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LAND OFFICE		
OPERATOR	1	

NEW MEXICO OIL CONSERVATION COMMISSION
WELL COMPLETION OR RECOMPLETION REPORT AND LOG
RECEIVED

MAY 11 1977

Area of Mexico

1. TYPE OF WELL ☒ OIL WELL ☐ GAS WELL ☐ DRY ☐ **O.C.C.**
ARTESIA OFFICE

2. TYPE OF COMPLETION
NEW WELL ☒ WORK OVER ☐ DEEPEN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ OTHER ☐

3. Name of Operator
Yates Petroleum Corporation

4. Address of Operator
207 South 4th Street - Artesia, NM 88210

5. Location of Well

6. UNIT LETTER **K** LOCATED **1650** FEET FROM THE **South** LINE AND **2310** FEET FROM

7. WE **West** LINE OF SEC. **28** TWP. **18S** RGE. **26E** NMPM

8. Date Spudded **2-15-77** 16. Date T.D. Reached **2-23-77** 17. Date Compl. (Ready to Prod.) **3-29-77** 18. Elevations (DF, RKB, RT, GR, etc.) **3387' GR**

19. Total Depth **3100'** 20. Plug Back T.D. **3062'** 21. If Multiple Compl., How Many

22. Producing Interval(s), of this completion - Top, Bottom, Name **2474-2733' Yeso**

23. Type Electric and Other Logs Run **Gamma Ray Neutron**

24. CASING RECORD (Report all strings set in well)

CASING SIZE	WEIGHT LB./ FT.	DEPTH SET	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
7"	20#	1170'	9 1/2"	450 sacks	
4 1/2 & 5 1/2"	9.5 & 14#	3062'	6 1/4"	265 sacks	

29. LINER RECORD				30. TUBING RECORD			
SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN	SIZE	DEPTH SET	PACKER SET
					2-3/8"	2459'	

31. Perforation Record (Interval, size and number)		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
2477-2733' w/28 .50" shots		DEPTH INTERVAL	AMOUNT AND KIND MATERIAL USED
		2476-2731	A/C w/2000g 28% reg. Acid
		2477-2733	60000g treated water,
			95000# sd; 75000# 20-40
			sd & 20000# 100 mesh

33. PRODUCTION							
Date First Production 3-29-77		Production Method (Flowing, gas lift, pumping - Size and type pump) Pumping				Well Status (Prod. or Shut-in) Producing	
Date of Test 5-1-77	Hours Tested 24	Choke Size	Prod'n. For Test Period	Oil - Bbl. 34	Gas - MCF 30.6	Water - Bbl. 55	Gas-Oil Ratio 900/1
Flow Tubing Press.	Casing Pressure	Calculated 24-Hour Rate	Oil - Bbl. 34	Gas - MCF 30.6	Water - Bbl. 55	Oil Gravity - API (Corr.) 37.7	

34. Disposition of Gas (Sold, used for fuel, vented, etc.)
Sold

35. List of Attachments

36. I hereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief.

SIGNED *Christine Tomlinson* TITLE **Geol. Secty** DATE **5-10-77**

5a. Indicate Type of Lease
State ☐ Fee ☒
5. State Oil & Gas Lease No.
7. Unit Agreement Name
8. Farm or Lease Name
Mallard "HM"
9. Well No.
2
10. Field and Pool or Wildcat
Undesignated Yeso

11. County
Eddy

12. Elev. Casinghead

23. Intervals Drilled By
Rotary Tools
0-3100'

25. Was Directional Survey Made
No

27. Was Well Cored
No

This form is to be filed with the appropriate District Office of the Commission not later than 20 days after the completion of any newly-drilled or deepened well. It shall be accompanied by a copy of all electrical and radio-activity logs run in the well and a summary of all special tests conducted, including drill stem tests. All depths reported shall be measured depths. In the case of cased or cased and cemented wells, true vertical depths shall also be reported. For multiple completions, Items 30 through 34 shall be reported for each zone. The form is to be filed in quintuplicate except on state land, where six copies are required. See Rule 1105.

