

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

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

5. LEASE DESIGNATION AND SERIAL NO.

NM 017643

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Federal IBB Gas "Com"

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Indian Basin (Upper Penn Gas)

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

14 - 22S - 23E

12. COUNTY OR
PARISH

Eddy

13. STATE

New Mexico

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

Marathon Oil Company

3. ADDRESS OF OPERATOR

Box 220 Hobbs, New Mexico

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

At surface 1650' FN&W lines

At top prod. interval reported below same

At total depth same

14. PERMIT NO.

DATE ISSUED

15. DATE SPUDDED

3-3-66

16. DATE T.D. REACHED

3-31-66

17. DATE COMPL. (Ready to prod.)

4-6-66

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

4004 GR

19. ELEV. CASINGHEAD

4005'

20. TOTAL DEPTH, MD & TVD

7680'

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

7653'

22. IF MULTIPLE COMPL.,
HOW MANY*

single

23. INTERVALS
DRILLED BY

ROTARY TOOLS

all

CABLE TOOLS

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

7543'- 7564' Upper Penn Gas

25. WAS DIRECTIONAL
SURVEY MADE

yes

26. TYPE ELECTRIC AND OTHER LOGS RUN

Gamma Ray Compensated Formation Density and
Caliper Logs; Ind. S.E., Sidewall Neutron and Sonic Logs

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	48#	150'	17-1/2"	325 SX	none
8-1/2"	32#	2123'	11"	1735 SX	none
7-1/2"	5 and 17#	7678'	7-7/8"	1045 SX	none

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
NONE					2-3/8"	7505'	7428'

31. PERFORATION RECORD (Interval, size and number)

7543 - 7564' with 28 shots

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
7543-7564'	2000 gal 15% NE acid

33.*

PRODUCTION

DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)				WELL STATUS (Producing or shut-in)	
4-6-66		flowing				shut in	
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
4-11-66	4 hrs	various	→	3.36	*	2.40	
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	88 BBL Cond.	GAS—MCF.	WATER—BBL.	XSG GRAVITY-API (CORR.)	
1958-2270#	packer	→	18.6 per MMCF Gas	* CAOFP 15.187	14	60° at 60° G	

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

Waiting on pipeline connection

TEST WITNESSED BY

J. Genzer

35. LIST OF ATTACHMENTS

Induction - Electric Log (2)

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

SIGNED

TITLE

Area Supt.

DATE

5-5-66

*(See Instructions and Spaces for Additional Data on Reverse Side)

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.), formations 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.)

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