHMENTS  
Deviation Survey

CAPISBAD, NEW MEXICO

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

SIGNED Paul Regalade TITLE \_\_\_\_\_ DATE \_\_\_\_\_

\*(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.

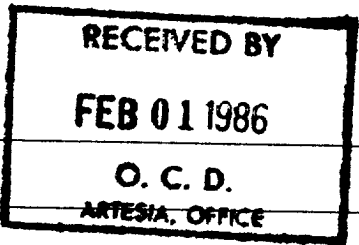
**Item 18:** Indicate which elevation is used as reference (where not otherwise shown) for depth measurements given in other spaces on this form and in any attachments.

**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:		38. GEOLOGIC MARKERS	
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.
			MEAN. DEPTH
			TRUE VERT. DEPTH
			166'
			240'
			874'
			980'
			1491'



WELL NAME AND NUMBER TXO Federal #1  
 LOCATION \_\_\_\_\_  
 OPERATOR McClellan Oil Corp.  
 DRILLING CONTRACTOR Salazar Brothers Drilling, Inc.

The undersigned hereby certifies that he is an authorized representative of the drilling contractor who drilled the above described well and has conducted deviation tests and obtained the following results:

<u>Degrees @ Depth</u>	<u>Degrees @ Depth</u>	<u>Degrees @ Depth</u>
<u>1/2° @ 566'</u>	_____	_____
<u>3/4° @ 977'</u>	_____	_____
<u>1/2° @ 1500'</u>	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

DRILLING CONTRACTOR Salazar Brothers Drilling, Inc.  
 BY *Ormin Salazar*  
 TITLE President

Subscribed and sworn to before me this 15 day of January, 1986.

*Ileen Maestas*  
 NOTARY PUBLIC

Bernalillo County, New Mexico

My Commision Expires:  
 May 10, 1986