## ATES DEBICOP PUP

## DEPARTMENT OF THE INTERIOR

(See other instructions on reverse side) Form approved. Budget Bureau No. 42-R355.5.

5. LEASE DESIGNATION AND SERIAL NO.

		GE	CLOGIC	AL S	URVEY					NM-0439	491		
		ION C	OR RECO	MPLE	TION	REPOR'	[ AN	ID LO	3 *	6. IF INDIAN,	ALLOTT	EE OR TRIBE NAME	
			X GAS WELL		DRY .	Other		RECEN	√ED	7. UNIT AGRE	EMENT	NAME	
NEW X	WORK C	DEEP-	PLUG BACK	n n	IFF.	Other				S. FARM OR L	EASE N.	AME	
							0	CTIE	1990	Federal	"CW"	-B	
Yates Pet	roleum	Corpor	cation /					• . 10	1000	9. WELL NO.			
			Υ					O. C. I	)	,	4		
207 So. 4	th St.	, Artes	sia, NM 8	8210						10. FIELD AND POOL, OR WILDCAT			
							uiremen	ts)*		Penasco D	raw !	SA-Yeso Ass	
At surface 16	50' FS	L & 990	)' FWL, S	ec.	1-19s-2	4E				11. SEC., T., R			
At top prod. in	terval repo	rted below								Unit L-			
										Sec. 1-1	AN, ALLOTTEE OR TRIBE NAME  REEMENT NAME  R LEASE NAME  1 "CW"-B  O.  4 AND POOL, OR WILDCAT  Draw SA-Yeso As: A., R., M., OR BLOCK AND SURVE  AND  19S-24E  OR 13. STATE  NM  19. ELEV. CASINGHEAD  NO  27. WAS WELL CORED  NO  AMOUNT PULLED  NO  AMOUNT PULLED  CORD  MD) PACKER SET (MD)  NT SQUEEZE, ETC.  IND OF MATERIAL USED  G. 30000 g. KCL  Sd.  g. HCL, 30000 g  45000# Sd.  L STATUS (Producing or latt-in)  oducing  BL. GAS-OIL RATIO  2158/1  OIL GRAVITY-API (CORR.)  39  ESSED BY  MOT gan		
At total depth	ELC COMPLETION OR RECOMPLETION REPORT AND LOG *  EOF WELL OF WILL SO ** ** ** ** ** ** ** ** ** ** ** ** **												
	ELL COMPLETION OR RECOMPLETION REPORT AND LOG*  FE DY WELL:  WELL WILL WILL WILL ON OTHER PORT AND LOG*  FE OF COMPLETION:  WELL WILL WILL WILL ON OTHER PORT AND LOG*  FE OF COMPLETION:  WELL WILL WILL WILL ON OTHER PORT AND LOG*  FE OF COMPLETION:  WELL WILL WILL WILL ON OTHER PORT AND LOG*  FE OF COMPLETION:  WELL WILL WILL WILL ON OTHER PORT AND LOG*  FE OF COMPLETION:  WELL WILL WILL WILL WILL DON' OTHER PORT AND LOG*  FE OF COMPLETION:  WELL WILL WILL WILL WILL DON' OTHER PORT AND LOGS OF COMPLETION.  FE OF COMPLETION:  WELL WILL WILL WILL WILL WILL WILL WILL	13. STATE											
Dime Courses	1 16 num		vinn   17 n.s		( Dan J., A		<u> </u>				10		
	1				i. (recauly te	prou.)			F, RKB, I	RT, GR, ETC.)*	IS. EL	ST. CASINGHEAD	
4-10-80					22 IF MIT	TIPLE CON			RVAT.	ROTARY TOOT	R	CARLE TOOLS	
	- 115			***	HOW M	ANY*	. D.,		LED BY			CABLE TOOLS	
	RVAL(S). O			P. BOTTO	M NAME (A	ID AND TV	0)*	<u> </u>	<b>→</b>	0-3100'	1 25	WAS DIRECTIONAL	
			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	, 20110	22, 11,1112 (3		-,						
	2494-2	712'										No	
TYPE ELECTRIC	AND OTHER	LOGS RUN					<del></del>			1 :	7. WAS	WELL CORED	
