

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY(See other in-
structions on
reverse side)

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

Union Oil Company of California

3. ADDRESS OF OPERATOR

619 West Tenth Avenue, Midland, Texas

DEC 8 1965

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

At surface SW 1/4 NE 1/4, 1980 FRL & 1980 FRL

O. C. C.
ARTESIA, OFFICE

At top prod. interval reported below

At total depth

14. PERMIT NO.

DATE ISSUED

12. COUNTY OR
PARISH

13. STATE

New Mexico

15. DATE SPUNDED

10-28-65

16. DATE T.D. REACHED

11-16-65

17. DATE COMPL. (Ready to prod.)

11-23-65 (Start in)

18. ELEVATIONS (DF, RKB, RT, GR, ETC.)*

3950' D.F.

19. ELEV. CASINGHEAD

3933

20. TOTAL DEPTH, MD & TVD

7600'

21. PLUG, BACK T.D., MD & TVD

-

22. IF MULTIPLE COMPL.,
HOW MANY*

-

23. INTERVALS
DRILLED BY

ROTARY TOOLS

0-7600'

CABLE TOOLS

-

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*

7144-7326' Cielo Canyon (Perm.)

26. TYPE ELECTRIC AND OTHER LOGS RUN

Acoustic-Gamma Ray Neutron-Caliper Log

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"	48	247'	15"	250 sz.	-
8-5/8"	24	2808'	11"	1675 sz.	-
5-1/2"	17 & 15.5	7600'	7-7/8"	300 sz.	-

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					2-3/8"	7000.82'	7000.82'

31. PERFORATION RECORD (Interval, size and number)

7144, 46, 56, 58, 63, 70, 73, 82
7852, 56, 88, 91
7300, 21, 24, 26
with one 1/4" shot each

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
7144-7326'	3000 gal. 24-30 acid

33.*

DATE FIRST PRODUCTION

11-23-65

PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)

-

WELL STATUS (Producing or
shut-in) Shut in pending
completion

DATE OF TEST

11-23-65

HOURS TESTED

2

CHOKE SIZE

24/64

PROD'N. FOR
TEST PERIOD

8.3

GAS—MCF.

551

WATER—BBL.

None

GAS-OIL RATIO

66,385 Cu.ft./bbl

FLOW. TUBING PRESS.

1989 Paig.

CASING PRESSURE

Packer

CALCULATED
24-HOUR RATE

99.2

WATER—BBL.

99.2

GAS—MCF.

6616

WATER—BBL.

None

OIL GRAVITY-API (CORR.)

59° (Cond.)

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

Vented during test

TEST WITNESSED BY

35. LIST OF ATTACHMENTS

2 copies of log listed under Item No. 26 above

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

SIGNED

Rue Necker

TITLE

Production Clerk

DATE

December 2, 1965

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 36.

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 38. 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.	NAME	MEAS. DEPTH	TOP TRUE VERT. DEPTH
Cisco-Canyon	7140	7510	Dolomite reef zone	San Andres Glorieta Besse Springs Wolfcamp Cisco-Canyon	392 1932 3260 6200 7092	
No cores or drill stem tests						