

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R355.5.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

1a. TYPE OF WELL:		OIL WELL ☐	GAS WELL ☐	DRY ☒	Other _____	5. LEASE DESIGNATION AND SERIAL NO. NM-13621	
b. TYPE OF COMPLETION:		NEW WELL ☒	WORK OVER ☐	DEEP-EN ☐	PLUG BACK ☐	DIFF. RESVR. ☐	Other _____
2. NAME OF OPERATOR Amoco Production Company ✓						7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR P. O. Box 68 Hobbs, NM 88240						8. FARM OR LEASE NAME Federal 1 BW	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 1980' FNL & 1980' FWL, Sec. 29 At top prod. interval reported below (Unit F, SE/4, NW/4) At total depth						9. WELL NO. 1	
14. PERMIT NO.						12. COUNTY OR PARISH Eddy	
DATE ISSUED 12-12-81						13. STATE NM	
15. DATE SPUDDED 12-31-80	16. DATE T.D. REACHED 1-31-81	17. DATE COMPL. (Ready to prod.) P.A. 2-18-81	18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 3818.5' GL		19. ELEV. CASINGHEAD		
20. TOTAL DEPTH, MD & TVD 8850'	21. PLUG, BACK T.D., MD & TVD Surface	22. IF MULTIPLE COMPL., HOW MANY*	23. INTERVALS DRILLED BY →	ROTARY TOOLS 0-TD	CABLE TOOLS		
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* Dry hole						25. WAS DIRECTIONAL SURVEY MADE	
26. TYPE ELECTRIC AND OTHER LOGS RUN Comp. neutron form density; Dual laterolog Micro SFL						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	
13-3/8"	48	406'	17-1/2"	300 Dowell RFC, 375 Class		C Circ. 150 SX	
9-5/8"	36	2025'	12-1/4"	2450 RFC, 75 Class C		Circ. 2 SX	
29. LINER RECORD				30. TUBING RECORD			
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
31. PERFORATION RECORD (Interval, size and number)				ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
Dry hole				DEPTH INTERVAL (MD)			
AMOUNT AND KIND OF MATERIAL USED				POSTED ID D&B 4-11-81			
33. DATE FIRST PRODUCTION							
PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)				WELL STATUS (Producing 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 Logs mailed 2-11-81							
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records							
SIGNED <u>Benton Green</u>		TITLE <u>Assist. Admin. Analyst</u>			DATE <u>4-2-81</u>		

*(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 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 POROSITY 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
				Strawn	8032'	
				Atoka	8388'	
				Morrow	8542'	
				M. Morrow	8600'	
				Barnett	8730'	
				Chester	8808'	

RECEIVED

APR - 6 1981

U.S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO