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Form C-105
Revised 1-1-65

NEW MEXICO OIL CONSERVATION COMMISSION WELL COMPLETION OR RECOMPLETION REPORT AND LOG

5a. Indicate Type of Lease State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No. OG-648

1a. TYPE OF WELL OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> DRY <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>	RECEIVED
b. TYPE OF COMPLETION NEW WELL <input type="checkbox"/> WORK OVER <input type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input type="checkbox"/> DIFF. RESVR. <input type="checkbox"/> OTHER <input type="checkbox"/>	

7. Unit Agreement Name
8. Farm or Lease Name Mark State
9. Well No. 2

2. Name of Operator Jack L. McClellan ✓	JUN 2 1965
3. Address of Operator P. O. Box 848, Roswell, New Mexico	

10. Field and Pool, or Wildcat Undesignated millman
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4. Location of Well UNIT LETTER <u>F</u> LOCATED <u>2310</u> FEET FROM THE <u>North</u> LINE AND <u>2310</u> FEET FROM

12. County Lea

THE <u>West</u> LINE OR SEC. <u>18</u> TWP. <u>19-S</u> RGE. <u>28-E</u> NMPM

15. Date Spudded 4-6-65	16. Date T.D. Reached 5-10-65	17. Date Compl. (Ready to Prod.)	18. Elevations (DF, RKB, RT, GR, etc.) 3514 DF	19. Elev. Casinghead
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20. Total Depth 2304'	21. Plug Back T.D.	22. If Multiple Compl., How Many	23. Intervals Drilled By Rotary Tools Cable Tools 0-2304'
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24. Producing Interval(s), of this completion — Top, Bottom, Name	25. Was Directional Survey Made No
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26. Type Electric and Other Logs Run Gamma Ray Neutron	27. Was Well Cored No
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28. CASING RECORD (Report all strings set in well)					
CASING SIZE	WEIGHT LB./FT.	DEPTH SET	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
8-5/8"	20 lb.	407	10-3/4"	50 sacks	202.45

29. LINER RECORD				30. TUBING RECORD		
SIZE	TOP	BOTTOM	SACKS CEMENT	SIZE	DEPTH SET	PACKER SET

31. Perforation Record (Interval, size and number)		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
DEPTH INTERVAL	AMOUNT AND KIND MATERIAL USED		

33. PRODUCTION							
Date First Production P&A May 20, 1965	Production Method (Flowing, gas lift, pumping — Size and type pump)					Well Status (Prod. 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
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35. List of Attachments

36. I hereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief.		
SIGNED <u>Jack L. McClellan</u>	TITLE <u>Operator</u>	DATE <u>May 26, 1965</u>