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UNITED STATES

SUBMIT IN DUPLICATE

(See other instructions on reverse side)

DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYcopy to SF
Form approved.
Budget Bureau No. 42-R355.5.

5. LEASE DESIGNATION AND SERIAL NO.

LC 058127

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME
Ballard Grayburg
San Andres unit

8. FARM OR LEASE NAME

Tract No. 7

9. WELL NO.

3

10. FIELD AND POOL OR WILDCAT
Looco Hills, Queen
Grayburg San Andres

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

17 - 18 - 29

12. COUNTY OR PARISH

Eddy

13. STATE

New Mexico

1a. TYPE OF WELL
O. C. T. OIL WELL ☐ GAS WELL ☐ DRY ☐ Other Water Injection

b. WATER COMPLETION:

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

2. NAME OF OPERATOR

Anadarko Production Company

3. ADDRESS OF OPERATOR

P. O. Box 67, Loco Hills, New Mexico 88255

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

At surface

660' FNL & 1980' FNL Sec. 17, T 18S, R 29E
Eddy County, New Mexico

At top prod. interval reported below Same

At total depth Same

14. PERMIT NO.

DATE ISSUED

15. DATE SPUDDED

8-26-76

16. DATE T.D. REACHED

9-1-76

17. DATE COMPL. (Ready to prod.)

11-8-76

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

3499.6 GR

19. ELEV. CASINGHEAD

3501

20. TOTAL DEPTH, MD & TVD

2770' KB

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

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)*

Grayburg

25. WAS DIRECTIONAL SURVEY MADE

Yes

26. TYPE ELECTRIC AND OTHER LOGS RUN

Gamma Ray Compensated Neutron (Cased Hole)

27. WAS WELL CORED

No

28.

CASING RECORD (Report all strings set in well)

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	AMOUNT PULLED
8 5/8"	24# & 28#	386KB	12 1/2"	150 SX
4 1/2"	10.5#	2770KB	7 7/8"	250 SX

29.

LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					2 3/8"	2361	2361

31. PERFORATION RECORD (Interval, size and number)

Metex: 2454-57, 2466-70, 2506-20,
2536-40, 2548-55, 2584-90 @ 2 SPF
Premier: 2640-44, 2648-52, 2673-78,
2685-90, 2694-2704, 2709-14, 2730-40
@ 2 SPF

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
2454-2740	3875 Gals 15% HCL Acid

33.*

PRODUCTION

DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)				WELL STATUS (Producing or shut-in)		
DATE OF TEST		HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
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.)

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

Original Signed by
Jerry E. Duskies

TITLE

Area Supervisor

DATE

Nov. 16, 1976

*(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.
Salt	210	750	
Tansill	750	900	
Yates	900	1260	
7 Rivers	1260	1900	
Queen	1900	2250	
Grayburg	2250	2670	
San Andres	2670	2770	

NAME	MEAS. DEPTH	TOP	TRUE VERT. DEPTH

RECEIVED
NOV 24 1968
O. D. C.
FEDERAL BUREAU OF REVENUE