

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE

NM OIL CONS. COM. STATION

Artesia, NM 88210

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

45F

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL: OIL WELL ☒ GAS WELL ☐ DRY ☐ Other ☐ RECEIVEDb. TYPE OF COMPLETION:
NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other ☐ FEB 09 19832. NAME OF OPERATOR
FLORIDA EXPLORATION COMPANY ✓ O. C. D.3. ADDRESS OF OPERATOR
SUITE 300 CLAYDESTA TOWERS EAST MIDLAND, TX 79701 ARTESIA OFFICE

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

At surface NW/4 SE/4, 2110' FSL & 1650' FEL

At top prod. interval reported below Same as above

At total depth Same as above

14. PERMIT NO. NA DATE ISSUED 11-06-81

12. COUNTY OR PARISH Eddy 13. STATE NM

15. DATE SPUDDED 01-18-82 16. DATE T.D. REACHED 01-25-82 17. DATE COMPL. (Ready to prod.) 6-30-82 18. ELEVATIONS (DF, REB, RT, GR, ETC.)* 3438' GL 19. ELEV. CASINGHEAD

20. TOTAL DEPTH, MD & TVD 2403' 21. PLUG, BACK T.D., MD & TVD 2347' 22. IF MULTIPLE COMPL., HOW MANY* No 23. INTERVALS DRILLED BY Rotary

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 2060-2234' Yates 25. WAS DIRECTIONAL SURVEY MADE No

26. TYPE ELECTRIC AND OTHER LOGS RUN compensated Neutron Density 27. WAS WELL CORED Yes

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"	23#	677'	11"	675 sx cem	
4 1/2"	9.5#	2403'	6 3/4"	900 sx cem	

29. LINER RECORD					30. TUBING RECORD		
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					2 3/8"	2185'	2147'

31. PERFORATION RECORD (Interval, size and number)				32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
2234-29, 2224-08, 2186-72, 2124-40, 2100-06, 2090-95, 2076-84, 2060-70'.				DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
				2060-2234'	Acidize w/3000 gal DS-30 & 120 ball sealers. Frac w/6500 gal Mini-Max 3 & 10,000# 20-40 sand.

33.* PRODUCTION							
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)				WELL STATUS (Producing or shut-in)	
10-5-82		Pumping-Lufkin C-114-D-143-64 (1 1/4")				Pumping	
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
10-31-82	24	--	→	11	TSTM	3	--
FLOW, TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)	
--	--	→	11	TSTM		NA	

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

35. LIST OF ATTACHMENTS log

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records
SIGNED Elad Traut TITLE Production Engineer
MINERALS MGMT. SERVICE
DOUGLAS, NEW MEXICO

* (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.)

37. SUMMARY OF POROUS ZONES:			38. GEOLOGIC MARKERS	
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				
FORMATION	TOP	BOTTOM	NAME	MEAS. DEPTH
Yates (Core)	2070	2124'	Yates	2040
dolomite w/ anhydrite inclusions				2090
No DST's				