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

Form C-105
Revised 1-1-65

RECEIVED

JUN 28 1966

Dev. of mine!

1a. TYPE OF WELL OIL WELL ☐ GAS WELL ☐ DRY ☒		5a. Indicate Type of Lease State ☒ Fee ☐	
b. TYPE OF COMPLETION NEW WELL ☐ WORK OVER ☐ DEEPEN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ OTHER ☐		5. State Oil & Gas Lease No. 648	
2. Name of Operator DEPCO, Inc. ✓		7. Unit Agreement Name	
3. Address of Operator Suite 204, First National Bank, Artesia, New Mexico		8. Farm or Lease Name State 648	
4. Location of Well		9. Well No. 209	
UNIT LETTER <u>F</u> LOCATED <u>1980</u> FEET FROM THE <u>North</u> LINE AND <u>1980</u> FEET FROM		10. Field and Pool, or Wildcat Artesia	
THE <u>West</u> LINE OF SEC. <u>4</u> TWP. <u>19S</u> RGE. <u>28E</u> NMPM		12. County Eddy	
15. Date Spudded 5-11-66	16. Date T.D. Reached 5-16-66	17. Date Compl. (Ready to Prod.) ----	18. Elevations (DF, RKB, RT, GR, etc.) 3545' RT
19. Elev. Casinghead 3538'	20. Total Depth 2835'		
21. Plug Back T.D. ----	22. If Multiple Compl., How Many ----	23. Intervals Drilled By Rotary Tools 0 - 2835'	Cable Tools ----
24. Producing Interval(s), of this completion - Top, Bottom, Name None			25. Was Directional Survey Made No
26. Type Electric and Other Logs Run Gamma Ray, Neutron, Sonic, Density, Laterolog & Microlateral			27. Was Well Cored Yes
28. CASING RECORD (Report all strings set in well)			
CASING SIZE 8 5/8	WEIGHT LB./FT. 28	DEPTH SET 476	HOLE SIZE 11
CEMENTING RECORD 125 sx.		AMOUNT PULLED None	
29. LINER RECORD			
SIZE	TOP	BOTTOM	SACKS CEMENT
SCREEN			
30. TUBING RECORD			
SIZE	DEPTH SET	PACKER SET	
31. Perforation Record (Interval, size and number) None			
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
DEPTH INTERVAL		AMOUNT AND KIND MATERIAL USED	
Surface		10 sx. cement plug	
428-476		15 sx. cement plug	
2305-2353		15 sx. cement plug	
2770-2835		20 sx. cement plug	
33. PRODUCTION			
Date First Production	Production Method (Flowing, gas lift, pumping - Size and type pump)		Well Status (Prod. 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 Gravity - API (Corr.)
34. Disposition of Gas (Sold, used for fuel, vented, etc.)			Test Witnessed By
35. List of Attachments Deviation Tests & Electrical Logs.			
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 <i>Ignacio</i>		TITLE <u>District Engineer</u>	DATE <u>June 27, 1966</u>

INSTRUCTIONS

This form is to be filled 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 one copy of all electrical and radio-activity logs run on 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 directionally drilled 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 filled 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. Any	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	T. Simpson	T. Gallup	T. Ignacio Qtzite
T. Glorieta	T. McKee	T. Base Greenhorn	T. Granite
T. Padlock	T. Ellenburger	T. Dakota	T. Morrison
T. Blinberry	T. Gr. Wash	T. Todito	T. Tubb
T. Drinkard	T. Delaware Sand	T. Entrada	T. Wingate
T. Abo	T. Bone Springs	T. Chinle	T. Permian
T. Wolfcamp	T. Permian	T. Cisco (Bough C)	T. Permian

FORMATION RECORD (Attach additional sheets if necessary)

From	To	Thickness in Feet	Formation
0	320	320	Clitche & Sand
320	476	476	Red Beds
476	687	211	Any.
687	1076	389	Any and red beds
1076	1367	291	Any and Dolo.
1367	1647	280	Any. and Dolo.
1647	1765	118	Any. and Dolo.
1765	1980	215	Any. and Sand
1980	2135	155	Lime
2135	2390	255	Lime and Sand
2390	2638	248	Lime
2638	2696	58	Lime
2696	2763	67	Cored --Water Bearing Dolomite
2763	2792	29	Dolo. Lime
2792	2835	43	Dolo.

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5a. Indicate Type of Lease
State ☐ Fee ☐
5. State Oil & Gas Lease No.

1a. TYPE OF WELL
OIL WELL ☐ GAS WELL ☐ DRY ☐ OTHER _____
b. TYPE OF COMPLETION
NEW WELL ☐ WORK OVER ☐ DEEPEN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ OTHER _____

2. Name of Operator

3. Address of Operator

4. Location of Well

UNIT LETTER _____ LOCATED _____ FEET FROM THE _____ LINE AND _____ FEET FROM _____

THE LINE OF SEC. TWP. RGE. NMPM

15. Date Spudded 16. Date T.D. Reached 17. Date Compl. (Ready to Prod.) 18. Elevations (DF, RKB, RT, GR, etc.) 19. Elev. Casinghead

20. Total Depth 21. Plug Back T.D. 22. If Multiple Compl., How Many 23. Intervals Drilled By Rotary Tools Cable Tools

24. Producing Interval(s), of this completion - Top, Bottom, Name 25. Was Directional Survey Made

26. Type Electric and Other Logs Run 27. Was Well Cored

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

CASING SIZE	WEIGHT LB./FT.	DEPTH SET	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED

29. LINER RECORD 30. TUBING RECORD

SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN	SIZE	DEPTH SET	PACKER SET

31. Perforation Record (Interval, size and number) 32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

DEPTH INTERVAL	AMOUNT AND KIND MATERIAL USED

33. PRODUCTION

Date First Production Production Method (Flowing, gas lift, pumping - Size and type pump) Well Status (Prod. 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.) Test Witnessed By

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 _____ TITLE _____ DATE _____

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