

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE

(See other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R355.6.

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

El Paso Natural Gas Company

3. ADDRESS OF OPERATOR

1800 Wilco Building, Midland, Texas 79701

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

At surface 660 FNL, 1980 FWL of Section

At top prod. interval reported below

At total depth

Same

14. PERMIT NO.

DATE ISSUED

12. COUNTY OR PARISH
Eddy13. STATE
New Mexico

15. DATE SPUDDED

3-23-72

16. DATE T.D. REACHED

5-11-72

17. DATE COMPL. (Ready to prod.)

7-1-72

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

4374 Gr, 4391 DF, 4393 KB 4379

20. TOTAL DEPTH, MD & TVD

9253 MD & TVD

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

PBD 9182

22. IF MULTIPLE COMPL., HOW MANY*

23. INTERVALS DRILLED BY

ROTARY TOOLS

CABLE TOOLS

All

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

Mid-Morrow 8986-98

25. WAS DIRECTIONAL SURVEY MADE

No

26. TYPE ELECTRIC AND OTHER LOGS RUN

Comp. Neutron, Form Density, DI, Prox.-Microlog

27. WAS WELL CORED

No

28. CASING RECORD (Report all strings set in well)

CASINO SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
13 3/8	48#	201	17 1/2	350 sxs	
9 5/8	36# & 47#	1889	12 1/4	620 sxs	
5 1/2	15.5# & 17#	9263	7 7/8	1825 sxs	

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					2 3/8	8963.35	8963

31. PERFORATION RECORD (Interval, size and number)

7352-7366

9011-9023

JUL 28 1972

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

INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
7352-7366	Acidize 11,420 gals
8986-8998	Gas Frac 6200 gals J-263,
	8000 gals LPG
	18,000# sand

33.*

DATE FIRST PRODUCTION

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

WELL STATUS (Producing or shut-in)

Shut In

DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
6-29-72	72	3/4	→	TSTM	76	TSTM	
FLOW, TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API. (CORR.)	
1854	0	→	TSTM	1236	TSTM		

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

TEST WITNESSED BY

Vented

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

C. D. Kysar

TITLE

Production Clerk

DATE

July 21, 1972

*(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 13: 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.

Item 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: "Seals 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
Wolfcamp	4470	4563	DST #1 - 2 hrs, FP 168-357, SIPS 1674-1637, 0 psi + 2500 cc water	Grayburg	Surface
Cisco-Canyon ls	7186	7303	DST #2 - 1 hr, FP 168-231, FSIP 775, rec. 410' of DM, 2500 cc mud in sampler	San Andres	50
Canyon ls	7372	7450	DST #3 - 2 hrs, FP 140-233, FSIP 2136, 2300 psi, 16.3 cu.ft. gas, 150 cc Dist, 400 cc salt water	Glorieta	1530
Md Morrow Sand	8990	9071	DST #4 - 2 hrs, FP 95#, FSIP 3458, rec 100' DM, 255 MCF/D, no fluid	Yeso	1593
Low Morrow Sand	9110	9161	DST #5 - 1 hr, FP 33, FSIP 605, sample chamber rec nothing.	Bone Spring	3310
				Abo	3680
				Wolfcamp	4330
				Cisco	7050
				Canyon	7310
				L. Strawn	7915
				Atoka	8457
				Morrow	8890