

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE

MISSION

Form approved.
Budget Bureau No. 42-R355.5.(See instructions on
reverse side)
Artesia, NM 88210

5. LEASE DESIGNATION AND SERIAL NO.

NM 9987

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Max Federal

9. WELL NO.

3

10. FIELD AND POOL, OR WILDCAT

East Red Lake 2-6

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

Sec. 30-16S-29E

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. DESVR. ☐ Other ☐

2. NAME OF OPERATOR

Fred Pool Drilling, Inc. ✓

3. ADDRESS OF OPERATOR

P.O. Box 1393, Roswell, N.M. 88201

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

At surface

330 FWL 2310 FNL SW/4 NW/4

At top prod. interval reported below

At total depth

14. PERMIT NO.

30-015-25557

DATE ISSUED

7-8-86

12. COUNTY OR

PARISH

Eddy

13. STATE

N.M.

15. DATE SPUDDED

6-29-86

16. DATE T.D. REACHED

8-7-86

17. DATE COMPL. (Ready to prod.)

8-16-86

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

Gr 3692

19. ELEV. CASINGHEAD

3692'

20. TOTAL DEPTH, MD & TVD

1900'

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

1880'

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)*

1828'-1838'

Penrose

25. WAS DIRECTIONAL
SURVEY MADE

No

26. TYPE ELECTRIC AND OTHER LOGS RUN

CNL; CCL and PR

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	24#	305'	12 1/4	200 sx HE 2	circ/
4 1/2	9.5#	1900'	7 7/8	250 sx Dowell Lite	
				175sx 25/75 POZ	-

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					2 3/8	1755'	none

31. PERFORATION RECORD (Interval, size and number)

1828'-1838' 14 shots

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
1828-1838'	250 gal. 15% HCL acid;
	Frac: 30,000 gal. gel water,
	20,000# 20/40 sand &
	25,000# 12/20 sand.

33. PRODUCTION

DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)				WELL STATUS (Producing or shut-in)	
8-16-86		pumping				Producing	
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
8-22-86	24hrs.		→	12	tstm	trace	822/1
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)	
20#	20#	→	12	TSTM	trace	822/1	

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

Sold

TEST WITNESSED BY

Fred Pool, J.r

35. LIST OF ATTACHMENTS

Compensated Neutron logs (2)

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

SIGNED

TITLE

President

DATE 8-26-86

*(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 37.

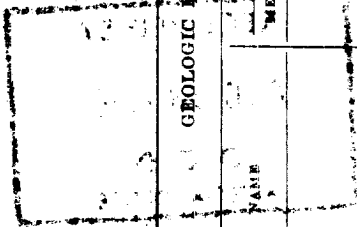
Item 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

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			38. GEOLOGIC MARKERS			
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH	TRUE VERT. DEPTH
shale, red bed	0	40'	shale			
shale	40	200'	Red Bed			
	200	482'	shale			
	482	560'	salt, anhydrite			
	560	905	dolomite			
	905	970	anhydrite			
	970	1560	anhydrite, salt			
	1560	1625'	anhydrite			
	1625	1900	anhydrite, shale			
			anhydrite			