

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

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 **SHALLY OIL COMPANY**3. ADDRESS OF OPERATOR **P. O. Box 739 - Hobbs, New Mexico 88240**

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

At surface **1900' FNL & 1900' FNL Section 23-17S-31E**

At top prod. interval reported below

At total depth **3871'**

14. PERMIT NO. DATE ISSUED

Marking Information

15. DATE SPUNDED **9-19-67** 16. DATE T.D. REACHED **9-22-67** 17. DATE COMPL. (Ready to prod.) **Oct. 1, 1967** 18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* **3868' BY** 19. ELEV. CASINGHEAD **3868'**20. TOTAL DEPTH, MD & TVD **3871'** 21. PLUG, BACK T.D., MD & TVD **3844'** 22. IF MULTIPLE COMPL., HOW MANY* **1** 23. INTERVALS **0-3844'** ROTARY TOOLS **0-3844'** CABLE TOOLS **0-3844'**24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* **3243-3830 - Grayburg & San Andres** 25. WAS DIRECTIONAL SURVEY MADE **No**26. TYPE ELECTRIC AND OTHER LOGS RUN **Lane Wells - Gamma Ray Neutron** 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" OD	240	751'	11-1/4"	95	None
7"	200	3202'	8-1/4"	150	None
4-1/2"	10.50	3855'		700	None

29. LINER RECORD 30. TUBING RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
None					2"	3250'	3150'

31. PERFORATION RECORD (Interval, size and number)

Perforated 4-1/2" OD casing 3243-3830' for total of 34' and 34 shots (See back of sheet for detail).

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
3243-3830'	2500 gal. 15% Reg. Acid
3243-3830'	30,000 gal. water & 30,000# 20/40 sand

33. PRODUCTION

DATE FIRST PRODUCTION **Oct. 1, 1967** PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) **Flowing** WELL STATUS (Producing or shut-in) **Producing**DATE OF TEST **Oct. 2, 1967** HOURS TESTED **24** CHOKED SIZE **2" tubing** PROD'N. FOR TEST PERIOD **7** OIL—BBL. **50** GAS—MCF. **0** WATER—BBL. **0** GAS-OIL RATIO **7143**FLOW. TUBING PRESS. **0** CASING PRESSURE **0** CALCULATED 24-HOUR RATE **7** OIL—BBL. **50** GAS—MCF. **0** WATER—BBL. **0** OIL GRAVITY-API (CORR.) **358**34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) **Gas Vented** TEST WITNESSED BY **Frank King**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 (Signed) **V. B. Fletcher** TITLE **District Superintendent** DATE **October 25, 1967**

*(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, 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 obtained from, the local Federal or State agency, are shown below or will be issued by, or may be obtained from, the local Federal or State agency. The following instructions apply to all well completion reports 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 or State agency.

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 should be listed on this form, see item 35.

or Federal office for specific instructions.

as reference (where not otherwise shown) for depth measurements given in other spaces on this form and in any attachments.

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, showing the additional data pertinent to such interval.

(in any / for each case) showing the additional data pertinent to such interval, or intervals, top(s), bottom(s) and name(s) separately produced, for each additional interval to be separately produced, showing the location of the cementing tool,

Item 29: "Sack's Cement": Attached supplemental records for this well should show the details of any multiple stage cementing and the location of the cement for each additional interval to be separately produced, showing the location of the cement for each additional interval to be separately produced. (See instruction for items 22 and 24 above.)

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