

XEROX COPY
UNITED STATES DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY
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(See instructions on reverse side)Copy to ~
Form approved.
Budget Bureau No. 42-R355.5.

APR 4 1979

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 Anadarko Production Company							
3. ADDRESS OF OPERATOR P. O. Box 67, Loco Hills, New Mexico 88255							
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 1980' FSL & 990' FWL Sec. 29, T17S, R30E At top prod. interval reported below Same Eddy County, New Mexico At total depth Same							
14. PERMIT NO. RECEIVED						DATE ISSUED	
15. DATE SPUDDED 9-23-76						16. DATE T.D. REACHED 11-4-76	
17. DATE COMPL. (Ready to prod.) 12-9-76						18. QUANTITIES (DF, REB, RT, GR, ETC.)* 3555.3 GL	
19. ELEV. CASINGHEAD 3557' GL							
20. TOTAL DEPTH, MD & TVD 11,400'		21. PLUG, BACK T.D., MD & TVD 10,827' H, 370'		22. IF MULTIPLE COMPL., HOW MANY* O. C. C.			
23. INTERVALS DRILLED BY ROTARY TOOLS						CABLE TOOLS	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME 10,782' - 10,786' - Morrow Limestone						25. WAS DIRECTIONAL SURVEY MADE Yes	
26. TYPE ELECTRIC AND OTHER LOGS RUN Gamma Ray Comp. Neutron & Simultaneous Dual Laterolog. Fracture Finder & Cement Bond Log						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	
13-3/8"	48#	488' KB	17-1/2"	500 Sacks		None	
9-5/8"	36#	3,503' KB	12-1/4"	1000 Sacks		None	
4-1/2"	13.5#	11,400' KB	8-3/4"	900 Sacks		None	
29. LINER RECORD							
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)			
30. TUBING RECORD							
SIZE	DEPTH SET (MD)	PACKER SET (MD)					
2-3/8"	10,773'	10,773'					
31. PERFORATION RECORD (Interval, size and number)							
10,782' - 10,786' @ 4 SPF - .50 diam holes							
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.							
DEPTH INTERVAL (MD)			AMOUNT AND KIND OF MATERIAL USED				
10,782'-10,786'			Acidized w/1000 gals 7 1/2% Morrow Esflow acid w/1000 CF N₂/bbl.				
33. PRODUCTION							
DATE FIRST PRODUCTION 2-20-79		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Flowing			WELL STATUS (Producing or shut-in) Producing		
DATE OF TEST 3-3-79	HOURS TESTED 24	CHOKE SIZE 14/64"	PROD'N. FOR TEST PERIOD 15	OIL—BBL. 369	GAS—MCF. 1	GAS-OIL RATIO 24600:1	
FLOW. TUBING PRESS. 1400#	CASING PRESSURE 100#	CALCULATED 24-HOUR RATE 15	OIL—BBL. 369	GAS—MCF. 1	WATER—BBL. 55.5	OIL GRAVITY-API (CORR.)	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Sold						TEST WITNESSED BY J. R. (Bud) Matthews	
35. LIST OF ATTACHMENTS							
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records							
SIGNED Original Signed by Jerry F. Buckles		TITLE Area Supervisor		DATE March 22, 1979			

*(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, a separate report must be submitted.

tion 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.

14-00000-20. "Submit a separate report (page) on this form, adequately identified, 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 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