35. LIST OF ATTACHMENTS

N. M. O. C. C. COPY Form 9-3"0 (Kev. 5-63) SUBMIT IN DUPLIC UN ED STATES Form approved. Budget Bureau No. 42-R355.5 (See other in-DEPARTMENT OF THE INTERIOR structions on 5. LEASE DESIGNATION AND SERIAL NO. GEOLOGICAL SURVEY NM 04219 6. IF INDIAN, ALLOTTEE OR TRIBE NAME WELL COMPLETION OR RECOMPLETION REPORT AND LOG* 1a. TYPE OF WELL: WELL DRY OthWTR INJ ST 7. UNIT AGREEMENT NAME b. TYPE OF COMPLETION: WORK OVER WELL DEEP-EN DIFF. DESVR. S. FARM OR LEASE NAME Other . 2. NAME OF OPERATOR Anderson 9. WELL NO. Yates Drilling Company 3. ADDRESS OF OPERATOR 207 So. 4th Street - Artesia, New Mexico 88210 10. FIELD AND POOL, OR WILDCAT 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements). McMillan SR-Q At surface SE SE 990' FSL & 990' FEL Sec. 11-20S-26E 11. SEC., T., R., M., OR BLOCK AND SURVEY Sec. 11-20S-26E At top prod, interval reported below Unit P N.MPM At total depth 14. PERMIT NO. DATE ISSUED 12. COUNTY OR 13. STATE PARISH Eddy N.M. 16. DATE T.D. REACHED | 17. DATE COMPL. (Ready to prod.) 19. ELEV. CASINGHEAD 18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* DESCRIPTION BY 20. TOTAL DEPTH, MD & TVD 21. PLUG, BACK T.D., MD & TVD 22. IF MULTIPLE COMPL., ROTARY TOOLS CABLE TOOLS HOW MANY E9-571. 1-19-70 24. PRODUCING INTERVAL(S), OF THIS COMPLETION-TOP, BOTTOM, NAME (MD AND TVD) 25. WAS DIRECTIONAL MAR 2 6 1970 SURVEY MADE SI Waiting on Wtr. Flood No 26. TYPE ELECTRIC AND OTHER LOGS RUN WAS WELL CORED ARTESIA Gamma Ray Neutron OFFICE 28. CASING RECORD (Report all strings set in well) CASING SIZE WEIGHT, LB./FT. DEPTH SET (MD) HOLE SIZE CEMENTING RECORD AMOUNT PULLED 12岁" 32# 20' 15岁" 3 sx5½" 15.5# 5671 8" 100 sx & 5 sx of cmt to surface LINER RECORD 30. TUBING RECORD SIZE SACKS CEMENT* TOP (MD) BOTTOM (MD) SCREEN (MD) SIZE DEPTH SET (MD) PACKER SET (MD) 31. PERFORATION RECORD (Interval, size and number) ACID. SHOT. FRACTURE, CEMENT SQUEEZE, ETC. 32. 527-537' 20 shots DEPTH INTERVAL (MD) AMOUNT AND KIND OF MATERIAL USED 500 gal Reg 15% acid displ/60 bbl 33.* PRODUCTION DATE FIRST PRODUCTION PRODUCTION METHOD (Florging; pas lift, pumping—size and type of pump) WELL STATUS (Producing or Waiting on Wtr Flood DATE OF TEST HOURS TESTED CHOKE SIZE PROD'N. FOR TEST PERIOD OIL-BBL GAS-OIL RATIO WATER-BBL. FLOW. TUBING PRESS. CASING PRESSURE CALCULATED OII - BBI GAS-MCF. OIL GRAVITY-API (CORR.) WATER-24-HOUR RATE 34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) TEST WITNESSED BY

Engineer

3-24-70

DATE _

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

TITLE

NSTRUCTIONS

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

Hem 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. should be listed on this form, see item 35.

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 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, 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.)

্বর প্রধ্রক্

The encountries of the new treatment of the	37.
FOR	SUMM 81 DF
FORMATION	ARY (
	OF POI
	RTANI TESI
70 P	ZONE:
A SECTION OF SECTION O	S OF PO
in a conservation was retrieved to the activities of the conservation of the conservat	ROSITI
воттом	SUMMARY OF POROUS ZONES: 8UMMARY OF POROUS ZONES OF POROSITY AND CONTENTS THEREOF; CORED INTERVALS; AND ALL DRILL-STEM TOFFIT INTERVAL TESTED, CUSHION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND BECOVERIES
	OPEN,
A TO EPOCE AND A CONTROL OF A C	FLOW
	OF;
Tello Macono	CORED IN
DESCRI	TERV.
DESCRIPTION, CONTENTS, ETC. SOLUTION SERVICE	CORED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING AND SHUT-IN PRESSURES, AND RECOVERIES
NATIONAL STATES OF STATES	AND H
Designations & State Sta	ECOVI
Si Walting on Wer. Flood	CRIES T
(8.1.168. 1989. DOG/USEAN -2001 380 1090 (1010 -1010 -880 -881)	ESTS, I
3 20 20 0 EAST EAST NO 2 THE TELL POST NEWS POPUL	истап
Service and the service of the servi	
QUEEN	38.
EN NAME	
TO THE SECOND SERVICES AND SERVICES TO SERVICES AND SERVI	
	GEOLOGIC MARKERS
The second of th	JIC M
MEAS. DEPTH	ARKERS
70	
TRUE VERT. DEPTH	
Trada.	

300 300