INDICATE FORMATION TOPS IN CONFORMANCE WITH GEOGRAPHICAL SECTION OF STATE

Southeastern New Mexico

Northwestern New Mexico

T. Anhy _____	T. Canyon _____	T. Ojo Alamo _____	T. Penn. "B" _____
T. Salt _____	T. Strawn _____	T. Kirtland-Fruitland _____	T. Penn. "C" _____
B. Salt _____	T. Atoka _____	T. Pictured Cliffs _____	T. Penn. "D" _____
T. Yates _____	T. Miss _____	T. Cliff House _____	T. Leadville _____
T. 7 Rivers _____	T. Devonian _____	T. Menefee _____	T. Madison _____
T. Queen _____	T. Silurian _____	T. Point Lookout _____	T. Elbert _____
T. Grayburg _____	T. Montoya _____	T. Mancos _____	T. McCracken _____
T. San Andres <u>962</u>	T. Simpson _____	T. Gallup _____	T. Ignacio Qtzte _____
T. Glorieta <u>2296</u>	T. McKee _____	Base Greenhorn _____	T. Granite _____
T. Paddock _____	T. Ellenburger _____	T. Dakota _____	T. _____
T. Blinebry _____	T. Gr. Wash _____	T. Morrison _____	T. _____
T. Tubb _____	T. Granite _____	T. Todilto _____	T. _____
T. Drinkard _____	T. Delaware Sand _____	T. Entrada _____	T. _____
T. Abo _____	T. Bone Springs _____	T. Wingate _____	T. _____
T. Wolfcamp _____	T. _____	T. Chinle _____	T. _____
T. Penn. _____	T. _____	T. Permian _____	T. _____
T. Cisco (Bough C) _____	T. _____	T. Penn. "A" _____	T. _____

OIL OR GAS SANDS OR ZONES

No. 1, from 2474 to 2733 No. 4, from _____ to _____

No. 2, from _____ to _____ No. 5, from _____ to _____

No. 3, from _____ to _____ No. 6, from _____ to _____

IMPORTANT WATER SANDS

Include data on rate of water inflow and elevation to which water rose in hole.

No. 1, from 640 to _____ feet _____

No. 2, from _____ to _____ feet _____

No. 3, from _____ to _____ feet _____

No. 4, from _____ to _____ feet _____

FORMATION RECORD (Attach additional sheets if necessary)

From	To	Thickness in Feet	Formation	From	To	Thickness in Feet	Formation
0	120	120	Rock and shells				
120	640	520	Pea gravel, red bed,	lime	& wtr	sand.	
640	778	138	Lime				
778	1027	249	Lime and sand				
1027	1180	153	Lime				
1180	1489	309	Lime and shale				
1489	2176	687	Lime and sand				
2176	2280	104	Lime				
2280	2470	190	Lime and shale				
2470	2791	321	Lime				
2791	2930	139	Lime and shale				
2930	3100	170	Lime and sand				

RECEIVED

MAY 11 1977

RAILROAD COMMISSION OF TEXAS
OIL AND GAS DIVISION

Form W-12
(1-1-71)

O. C. C. ARTESIA, OFFICE		INCLINATION REPORT (One Copy Must Be Filed With Each Completion Report.)	6. RRC District
1. FIELD NAME (as per RRC Records or Wildcat)	2. LEASE NAME MILLIARD H. M.		7. RRC Lease Number. (Oil completions only)
3. OPERATOR Indesignated Yes YATES PETROLEUM CORPORATION		4. ADDRESS 107 SOUTH 4TH STREET, ARTESIA, N. MEX. 88218	8. Well Number 1
5. LOCATION (Section, Block, and Survey) 16501 ECL S 2210' EWL of Sec. 28-18S-26E		9. RRC Identification Number (Gas completions only)	
			10. County Eddy

RECORD OF INCLINATION

[illegible]

If additional space is needed, use the reverse side of this form.

17. Is any information shown on the reverse side of this form? ☐ yes ☒ no
18. Accumulative total displacement of well bore at total depth of 3,100 feet = 58.48 feet.
- *19. Inclination measurements were made in - ☐ Tubing ☐ Casing ☐ Open hole ☒ Drill Pipe
20. Distance from surface location of well to the nearest lease line _____ feet.
21. Minimum distance to lease line as prescribed by field rules _____ feet.
22. Was the subject well at any time intentionally deviated from the vertical in any manner whatsoever? _____
(If the answer to the above question is "yes", attach written explanation of the circumstances.)

INCLINATION DATA CERTIFICATION	OPERATOR CERTIFICATION
<p>I declare under penalties prescribed in Article 6036c, R.C.S., that I am authorized to make this certification, that I have personal knowledge of the inclination data and facts placed on both sides of this form and that such data and facts are true, correct, and complete to the best of my knowledge. This certification covers all data as indicated by asterisks (*) by the item numbers on this form.</p>	<p>I declare under penalties prescribed in Article 6036c, R.C.S., that I am authorized to make this certification, that I have personal knowledge of all information presented in this report, and that all data presented on both sides of this form are true, correct, and complete to the best of my knowledge. This certification covers all data and information presented herein except inclination data as indicated by asterisks (*) by the item numbers on this form.</p>
<p>_____ Signature of Authorized Representative</p>	<p>_____ Signature of Authorized Representative</p>
<p>_____ Name of Person and Title (type or print)</p>	<p>_____ Name of Person and Title (type or print)</p>
<p>_____ Name of Company</p>	<p>_____ Operator</p>
<p>Telephone: <u>915</u> <u>381-0910</u> Area Code</p>	<p>Telephone: _____ Area Code</p>

Railroad Commission Use Only:

Approved By: _____ Title: _____ Date: _____

* Designates items certified by company that conducted the inclination surveys.