

UN I T E D STATES DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

**SUBMIT IN DUPLICATE**

(See outer In-  
structions on  
reverse side)

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

## WELL COMPLETION OR RECOMPLETION REPORT AND LOG\*

1a. TYPE OF WELL: OIL WELL ☐ GAS WELL ☐ DRY ☐ Other WTR. INJ. SI

b. TYPE OF COMPLETION: NEW WELL ☐ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other SI

2. NAME OF OPERATOR

Yates Drilling Company

3. ADDRESS OF OPERATOR  
207 So. 4th Street - Artesia, New Mexico 88210

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

At surface SE SE 990' FSL & 990' FEL Sec. 11-20S-26E

At top prod. interval reported below

At total depth	1	1
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14. PERMIT NO.	DATE ISSUED
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15. DATE SPURRED	16. DATE T.D. REACHED	17. DATE COMPL. ( <i>Ready to prod.</i> )	18. ELEVATIONS (DE. BKT)
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20. TOTAL DEPTH, MD & TVD 1-2-70	21. PLUG, BACK T.D., MD & TVD 1-19-70	22. IF MULTIPLE COMPL., HOW MANY*	23. INTERVALS DELETED
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24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)\*

SI Waiting on Wtr. Flood

26. TYPE ELECTRIC AND OTHER LOGS RUN

Gamma Ray Neutron

O. C. C.  
ARTESIA, CALIF.

29. CASING RECORD (*Report all strings set in well*)

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
12½"	32#	20'	15½"	3 sx	
5½"	15.5#	567'	8"	100 sx & 5 sx of cmt	to surface

29. LINER RECORD					30. TUBING RECORD		
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)

31. PERFORATION RECORD (Interval, size and number)		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
527-537'	- 20 shots	DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
		527-537'	500 gal Reg 15% acid
			displ/60 bbl wtr

33.*			PRODUCTION	
DATE FIRST PRODUCTION	PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)		WELL STATUS (Producing or shut-in)	
			Waiting on Wtr Flood	

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 foregoing and attached information is complete and correct as determined from all available records

SIGNED Edna M. [Signature] TITLE Engineer DATE 3-24-70

**\*(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.), 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 16:** 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 22:** "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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