

N.M.O.C.D. COPY
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 ☐					
b. TYPE OF COMPLETION:		NEW WELL ☒	WORK OVER ☐	DEEP EN ☐	PLUG BACK ☐	DIFF. RESVR. ☐	Other ☐			
2. NAME OF OPERATOR		Harlan Oil Company /								
3. ADDRESS OF OPERATOR		P O Box 668, Artesia, N. M. 88210								
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*		At surface 2310 FSL & 950 FWL Sec. 30, T 19 S., R 31 E. 1981								
At top prod. interval reported below										
At total depth										
14. PERMIT NO.		ARTESIA OFFICE								
15. DATE SPUDDED		16. DATE T.D. REACHED		17. DATE COMPL. (Ready to prod.)		18. ELEVATIONS (DF, RKB, RT, OR, ETC.)*		19. ELEV. CASINGHEAD		
6/13/81		6/18/81		Attempted Completion 6/19/81		3439 G L				
20. TOTAL DEPTH, MD & TVD		21. PLUG BACK T.D., MD & TVD		22. IF MULTIPLE COMPL. HOW MANY*		23. INTERVALS DRILLED BY		ROTARY TOOLS		
2522		2520						X		
24. PRODUCING INTERVAL(S), OF THIS COMPLETION TOP, BOTTOM, NAME (MD AND TVD)*		2011-2049 Yates					25. WAS DIRECTIONAL SURVEY MADE			
26. TYPE ELECTRIC AND OTHER LOGS RUN		Gamma Ray Neutron					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		
8 5/8"		24"		477'		11"		400 sx		
4 1/2		10.50#		2520'		7 7/8"		400 sx		
29. LINER RECORD										
SIZE		TOP (MD)		BOTTOM (MD)		SACKS CEMENT*		SCREEN (MD)		
30. TUBING RECORD										
SIZE		DEPTH SET (MD)		PACKER SET (MD)						
31. PERFORATION RECORD (Interval, size and number)										
2011-2049 w/ 1 shot per foot										
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.										
DEPTH INTERVAL (MD)					AMOUNT AND KIND OF MATERIAL USED					
2011-2049					acidize w/ 1,000 gal, balled off, started swabbing					
					swabbed dry, tested for 2 days					
					no recovery					
33. PRODUCTION										
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping - size and type of pump)					WELL STATUS (Producing or shut-in)			
							waiting on T. A. waterflood			
DATE OF TEST		HOURS TESTED		CHOKE SIZE		PROD'N FOR TEST PERIOD		WATER -BBL.		
6/19/81		48						20		
FLOW. TUBING PRESS.		CASING PRESSURE		CALCULATED 24-HOUR RATE		OIL -BBL.		GAS-OIL RATIO		
						0		0		
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)							WATER -BBL.		OIL GRAVITY API (CORR.)	
									11	
35. LIST OF ATTACHMENTS										
Gamma Ray Neutron Log										
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records										
SIGNED		TITLE		SECRETARY		DATE		8/4/81		
[Signature]		[Signature]		[Signature]		[Signature]		[Signature]		

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

ACCEPTED FOR RECORD
ROGER A. CHAPMAN
AUG 7 1981
U.S. GEOLOGICAL SURVEY
ROSWELL, NEW 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 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.)

37. SUMMARY OF POROUS ZONES: SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF; CORED INTERVALS; AND ALL DILL-ITEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CUSHION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES			38. GEOLOGIC MARKERS		
FORMATION	TOP	BOTTOM	NAME	MEAS. DEPTH	TRUE VERT. DEPTH
Red bed	375	385	T. anhy.	300	
Yates	2011	2049	T. salt	475	
			B. salt	1795	
			T. yates	2011	