

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other instructions on reverse side)

Copy to SF

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 Midwest Oil Corporation						3. ADDRESS OF OPERATOR 1500 Wilco Building Midland, Texas	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements) At surface 660' FSL & 660' FWL At top prod. interval reported below At total depth Same						5. LEASE DESIGNATION AND SERIAL NO. NM 0471776	
6. IF INDIAN, ALLOTTEE OR TRIBE NAME						7. UNIT AGREEMENT NAME	
8. FARM OR LEASE NAME Federal "J" Co.						9. WELL NO. 1	
10. FIELD AND POOL, OR WILDCAT Wildcat - Cisco						11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA 21-18S-24E	
12. COUNTY OR PARISH Eddy						13. STATE N. Mex.	
14. PERMIT NO.		DATE ISSUED		15. DATE SPUDDED 9-25-73		16. DATE T.D. REACHED 10-3	
17. DATE COMPL. (Ready to prod.) 10-5-73		18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* Gr. 3801.4		19. ELEV. CASINGHEAD		20. TOTAL DEPTH, MD & TVD 7043'	
21. PLUG, BACK T.D., MD & TVD		22. IF MULTIPLE COMPL., HOW MANY*		23. INTERVALS DRILLED BY		24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 7005-23 Cisco	
25. WAS DIRECTIONAL SURVEY MADE no		26. TYPE ELECTRIC AND OTHER LOGS RUN cmt Bond		27. WAS WELL CORED no		28. CASING RECORD (Report all strings set in well)	
CASING SIZE		WEIGHT, LB./FT.		DEPTH SET (MD)		HOLE SIZE	
16"		55#		41'		20"	
11 3/4		42#		465'		15"	
8 5/8		24 & 32#		2099'		11"	
5 1/2		15.5 & 17#		8750'		7 7/8"	
29. LINER RECORD		SIZE		TOP (MD)		BOTTOM (MD)	
30. TUBING RECORD		SIZE		DEPTH SET (MD)		PACKER SET (MD)	
31. PERFORATION RECORD (Interval, size and number) 7005-23 w/2 SPF		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.		DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED	
7005-23		1000 gal 15% MSA		5000 gal 20% retarded		250 gal 15% NE	
33.* PRODUCTION		DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)		WELL STATUS (Producing or shut-in) Shut-in	
DATE OF TEST		HOURS TESTED		CHOKE SIZE		PROD'N. FOR TEST PERIOD	
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.) Vent		TEST WITNESSED BY B. Jacobs		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 Bonnie Husband		TITLE Production Clerk		DATE 10-22-73		BH:ng 10-23-73	

*(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 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			38. GEOLOGIC MARKERS		
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	TOP MEAS. DEPTH TRUE VERT. DEPTH
			See 9-330 filed for Morrow zone completion 11-10-70		