

UNITED STATES DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

NEW MEXICO

(See other instructions on reverse side)

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

95F

5. LEASE DESIGNATION AND SERIAL NO.

NM-14747

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Panos Federal *Com*

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT  
Undesignated Wildcat  
Antelope Sink

11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA

Sec. 1, T-19S, R-23E

12. COUNTY OR PARISH  
Eddy

13. STATE

New Mexico

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  
Exxon Corporation

3. ADDRESS OF OPERATOR  
P.O. Box 1600, Midland, TX 79702

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)  
At surface 1980' FWL and 660' FEL of Section *PNL*  
At top prod. interval reported below  
At total depth

14. PERMIT NO. \_\_\_\_\_ DATE ISSUED \_\_\_\_\_  
ARTESIA OFFICE

15. DATE SPUDDED 12-31-81 16. DATE T.D. REACHED 2-26-82 17. DATE COMPL. (Ready to prod.) 5-5-82 18. ELEVATIONS (Surface, GR, etc.)\* 3815 3811 19. ELEV. CASINGHEAD ---

20. TOTAL DEPTH, MD & TVD 8700 21. PLUG, BACK T.D., MD & TVD 8120 22. IF MULTIPLE COMPL., HOW MANY\* --- 23. INTERVALS DRILLED BY --- ROTARY TOOLS 0-8700 CABLE TOOLS ---

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)\* 7936 - 8008 72 shots 25. WAS DIRECTIONAL SURVEY MADE No

26. TYPE ELECTRIC AND OTHER LOGS RUN CDL, CNL, DLL, MLL, Prolog 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	54#	322	17 1/2	475 SX CIRC	Post ID 2-11-83
8 5/8	32#	1709	12 1/2	1250 SX CIRC	
5 1/2	15.5, 17#	8612	7 7/8	1115 SX TOC 5300 T.S.	Ramp # BK

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					2 7/8	7850	7850

30. TUBING RECORD

31. PERFORATION RECORD (Interval, size and number) 7936 - 8088 72 shots

32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
7036-8088	Acidize w/4200 gal 7 1/2% MS acid, 1000 SCF N 2/BBL
	Frac w/30,000 gal. frac FL, 2000 gal. MS frac fluid, 1000 gal

33.\* PRODUCTION CO<sub>2</sub>

DATE FIRST PRODUCTION 3-19-82 PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Flow WELL STATUS (Producing or shut-in) Shut-in

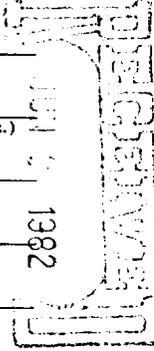
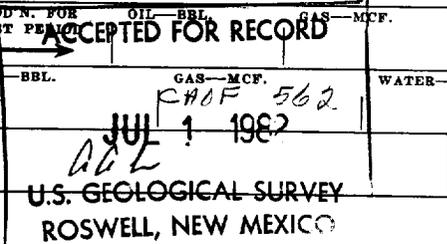
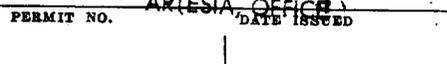
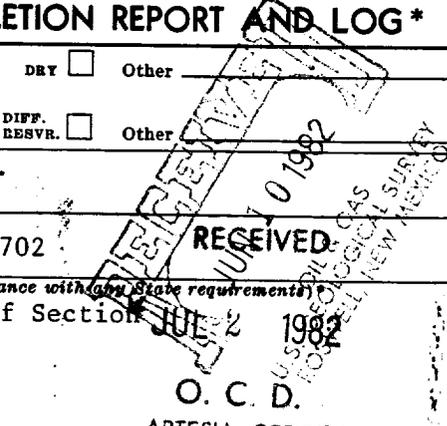
DATE OF TEST See Attached Sheet HOURS TESTED \_\_\_\_\_ CHOKE SIZE \_\_\_\_\_ PROD. FOR TEST PERIOD \_\_\_\_\_ OIL—BBL. \_\_\_\_\_ GAS—MCF. \_\_\_\_\_ WATER—BBL. \_\_\_\_\_ GAS-OIL RATIO \_\_\_\_\_

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) \_\_\_\_\_ OIL GRAVITY—API (CORR.) \_\_\_\_\_ TEST WITNESSED BY \_\_\_\_\_

35. LIST OF ATTACHMENTS \_\_\_\_\_

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records

SIGNED *D. G. Lowe* TITLE Accountant DATE 5-14-82



\*(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: 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.
Morrow	7936	8088	
Strawn	7564	7712	
			38. GEOLOGIC MARKERS
			NAME
			MEAS. DEPTH
			TRUE VENT. DEPTH
			TOP
			3588
			4720
			6008
			7193
			7509
			7786
			7936
			8228
			3588
			4720
			6008
			7193
			7509
			7786
			7936
			8228