

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

COPY TO:
SUBMIT IN DUPLICATE*
(See other instructions on reverse side)

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

5. LEASE DESIGNATION AND SERIAL NO.
NM 07283-A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Humble-Federal

9. WELL NO.
1

10. FIELD AND POOL, OR WILDCAT
Wildcat

11. SEC., T., R., M., OR BLOCK AND SURVEY OF AREA
28, T-21-S, R-22-E

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 **P&A**

2. NAME OF OPERATOR
Tom Brown Drilling Company, Inc.

3. ADDRESS OF OPERATOR
% Albritton & Meyer, Box 524, Midland, Texas

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*
At surface **1980' FNL & 660' FEL Section 28, T-21-S, R-22-E,**
NMPM, Eddy County, New Mexico.
At top prod. interval reported below
At total depth

14. PERMIT NO. _____ DATE ISSUED **1-24-64**

15. DATE SPUNDED **1-27-64** 16. DATE T.D. REACHED **2-12-64** 17. DATE COMPL. (Ready to prod.) **P&A** 18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* **4340 RKB** 19. ELEV. CASINGHEAD **4330 GL**

20. TOTAL DEPTH, MD & TVD **5013** 21. PLUG, BACK T.D., MD & TVD **P&A** 22. IF MULTIPLE COMPL., HOW MANY* _____ 23. INTERVALS DRILLED BY **Surface to 5013'** ROTARY TOOLS _____ CABLE TOOLS _____

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*
None 25. WAS DIRECTIONAL SURVEY MADE
No

26. TYPE ELECTRIC AND OTHER LOGS RUN
Schlumberger Formation Density 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
10 3/4		32	15"	Circulated	None
7	20	921	9"	475 ska. cement circulated.	None

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
None					None		

30. TUBING RECORD

SIZE	DEPTH SET (MD)	PACKER SET (MD)
None		

31. PERFORATION RECORD (Interval, size and number)
None

32. ACID SHOT, FRACTURE, CEMENT SQUEEZE, ETC.
DEPTH INTERVAL (MD) **None**
AGENT AND KIND OF MATERIAL USED

33.* PRODUCTION

DATE FIRST PRODUCTION **P&A** PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) _____ WELL STATUS (Producing or shut-in) **1964**

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 LOGS (Sold, used for fuel, vented, etc.) _____ TEST WITNESSED BY _____

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

SIGNED **L. BEECHER** TITLE **Agent** DATE **2-19-64**

APPROVED
FEB 25 1964
L. BEECHER
ACTING DISTRICT ENGINEER

RECEIVED
FEB 24 1964
U.S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO

RECEIVED
MAR 1 1964
C. O. E.
ARTESIA, N.M.

*(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: "Stacks 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.
San Andres San Andres Clearfork	125 590 3740	180 650 3765	Water zone Water zone Water zone
NAME			
San Andres Glorieta Clearfork Abo Wolfcamp	118 1578 2510 3950 4950	MEAS. DEPTH	TOP TRUE VERT. DEPTH
	118 1578 2510 3950 4950		118 1578 2510 3950 4950