Form 9-330
(Rev. 5-63)

N. M. O. C. C. COPY

Copy to 37.

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*

5. LEASE DESIGNATION AND SERIAL NO.: LC 029435 (b)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME:

7. UNIT AGREEMENT NAME:

8. FARM OR LEASE NAME: J. L. Keel "B" #2

9. WELL NO.: 4

10. FIELD AND POOL, OR WILDCAT: Grayburg Jackson

11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA: 8-T17S-R31E

1a. TYPE OF WELL: OIL WELL [X] GAS WELL [ ] DRY [ ] Other

b. TYPE OF COMPLETION: NEW WELL [ ] WORK OVER [ ] DEEP-EN [X] PLUG BACK [ ] DIFF. RESVR. [ ] Other Water Injection

2. NAME OF OPERATOR: Sinclair Oil & Gas Company

3. ADDRESS OF OPERATOR: P. O. Box 1920, Hobbs, New Mexico

4. LOCATION OF WELL (*Report location clearly and in accordance with any State requirements*)*
At surface: 660 feet from South line and 1980 feet from East line
At top prod. interval reported below
At total depth: same as above

14. PERMIT NO. | DATE ISSUED

12. COUNTY OR PARISH: Eddy | 13. STATE: New Mexico

15. DATE SPUDDED	16. DATE T.D. REACHED	17. DATE COMPL. (*Ready to prod.*)	18. ELEVATIONS (DF, RKB, RT, GR, ETC.)*	19. ELEV. CASINGHEAD
4-23-66	5-4-66	5-16-66 Inject	3743' GR	

20. TOTAL DEPTH, MD & TVD	21. PLUG, BACK T.D., MD & TVD	22. IF MULTIPLE COMPL., HOW MANY*	23. INTERVALS DRILLED BY	ROTARY TOOLS	CABLE TOOLS
3730'	3715'		→		3279-3730'

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*
Injection
3480-82', 3488-92', 3527-29', 46', 52', 56-58', 72-76', 78-80', 3603-06', 17-24', 52-55', 60-63', 78-82'. 3226-38', 3040-50, 3004-12'.

25. WAS DIRECTIONAL SURVEY MADE: No

26. TYPE ELECTRIC AND OTHER LOGS RUN: None

27. WAS WELL CORED: No

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ARTESIA, NEW MEX.

28. CASING RECORD (*Report all strings set in well*)

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)
4-1/2"OD	2818'	3728'	160	

30. TUBING RECORD

SIZE	DEPTH SET (MD)	PACKER SET (MD)
2-3/8"OD	2967'	2967'

31. PERFORATION RECORD (*Interval, size and number*)
3480-82',3488-92',3527-29',46',52',56-58', 72-76', 78-80', 3603-06',17-24',52-55', 60-63',78-82'. w/84 3/8" holes. 3226-38', 3040-50',3004-12' w/60 3/8" Holes.

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
3480-3682'	2100 gals. BDA
3004-3238'	3250 gals. Mud Acid

33.* PRODUCTION

DATE FIRST PRODUCTION	PRODUCTION METHOD (*Flowing, gas lift, pumping—size and type of pump*)	WELL STATUS (*Producing or shut-in*)
5-16-66 Injection	Water Injection	Injecting

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

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

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 [signature] TITLE Superintendent DATE 5-17-66

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

Orig&2cc: USGS Artesia
cc: Region Office

INSTRUCTIONS

orm is designed for sub… plete and correct … completion report and lo… agency or a State agency, ant to applicable Federa… laws and regula… ssary special in… particularly with regard to l… al procedu… are shown below … number of copies to be state office. See instructions on it… d 33, below … rts for separate comple… rom, the local Federal … the time this summary … d copies … logs … geologists, … al … ectric, etc.), forma- …ests, and directional survey… ached he… uired … le Federa… 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.
Grayburg Jackson	3279'	3730'	Deepened 3279' to 3730' White Dolomite

38. GEOLOGIC MARKERS

NAME	TOP MEAS. DEPTH	TOP TRUE VERT. DEPTH

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