

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE

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

WELL COMPLETION OR RECOMPLETION REPORT AND LOG*

RECEIVED BY

NOV 17 1983

O. C. D.

ARTESIA, OFFICE

LC 029353A

1a. TYPE OF WELL:		OIL WELL <input checked="" type="checkbox"/>	GAS WELL <input type="checkbox"/>	DRY <input type="checkbox"/>	Other <input type="checkbox"/>								
b. TYPE OF COMPLETION:		NEW WELL <input type="checkbox"/>	WORK OVER <input type="checkbox"/>	DEEP-EN <input checked="" type="checkbox"/>	PLUG BACK <input type="checkbox"/>	DIFF. RESVR. <input type="checkbox"/>	Other <input type="checkbox"/>						
2. NAME OF OPERATOR Jack Plemons ✓						9. WELL NO. 5Y							
3. ADDRESS OF OPERATOR P.O. Box 385, Artesia, New Mexico 88210						10. FIELD AND POOL, OR WILDCAT Shugart-Y-R-D-G							
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 990'/N. line, 360'/E. line At top prod. interval reported below At total depth						11. SEC., T., R., M. OR BLOCK AND SURVEY OR AREA 3-19S-31E							
14. PERMIT NO.				DATE ISSUED		12. COUNTY OR PARISH Eddy		13. STATE New Mexico					
15. DATE SPUDDED 1-31-73		16. DATE T.D. REACHED 9-6-83		17. DATE COMPL. (Ready to prod.) 10-25-83		18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 3613' GH		19. ELEV. CASINGHEAD					
20. TOTAL DEPTH, MD & TVD 3950		21. PLUG, BACK T.D., MD & TVD		22. IF MULTIPLE COMPL., HOW MANY*		23. INTERVALS DRILLED BY		ROTARY TOOLS CABLE TOOLS					
24. PRODUCING INTERVAL(S), OF THIS COMPLETION--TOP, BOTTOM, NAME (MD AND TVD)* 2670' to 3950'								25. WAS DIRECTIONAL SURVEY MADE					
26. TYPE ELECTRIC AND OTHER LOGS RUN Neutron								27. WAS WELL CORED					
28. CASING RECORD (Report all strings set in well)													
CASING SIZE 4 1/2"		WEIGHT, LB./FT. 10.5		DEPTH SET (MD) 3950'		HOLE SIZE 6"		CEMENTING RECORD 250 sacks		AMOUNT PULLED None			
29. LINER RECORD										30. TUBING RECORD			
SIZE		TOP (MD)		BOTTOM (MD)		SACKS CEMENT*		SCREEN (MD)		SIZE			
										2"			
31. PERFORATION RECORD (Interval, size and number) 1 hole per shot at 3460, 61, 3702, 3802, 03, 04, 3838, 40, 41, 42 3859, 60, 61.										32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
										DEPTH INTERVAL (MD) 3460-3861		AMOUNT AND KIND OF MATERIAL USED 800 bbls. water 6300 lbs. sand	
33. PRODUCTION													
DATE FIRST PRODUCTION 10-25-83		PRODUCTION METHOD (Flowing, gas lift, pumping--size and type of pump) Pumping						WELL STATUS (Producing or shut-in) Producing					
DATE OF TEST 10-24-83		HOURS TESTED 24		CHOKE SIZE		PROD'N. FOR TEST PERIOD →		OIL--BBL. 10		GAS--MCF. -0-			
FLOW. TUBING PRESS.		CASING PRESSURE		CALCULATED 24-HOUR RATE →		OIL--BBL.		GAS--MCF.		WATER--BBL. -0-			
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) TSTM										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				TITLE				Agent		DATE 11-17-83			

*(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 POROSITY 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 (SEI), TIME TOOL, OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES					
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	TOP MEAN. DEPTH TRUE VERT. DEPTH
Anhydrite	2683	3788			
Lime	3780	3950			