

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.

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

General American Oil Company of Texas

3. ADDRESS OF OPERATOR

P. O. Box 416, Loco Hills, New Mexico 88255

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements) At surface 1980' FNL and 660' FEL

At top prod. interval reported below Sec. 26, T-17S, R-29E

At total depth

14. PERMIT NO.

DATE ISSUED

Re-

15. DATE SPUDDED 5-17-72	16. DATE T.D. REACHED 6-1-72	17. DATE COMPL. (Ready to prod.) 6-23-72	18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 3579' DF	19. ELEV. CASINGHEAD 3577'
20. TOTAL DEPTH, MD & TVD 3542'	21. PLUG, BACK T.D., MD & TVD 3400' 3536'	22. IF MULTIPLE COMPL., HOW MANY*	23. INTERVALS DRILLED BY ROTARY TOOLS	CABLE TOOLS 0 - 3542'

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

2403' - 3488' Grayburg & San Andres

26. TYPE ELECTRIC AND OTHER LOGS RUN

SWN, GR & Caliper, Acoustilog

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	416'	10-3/4"	150 Sacks	None
7"	20	2800'	7-7/8"	100 sacks	None

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
4-1/2"	2776'	3542'	145		2-3/8" OD BUE	3495'	
9.5"							

31. PERFORATION RECORD (Interval, size and number)

2403'-2411', 2478'-2481', 2514'-2518', 2549'-2553', 2678'-2681', 2692'-2696', 2930'-2933', 2954'-2958', 3052'-3056', 3078'-3081', 3252'-3256', 3304'-3308', 3446'-3449', 3482'-3488'

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
	SEE REVERSE SIDE

33.*

PRODUCTION

DATE FIRST PRODUCTION 8-19-72		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Pumping				WELL STATUS (Producing or shut-in) Producing	
DATE OF TEST 9-5-72	HOURS TESTED 24	CHOKE SIZE	PROD'N. FOR TEST PERIOD →	OIL—BBL. 40	GAS—MCF. 50	WATER—BBL. 100 Load	GAS-OIL RATIO
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE →	OIL—BBL. 40	GAS—MCF. 50	WATER—BBL. 100 Load	OIL GRAVITY-API (CORR.)	

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

Sold to Phillips

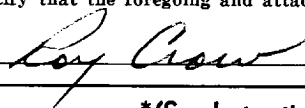
TEST WITNESSED BY

35. LIST OF ATTACHMENTS

Logs

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

SIGNED



TITLE

Asst. Dist. Superintendent

DATE

9-20-72

*(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.)

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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	TOP	TRUE VERT. DEPTH
Loco Hills Metex Hobbs Vacuum San Andres	2394' 2475' 2676' 2928'	2412' 2554' 2696' 3488'					
	FRAC AND ACID TREATMENT		Fraced with 30,000# sand and 30,000 gallons water. Fraced with 30,000# sand and 30,000 gallons water. Acidized with 3,000 gallons 15%. Acidized with 3,000 gallons 15%. Acidized with 2,500 gallons 15%. Attempted to treat and communicated. Fraced with 40,000# sand and 40,000 gallons water.				