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SEP 23 1985

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. ~~ARTESIA OIL FIELD~~OIL WELL ☒ GAS WELL ☐ DRY ☐ Other RE-entry

b. TYPE OF COMPLETION:

NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other

2. NAME OF OPERATOR

Fred Pool Drilling, Inc. ✓

3. ADDRESS OF OPERATOR

P.O. Box 1393 Roswell, N.M. 88201

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

At surface 1980 FNL660 FWL SW $\frac{1}{4}$ NW $\frac{1}{4}$ Unit E

At top prod. interval reported below

1446- ft.

At total depth

1912 ft.

14. PERMIT NO.

3001520894

DATE ISSUED

9-30-85

12. COUNTY OR PARISH

Eddy

13. STATE

NM

15. DATE SPUDDED

8-30-85

16. DATE T.D. REACHED

9-6-85

17. DATE COMPL. (Ready to prod.)

9-10-85

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

3607 GR

19. ELEV. CASINGHEAD

3607 GR

20. TOTAL DEPTH, MD & TVD

1912 ft.

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

1912 ft.

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)*

1446-1462 ft.

Penrose

25. WAS DIRECTIONAL SURVEY MADE

No

26. TYPE ELECTRIC AND OTHER LOGS RUN

Compensated 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
8 5/8	32#	2000	11"	circulated	0

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					2 3/8	1804 ft.	

31. PERFORATION RECORD (Interval, size and number)

1446-56 ft.

1459-62 ft. 14 holes

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
1446-56	1000 gal. NE 15%, 30,000
1459-62	gal. Versagel; 30,000 #
	20/40 sand; 12,000# 10/20
	sand.

33.*

PRODUCTION

DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)					WELL STATUS (Producing or shut-in)	
9-12-85		Pumping					Producing	
DATE OF TEST	HOURS TESTED	CHOFE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO	
9-12-85	24	none	→	31	TSTM	0		
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)		
40#	40#	→	31	TSTM	0	35		

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

vented

TEST WITNESSED BY

SEP 19 1985

Fred Pool, Jr.

35. LIST OF ATTACHMENTS

Compensated Neutron log, mailed 9-10-85

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

SIGNED

TITLE Vice President

DATE 9-13-85

*(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

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	38. GEOLOGIC MARKERS		
				NAME	MEAS. DEPTH	TRUE VERT. DEPTH
Queen & Grayburg TD	0	65	Caliche and red bed			
	65	1100	Salt, red bed and anhydrite			
	1100	1365	Dolomite and anhydrite			
	1365	1570	Sand dolomite			
	1570	1912	dolomite			