

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. ✓

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL: OIL WELL ☒ GAS WELL ☐ DRY ☐ Other ☐		1b. TYPE OF COMPLETION: NEW WELL ☐ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other ☐		2. NAME OF OPERATOR C. E. Labuz and J. J. Loney, Jr.																													
3. ADDRESS OF OPERATOR P.O. Box 196, Artesia, New Mexico 88210		4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 1550' from road and 1550' from East line of Section 32, T18S, R 30E At top prod. interval reported below Section 32, T18S, R 30E At total depth		5. LEASE DESIGNATION AND SERIAL NO. LC 028975 (b)																													
6. IF INDIAN, ALLOTTEE OR TRIBE NAME		7. UNIT AGREEMENT NAME		8. FARM OR LEASE NAME McClay Federal																													
9. WELL NO. 9		10. FIELD AND POOL, OR WILDCAT 71		11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA Section 32, T18S, R 30E																													
12. COUNTY OR PARISH Eddy		13. STATE N.M.		14. PERMIT NO.																													
15. DATE SPUNDED 8/18/75		16. DATE T.D. REACHED 9/30/75		17. DATE COMPL. (Ready to prod.) 9/4/75																													
18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 3462 KB		19. ELEV. CASINGHEAD 3435		20. TOTAL DEPTH, MD & TVD 3435																													
21. PLUG, BACK T.D., MD & TVD		22. IF MULTIPLE COMPLETIONS, HOW MANY*		23. INTERVALS DRILLED BY X																													
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME, MD AND TVD)* 3348-3366 Grayburg		25. WAS DIRECTIONAL SURVEY MADE No		26. TYPE ELECTRIC AND OTHER LOGS RUN Gamma Ray - neutron																													
27. WAS WELL CORRED No		28. CASING RECORD (Report all strings set in well) <table border="1"><thead><tr><th>CASING SIZE</th><th>WEIGHT, LB./FT.</th><th>DEPTH SET (MD)</th><th>HOLE SIZE</th><th>CEMENTING RECORD</th><th>AMOUNT PULLED</th></tr></thead><tbody><tr><td>8 5/8"</td><td>29.6</td><td>516'</td><td>11 1/4"</td><td>150 sacks circulated</td><td></td></tr><tr><td>8 1/2"</td><td>9 1/2"</td><td>3435'</td><td>7 7/8"</td><td>250 sacks</td><td></td></tr></tbody></table>		CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED	8 5/8"	29.6	516'	11 1/4"	150 sacks circulated		8 1/2"	9 1/2"	3435'	7 7/8"	250 sacks		29. LINER RECORD <table border="1"><thead><tr><th>SIZE</th><th>TOP (MD)</th><th>BOTTOM (MD)</th><th>SACKS CEMENT*</th><th>SCREEN (MD)</th></tr></thead><tbody><tr><td></td><td></td><td></td><td></td><td></td></tr></tbody></table>		SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)					
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36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records		SIGNED [Signature]		TITLE Operator																													
		DATE 9/6/75																															

*(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:				38. GEOLOGIC MARKERS	
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.	NAME	MEAS. DEPTH
					TRUE VERT. DEPTH
				Salt	916
				Seven Rivers	1736
				Queen	2784
				Grayburg	3344