Gramma Ra	v-Neut	ron										No	
			CAS	ING RE	CORD (Rep	ort all stri	nas set 1	in well)					
CASING SIZE	WEIGH	IT, LB./FT.					1		ENTING	RECORD		AMOUNT PULLED	
10-3/4"	30	#	359'		14	-3/4"		35	0		_ -		
WELL COMPLETION OR RECOMPLETION REPORT AND LOG*  In TYPE OF WELL:    Other		_ -	`										
4-1/2"	9.	5#	3069'		6-	1/4"		35	0				
	ELL COMPLETION OR RECOMPLETION REPORT AND LOG*    E OF WELL												
WELL COMPLETION OR RECOMPLETION REPORT AND LOG*  IN TYPE OF COMPLETION:  WELL	gD ,												
SIZE	TOP (M	D) BC	TTOM (MD)	SACES	CEMENT*	ENT* SCREEN			I	DEPTH SET (MD)		PACKER SET (MD	
								2-3/8	<u>"</u>  _	2739'	_		
DMONOR LEVON DE	conn /Tuto	munal sime i		<u> </u>			····		<u> </u>		<u>. 1</u>		
	-	-	•										
2663-2712	. M\T0	.50" h	otes									····	
2/0/-2502	1 67/10	50" 1	oles		•	2003	-2/12			7. UNIT AGREEMENT NAME  7. UNIT AGREEMENT NAME  S. FARM OR LEASE NAME FEDERAL "CW"-B 9. WELL NO.  4  10. FIELD AND POOL, OR WILDCAT PENASCO DYAW SA-YESO ASS 11. SEC., T., R., M., ON BLOCK AND SURVEY OR AREA UNIT L- Sec. 1-19S-24E  1			
2434TZ383	w/ 12	.50 r	mrez (		•	2/0/	-2503		TUBING RECORD  TOT' d w/1500 g. 30000 g. KCL  wtr, 45000# sd.  Trt'd w/1500 g. HCL, 30000 g.  gelled wtr, 45000# sd.  Trt'd w/1500 g. HCL, 30000 g.  TProducing  —MCF. WATER—BBL. GAS-OIL RATIO  123  8  TEST WITNESSED BY  CEPTED FOR RECORDMorgan				
DATE   STATE OF COMPLETION:   DATE   DATE													
,	<del></del>		<del></del>		PRGI	OUCTION	····	·	90116	.a wer / 43	300m		
FIRST PRODUCT	CION	PRODUCT	ON METHOD (	Flowing			ze and t	ype of pun	ıp)	WELL S	TATUS	(Producing or	
9-27-80		Ė	Pumping									q	
E OF TEST	HOURS ?	rested	<del></del>			OILBBI	<b>.</b>	GAS-MC	CF.		~		
	2	4	2"		>	57		123		8		158/1	
W. TUBING PRESS.	CASING	PRESSURE			BBL.	GAS	—MCF.		WATER-	-BBL.	OIL GRA	VITY-API (CORR.)	
			<del>&gt;</del>		57		123		88				
DISPOSITION OF	SAS (Sold,	used for fue	el, vented, etc.	)			1			7	4		
								ACCEPT	ED FO	R RECORDMO	rgan		
LIST OF ATTACH	MENTS												
¥ 6 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	Deviat	ion Sur	rvey		·····				T 4	1000			
nereby certify	That the	ioregoing) a	ind attached i	nformat	ion is comp	tete and co	rrect a	s deter <b>ight</b>		a Hote re	cords		
SIGNED (	ЛЩ	JK	Hall		тттт.ж Е	nginee	r		(ed.	TO ALTON	Oct	ober 3, 19	

## NSTRUCTIONS

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 24, 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.)

San Glo	FORMATION	TOP	BOTTOM	RNATION TOP BOTTOM DESCRIPTION, CONTENTS, ETC.	NAME	10
ů	-		-			
					San Andres	560
					Glorieta	1923
	5 - 33 - 370 - 370					
		-				
	•					
				•		