

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.

5. LEASE DESIGNATION AND SERIAL NO.

LC 070133

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

Pangasco Shugart Queen Sand

8. FARM OR LEASE NAME

Unit

Tract 3

9. WELL NO.

2

10. FIELD AND POOL, OR WILDCAT

Shugart

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

8-18S-31E

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 ☐

Re-Entry

2. NAME OF OPERATOR

Herman J. Ledbetter

3. ADDRESS OF OPERATOR

P. O. Drawer N

Hobbs, New Mexico 88240

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

At surface 660' FEL & 660' FSL Section 8-18S-31E

At top prod. interval reported below Same

At total depth Same

14. PERMIT NO.

DATE ISSUED

15. DATE SPUDDED

3-1-63

16. DATE T.D. REACHED

3-30-63

17. DATE COMPL. (Ready to prod.)

1-18-74

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

3673 GR.

19. ELEV. CASINGHEAD

3674

20. TOTAL DEPTH, MD & TVD

3185

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

3185

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

ROTARY TOOLS

CABLE TOOLS

X

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

3147-83 (Queen Sand)

25. WAS DIRECTIONAL
SURVEY MADE

No

26. TYPE ELECTRIC AND OTHER LOGS RUN

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
10 3/4"		708		50	498
7"	20	3073		100	1605
7"	20	550		50	None
4 1/2"	9.5	1750		100	None

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					2 3/8	3143	None

31. PERFORATION RECORD (Interval, size and number)

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
3073-3185	Frac 21,000 gal. water, 19,000 pds. sand

33.* PRODUCTION

DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)				WELL STATUS (Producing or shut-in)	
1-18-74		Pumping				Producing	
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
1-19-74	24		→	35	TSTM	0	
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.		OIL GRAVITY-API (CORR.)
		→	35	0	20		38

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

Used for fuel

TEST WITNESSED BY

Herman J. Ledbetter

35. LIST OF ATTACHMENTS

36. I hereby certify that the foregoing and attached information is complete and correct in accordance with all available records

SIGNED

TITLE

Operator
ARTESIA, NEW MEXICO

DATE

JAN 22 1974

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

O. C. C.
ARTESIA, OFFICE

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.)

RECEIVED
JAN 14 1974
BUREAU OF LAND MANAGEMENT
U.S. DEPARTMENT OF THE INTERIOR
WASHINGTON, D.C.

37. SUMMARY OF COMPLETION ZONES: SUMMARY OF ALL REPORTED ZONES OF POROSITY AND CONTENTS THEREOF; CORED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEEP INTERVAL TESTS, CUSHION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES		38. GEOLOGIC MARKERS	
FORMATION	TOP	NAME	MEAS. DEPTH
	BOTTOM		TRUE VERT. DEPTH
This is a recompletion of an old hole. See original completion for data.			