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

RECEIVED

OCT 14 1977

Form C-105
Revised 11-68

Bureau of Mines

1. TYPE OF WELL ☒ OIL WELL ☐ GAS WELL ☐ ARTESIAN ☐ OFFSHORE

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 Fourth Street - Artesia, NM 88210

5. Location of Well
UNIT LETTER P LOCATED 990 FEET FROM THE South LINE AND 330 FEET FROM

THE East LINE OF SEC. 26 TWP. 18S RGE. 25E NMPM

15. Date Spudded 8-30-77 16. Date T.D. Reached 9-6-77 17. Date Compl. (Ready to Prod.) 10-6-77 18. Elevations (DF, R&B, RT, GR, etc.) 3478' GR 19. Elev. Casinghead

20. Total Depth 2500' 21. Plug Back T.D. 2422' 22. If Multiple Compl., How Many 1 23. Intervals Drilled By Rotary Tools 0-2500 Cable Tools

24. Producing Interval(s), of this completion - Top, Bottom, Name 2131-2355' Yeso 25. Was Directional Survey Made No

26. Type Electric and Other Logs Run Gamma Ray Neutron 27. Was Well Cored No

28. CASING RECORD (Report all strings set in well)					
CASING SIZE	WEIGHT LB. FT.	DEPTH SET	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
10-3/4"	40#	437'	15"	300 sacks	
7"	20#	1127'	9 1/2"	400 sacks	
4 1/2 & 5 1/2"	9.5 & 14#	2422'	6 1/2"	250 sacks	

29. LINER RECORD					30. TUBING RECORD	
SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN	SIZE	DEPTH SET
					2-3/8"	2116'

31. Perforation Record (Interval, size and number)		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
2131-2355' w/26 .50" shots		DEPTH INTERVAL	AMOUNT AND KIND MATERIAL USED
		2131-2355'	62000g treated water
			95000# sand, 75000# 20-40
			& 20000# 100 mesh.

33. PRODUCTION							
Date First Production		Production Method (Flowing, gas lift, pumping - Size and type pump)				Well Status (Prod. or Shut-in)	
10-6-77		Pumping				Producing	
Date of Test	Hours Tested	Choke Size	Prodn. For Test Period	Oil - Bbl.	Gas - MCF	Water - Hbl.	Gas - Oil Ratio
10-10-77	24			19	20	18 BLW	1053/1
Flow Tubing Press.	Casing Pressure	Calculated 24-Hour Rate	Oil - Bbl.	Gas - MCF	Water - Bbl.	Oil Gravity - API (Corr.)	
			19	20	18 BLW	37.0	

34. Disposition of Gas (Sold, used for fuel, vented, etc.) Sold Test Witnessed By Johnny Morgan

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.

White *Secretary* DATE 10-13-77

INSTRUCTIONS

This form is to be filled with the report of the District Office of the Commission not later than 30 days after the completion of any newly-drilled or deepened well. It shall be accompanied by one copy of all electrical and radioactivity logs in the well and a summary of all special tests conducted, including drill stem tests. All depths reported shall be measured depth. In the case of directionally drilled wells, true vertical depth shall also be reported. For multiple completions, Items 30 through 34 shall be repeated for each zone. The form is to be filled in quadruplicate 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 715	T. Simpson	T. Gallup	T. Ignacio Qtzite
T. Glorieta	T. McKee	Base Greenhorn	T. Granite
T. Paddock	T. Ellenburger	T. Dakota	T.
T. Blinberry	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.....to.....	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.....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	95	95	Surface rock				
95	500	405	Surface rock & red bed				
500	730	230	Red bed & lime				
730	1082	352	Lime & sand				
1082	1650	568	Lime				
1650	1823	173	Lime & sand				
1823	2500	677	Lime				

OCT 14 1977

RAILROAD COMMISSION OF TEXAS
OIL AND GAS DIVISION

Form W-12
(1-1-71)

6. RRC District

7. RRC Lease Number.
(Oil completions only)

8. Well Number	4
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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

☒ ~~X~~no

18. Accumulative total displacement of well bore at total depth of 2,500 feet = 65.47 feet.

yes
2,500

65.47

foot

*19. Inclination measurements were made in ☒ Tubing ☐ Casing ☐ Open hole ☐ Drill Pipe

☐ **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? No

(If the answer to the above question is "yes", attach written explanation of the circumstances.)

INCLINATION DATA CERTIFICATION

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.

Signature of Authorized Representative

Gerald M. Scott

Controller

Name of Person and Title (type or print)

Verna Drilling Company - Odessa

Name of Company

915

381-0910

Telephone: _____
Area Code _____

OPERATOR CERTIFICATION

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.

Signature of Authorized Representative

Name of Person and Title (type or print)

Operator

Telephone: _____
Area Code _____

Railroad Commission Use Only:

Approved By: _____ Title: _____ Date: _____

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

RECORD OF INCLINATION (Continued from reverse side)

[illegible]

☐ If additional space is needed, attach separate sheet and check here.

REMARKS:

- INSTRUCTIONS -

An inclination survey made by persons or concerns approved by the Commission shall be filed on a form prescribed by the Commission for each well drilled or deepened with rotary tools or when, as a result of any operation, the course of the well is changed. No inclination survey is required on wells that are drilled and completed as dry holes that are plugged and abandoned. (Inclination surveys are required on re-entry of abandoned wells.) Inclination surveys must be made in accordance with the provisions of Statewide Rule 11.

This report shall be filed in the District Office of the Commission for the district in which the well is drilled, by attaching one copy to each appropriate completion for the well. (except Plugging Report)

The Commission may require the submittal of the original charts, graphs, or discs, resulting from the surveys.