

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE

(See other instructions on reverse side)

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 ☐		5. LEASE DESIGNATION AND SERIAL NO. NM 0334702	
b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other ☐		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
2. NAME OF OPERATOR The Eastland Oil Company		7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR 704 Western United Life Building, Midland, Texas 79701		8. FARM OR LEASE NAME Allied Federal	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 660 PNL and 660 PNL At top prod. interval reported below Same At total depth Same		9. WELL NO. 1	
14. PERMIT NO.		10. FIELD AND POOL, OR WILDCAT Undesignated (Grayburg)	
15. DATE SPUDDED 9/17/70		11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA Section 6 T-18S, R31E	
16. DATE T.D. REACHED 9/30/70		12. COUNTY OR PARISH Deaf	
17. DATE COMPL. (Ready to prod.) 10/9/70		13. STATE New Mexico	
20. TOTAL DEPTH, MD & TVD 3870		19. ELEV. CASINGHEAD 3647'	
21. PLUG, BACK T.D., MD & TVD 3530		23. INTERVALS DRILLED BY 0-3870	
22. IF MULTIPLE COMPL., HOW MANY? No		24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 3392 - 3486 Grayburg Sand	
25. WAS DIRECTIONAL SURVEY MADE No		26. TYPE ELECTRIC AND OTHER LOGS RUN Schlumberger - SW Neutron, Gamma Ray, Laterolog, Microlaterolog	
27. WAS WELL CORED No		28. CASING RECORD (Report all strings set in well)	
29. LINER RECORD		30. TUBING RECORD	
31. PERFORATION RECORD (Interval, size and number) 10 - 0.42" holes - one each 3392, 3395, 3397, 3427, 3429, 3432, 3438, 3467, 3483, 3486		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC. DEPTH INTERVAL (MD) AMOUNT AND KIND OF MATERIAL USED 3803-3831 6,500 gallons acid 3392-3486 1,500 gallons acid 3392-3486 30,000 gallons gelled water 30,000 20-40 sand	
33.* PRODUCTION		34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Vented	
DATE FIRST PRODUCTION 10/9/70		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Flowing	
WELL STATUS (Producing or shut-in) Producing		35. LIST OF ATTACHMENTS Logs, Inclination Report	
DATE OF TEST 10/18/70		HOURS TESTED 24	
CHOKE SIZE 24/64		PROD'N. FOR TEST PERIOD 78.62	
OIL—BBL. 78.62		GAS—MCF. 99.1	
WATER—BBL. 21.12		GAS-OIL RATIO 1260	
FLOW. TUBING PRESS. 250		CASING PRESSURE 450	
CALCULATED 24-HOUR RATE 78.62		OIL—BBL. 78.62	
GAS—MCF. 99.1		WATER—BBL. 21.12	
OIL GRAVITY-API (CORR.) 38.3		TEST WITNESSED BY George D. Neal	
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records		SIGNED George D. Neal TITLE Vice President DATE 10/19/70	

* (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				GEOLOGIC MARKERS	
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH
San Andres	3778	3852	DST #1. Tool open 80 min. w/weak blow of air. IF 458 psi, FF 629 psi. ISI (30') 1398 psi, FSI (60') 1197 psi Recovered 1230' drilling fluid	Reference Kelly Bumping	3,870 T.D.
Grayburg	3392	3486	Oil, Gas, and Water	Seven Rivers Queen Faurose Grayburg San Andres	1,562 2,722 2,951 3,220 3,492