

RECEIVED BY

APR -3 1985

WELL COMPLETION OR RECOMPLETION REPORT AND LOG*

1a. TYPE OF WELL:
ARTESIA, OFFICEOIL WELL ☒ GAS WELL ☐ DRY ☐ Other

1b. TYPE OF COMPLETION:

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

2. NAME OF OPERATOR

Santa Fe Exploration Company (505/623-2733)

3. ADDRESS OF OPERATOR

P. O. Box 1136, Roswell, NM 88202-1136

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

At surface 990' FEL & 330' FSL

At top prod. interval reported below

At total depth

14. PERMIT NO.

DATE ISSUED

12. COUNTY OR PARISH

Eddy

13. STATE

New Mexico

15. DATE SPUNDED

12-26-84

16. DATE T.D. REACHED

1-2-85

17. DATE COMPL. (Ready to prod.)

3-1-85

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

3423' GR

19. ELEV. CASINGHEAD

20. TOTAL DEPTH, MD & TVD

3505'

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

22. IF MULTIPLE COMPL., HOW MANY*

23. INTERVALS DRILLED BY

ROTARY TOOLS

Yes

CABLE TOOLS

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*

2252-3451' (55 holes, 1 JSPF)

25. WAS DIRECTIONAL SURVEY MADE

Yes

26. TYPE ELECTRIC AND OTHER LOGS RUN

Compensated Densilog-Neutron GR, DDL, Prolog, CBL

27. WAS WELL CORED

No

CASING RECORD (Report all strings set in well)

CASINO SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
14"	Cond.	23'	18"	Redi-Mix to surf	
8-5/8"	24#	301'	12-1/4"	200 sx C1 "C"	Circ
5-1/2"	14# & 15#	3503'	7-7/8"	263 sx P0Z & 280 sx C1 "C"	

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	PACKER CEMENT*	SCREEN (MD)

30. TUBING RECORD

SIZE	DEPTH SET (MD)	PACKER SET (MD)
2-7/8"	3431'	

31. PERFORATION RECORD (Interval, size and number)

2252-3451', 55 holes, 1 JSPF

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
2252' - 3451'	1000 gal 15% NeFe, 4000 gal 7½% NeFe, 85000 gal 30# X-linked gel, 88500# 20/40 sd & 30,000# 12/20 sd.

33. PRODUCTION

DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)				WELL STATUS (Producing or shut-in)	
3-1-85		Pumping				Producing	
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
3-12-85	24	N/A	→	20	32	30	1585-1
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)	
		→	20	32	30	38.0	

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

Vented

35. LIST OF ATTACHMENTS

Deviation Surveys & Logs (see above listing)

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

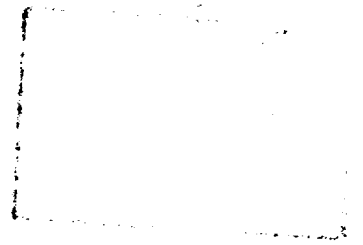
SIGNED

TITLE

Agent

DATE 3/18/85

*(See Instructions and Spaces for Additional Data on Reverse Side)



ACCEPTED FOR RECORD

APR 2 1964

CARIBBEAN MEXICO

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 33.

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.	NAME	MEAS. DEPTH	TRUE VERT. DEPTH
				Anhydrite	375'	
				Salt	600'	
				Yates	1600'	
				7 Rivers	1750'	
				Queen	2250'	
				Grayburg	2600'	
				San Andres	3200'	