

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.

RECEIVED BY

JUL 24 1985

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1. TYPE OF WELL:

ARTESIA, OFFICE

2. TYPE OF COMPLETION:

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

2. NAME OF OPERATOR

MYCO Industries, Inc. ✓

3. ADDRESS OF OPERATOR

207 South 4th St., Artesia, NM 88210

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

At surface 1980 FSL & 660 FWL, Sec. 35-T18S-R29E

At top prod. interval reported below

At total depth

14. PERMIT NO.

DATE ISSUED

5. LEASE DESIGNATION AND SERIAL NO.

LC 062029

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Roadrunner Federal

9. WELL NO.

3

10. FIELD AND POOL, OR WILDCAT

Turkey Track-7R-On-GB-SA

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

Unit L, Sec. 35-18S-29E

12. COUNTY OR
PARISH

Eddy

13. STATE

NM

15. DATE SPUDDED

4-13-85

16. DATE T.D. REACHED

4-20-85

17. DATE COMPL. (Ready to prod.)

7-16-85

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

3438' GR

19. ELEV. CASINGHEAD

20. TOTAL DEPTH, MD & TVD

3300'

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

2878'

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)*

2288-2852' Grayburg-Queen

25. WAS DIRECTIONAL
SURVEY MADE

No

26. TYPE ELECTRIC AND OTHER LOGS RUN

CNL/FDC; DLL

27. WAS WELL CORED

No

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

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
8-5/8"	24#	306'	12-1/4"	175 sx	
5-1/2"	15.5#	3300'	7-7/8"	1350 sx	

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					2-7/8"	2620'	

31. PERFORATION RECORD (Interval, size and number)

2664-2852' w/17 .42" holes

2520-90' w/18 .42" holes

2288-2306' w/12 .42" holes

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
2664-2852'	w/1500 g. acid
2520-90'	w/2000g. acid. SF w/15000g acid.
2288-2306'	w/1000g acid. SF w/24000g X-Link gel
	+ 10000# 20/40+31000# 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)	
7-3-85		Pumping				Producing	
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
7-16-85	24	-	→	18	None	8	-
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	ACCEPTED FOR RECORD		WATER—BBL.	OIL GRAVITY-API (CORR.)
-	-	→	18	None	C	8	39°

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

None

TEST WITNESSED BY

Kevin Hokett

35. LIST OF ATTACHMENTS

Deviation Survey

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

SIGNED

TITLE Production Supervisor

DATE 7-18-85

*(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.)

Reverse Side

1. Well Name

2. Well Number

3. Well Type

4. Well Status

5. Well Location

6. Well Depth

7. Well Completion

8. Well Production

9. Well Test Results

10. Well Corrosion

11. Well Sealing

12. Well Cementing

13. Well Gravel

14. Well Sand

15. Well Scale

16. Well Plugging

17. Well Abandonment

18. Well Restoration

19. Well Decommissioning

20. Well Relinquishment

35. 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

DESCRIPTION, CONTENTS, ETC.

NAME

MEAS. DEPTH

TRUE VERT. DEPTH

Base Salt
7 Rivers
Queen
Penrose
Grayburg
Premier
San Andres

996
1438
2138
2278
2414
2848
3020

COMPLETION OF WELL

DEPARTMENT OF THE INTERIOR

MINERAL RESOURCES DIVISION

971-233

1964-10-10

ARTESIA FISHING TOOL COMPANY

P. O. BOX ~~547~~ PHONE (505) 746-6651

470

ARTESIA, NEW MEXICO 88210

April 29, 1985

MYCO Industries, Inc.
207 South Fourth Street
Artesia, NM 88210

Re: Roadrunner Federal #3
1980' FSL & 660' FWL
Sec. 35, T18S, R92E
Eddy County, New Mexico

Gentlemen:

The following is a Deviation Survey for the above captioned well.

DEPTH	DEVIATION
306'	3/4°
496'	3/4°
1036'	1/2°
1530'	1°
2025'	1 1/2°
2335'	1 3/4°
2833'	1 3/4°
3300'	1 3/4°

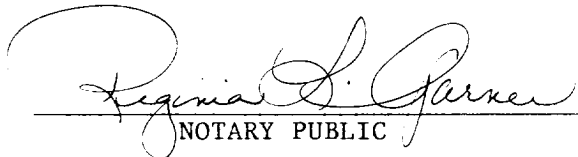
Very truly yours,



B. N. Muncy Jr.
Secretary

STATE OF NEW MEXICO §
COUNTY OF EDDY §

The foregoing was acknowledged before me this 29th day of April, 1985.


NOTARY PUBLIC