

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUP. TE*

(See other in-
structions on
reverse side)Form approved.
Budget Bureau No. 42-R355.5.

45F

5. LEASE DESIGNATION AND SERIAL NO.

LC-028731 (A)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Little Wing Fed. Com.

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Wildcat

11. SEC., T., B., M., OR BLOCK AND SURVEY
OR AREA

14. T-17-S, R-29-E

12. COUNTY OR
PARISH

Eddy

13. STATE

New Mexico

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

Oryx Energy Company

3. ADDRESS OF OPERATOR

P. O. Box 1861, Midland, Texas 79702

O. C. D.

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

At surface

L, 2180' FSL & 860' FWL

At top prod. interval reported below

At total depth

14. PERMIT NO.

DATE ISSUED

9-29-89

15. DATE SPUDDED

10-10-89

16. DATE T.D. REACHED

11-10-89

17. DATE COMPL. (Ready to prod.)

11-13-89

3603.2

18. ELEVATIONS (DF, RKB, RT, GR, ETC.)*

19. ELEV. CASINGHEAD

20. TOTAL DEPTH, MD & TVD

11,025

21. PLUG, BACK T.D., MD & TVD

10,972

22. IF MULTIPLE COMPL.,
HOW MANY*23. INTERVALS
DRILLED BY

ROTARY TOOLS

CABLE TOOLS

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

10,728-10,748' Morrow

26. TYPE ELECTRIC AND OTHER LOGS RUN

Sonic,
DLL/Neutron Density, CBL

27. WAS WELL CORRED

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"	54.5#	440'	17 1/2"	425 Sxs C	88 Sxs
8 5/8"	32#	4500'	11"	2000 Sxs Lite & C	190 Sxs
5 1/2"	17#	11,024'	7 7/8"	1300 Sxs "H", 50:50 POZ	TOC @ 6500'

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					2 7/8"	10,645	10,645

31. PERFORATION RECORD (Interval, size and number)

10,728' - 10,748' Morrow, 6 SPF, 120 Holes

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

DEPTH INTERVAL (MD)

AMOUNT AND KIND OF MATERIAL USED

33.*

PRODUCTION

DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)				WELL STATUS (Producing or shut-in)	
11-30-89		Flowing				SI	
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
12-1-89	1	23/64	—————→				
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)	
2625	0	—————→	120	4476	0	54.3° Condensate	

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

Sold

Well SI, waiting on pipeline connection

TEST WITNESSED BY

35. LIST OF ATTACHMENTS

3160-5, C-122, C-123, C-104, inclination report

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

SIGNED

Mona Perez

TITLE

Accountant

DATE

12-21-89

*(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 19: 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.
Tubb	5470	6060	Dolomite
Abo	6060	7280	Dolomite
Wolfcamp	7280	10006	Lime and Shale
Strawn	10006	10250	Lime
Atoka Clastics	10250	10428	Sand and Shale
Atoka Carb.	10428	10670	Lime and Shale
Morrow	10670	10885	Sand and Shale
Mississippi	10885	11025TD	Shale

38. GEOLOGIC MARKERS

NAME	MEAS. DEPTH	TOP
Tubb	5470	
Abo	6060	
Wolfcamp	7280	
Strawn	10006	
Atoka Clast.	10250	
Atoka Carb.	10428	
Morrow	10670	
Miss.	10885	