

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other in-
structions 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 Sinclair Oil & Gas Company						5. LEASE DESIGNATION AND SERIAL NO. Las Cruces 029435 (b)	
3. ADDRESS OF OPERATOR 520 A. Broadway, Hobbs, New Mexico						6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 660' from So. & East lines Sec 5-T173-R31E, Bddy County, New Mexico At top prod. interval reported below At total depth						7. UNIT AGREEMENT NAME	
14. PERMIT NO.						DATE ISSUED	
15. DATE SPUDDED 12/1/63						12. COUNTY OR PARISH Bddy	
16. DATE T.D. REACHED 12/23/63						13. STATE New Mexico	
17. DATE COMPL. (Ready to prod.) 1-4-64						10. FIELD AND POOL, OR WILDCAT Grayburg-Jackson	
18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 3868 GR						11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA Sec 5-T173-R31E NMPM	
19. ELEV. CASINGHEAD						20. TOTAL DEPTH, MD & TVD 3728	
21. PLUG BACK T.D., MD & TVD						22. IF MULTIPLE COMPL., HOW MANY*	
23. INTERVALS DRILLED BY						ROTARY TOOLS	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* Open Hole 3054-3728'						CABLE TOOLS Surf - 3728	
25. WAS DIRECTIONAL SURVEY MADE						26. TYPE ELECTRIC AND OTHER LOGS RUN Camma-Ray Neutron & Caliper	
27. WAS WELL CORED						28. RECEIVED JAN 9 1964 O. E. C. HARRIS ARTESIA OFF. HARRIS	
29. CASING RECORD (Report all strings set in well)						30. TUBING RECORD	
CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED		
8 5/8	24#	654	10"	100 sacks			
7	20#	3059	8"	200 sacks			
31. PERFORATION RECORD (Interval, size and number) Completed open hole						32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
						DEPTH INTERVAL (MD)	
						AMOUNT AND KIND OF MATERIAL USED	
						3590-3632	
						1000 gals 15% reg. acid	
						3633 - 3728	
						1000 gals 15% reg. acid	
33.* PRODUCTION							
DATE FIRST PRODUCTION 1-4-64		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Pumping 2 1/2" x 1 1/2" Plunger				WELL STATUS (Producing or shut-in) Producing	
DATE OF TEST 1-4-64	HOURS TESTED 24	CHOKE SIZE --	PROD'N. FOR TEST PERIOD →	OIL—BBL. 15	GAS—MCF. 17	WATER—BBL. 0	GAS-OIL RATIO 1100/1
FLOW. TUBING PRESS. --	CASING PRESSURE --	CALCULATED 24-HOUR RATE →	OIL—BBL. 15	GAS—MCF. 17	WATER—BBL. 0	OIL GRAVITY-API (CORR.) 34.0	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Sold						TEST WITNESSED BY Fred Strickland	
35. LIST OF ATTACHMENTS None							
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records							
SIGNED H. L. BEEKMAN ACTING DISTRICT ENGINEER		TITLE District Superintendent		DATE Jan. 6, 1964			

APPROVED
JAN 8 1964
H. L. BEEKMAN
ACTING DISTRICT ENGINEER

(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 land and/or State office. See instructions on items 22 and 24, and 33, below regarding separate reports for separate completions.

and/or State source; see instructions on reverse side.) 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, stratigraphic columns, well logs, test results, directional surveys, and other pertinent information shall be furnished by the operator to the Bureau of Land Management. 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.

Item 22: indicate which elevation is used as reference (whether base station or observation station). **Item 23:** indicate when elevation is used as reference (multiple completion), so state in item 22, and in item 24 show the producing interval, or intervals, top(s), bottom(s) and name(s). **Item 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 27: *Nucleus Cement*; attached supplemental records for this item showing the location of any municipal sewage treatment plant and the location of any municipal sewage treatment plant. (See instruction for items 22 and 24 above.)

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.)

**Grayburg-Pan
Andrew**