

Form 9-330
(Rev. 5-63)UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPL. E*

(See other 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 ☐

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

RECEIVED

2. NAME OF OPERATOR Texas Oil & Gas Corp. MAR 12 1974

3. ADDRESS OF OPERATOR P. O. Box 591, Midland, Texas 79701 U. C. C.

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

At surface 1980' FNL, 660' FWL

At top prod. interval reported below

At total depth

14. PERMIT NO. DATE ISSUED 9-19-73

5. LEASE DESIGNATION AND SERIAL NO. NM 01165

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Yates Federal

9. WELL NO.

2

10. FIELD AND POOL, OR WILDCAT

Burton Flat

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

Sec. 18-20S-29E

12. COUNTY OR PARISH Eddy

13. STATE New Mex.

15. DATE SPUDDED 9-24-73 16. DATE T.D. REACHED 10-31-73 17. DATE COMPL. (Ready to prod.) 12-15-73 18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 3254 GR 19. ELEV. CASINGHEAD 3254

20. TOTAL DEPTH, MD & TVD 11,760 21. PLUG BACK T.D., MD & TVD 11,669 22. IF MULTIPLE COMPL., HOW MANY* 23. INTERVALS DRILLED BY 0-TD

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 11,170-11,626 Morrow 25. WAS DIRECTIONAL SURVEY MADE No

26. TYPE ELECTRIC AND OTHER LOGS RUN GR/N 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		586	17 1/4	650 SX	None
8 5/8	24 & 32	3200	12 1/4	2685 SX	None
4 1/2	11.6&13.5	11758	7 7/8	650 SX	None

29. LINER RECORD					30. TUBING RECORD		
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					2 3/8	11,117	11,117

31. PERFORATION RECORD (Interval, size and number)		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
11,170-11,626'		DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
		614-26	500 gals MSA
		322-11,626	4,000 gals MSA

33. PRODUCTION							
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)				WELL STATUS (Producing or shut-in)	
11-12-73		Flowing				SI	
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
2-1-74	1	15/64	→	0	59	0	
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)	
1,222	Packer	→	0	1418			

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Vented TEST WITNESSED BY

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 J. R. Colter TITLE Staff Engineer DATE 2-28-74

*(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 38, 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 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: "Sticks 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 POROSITY ZONES:				38. GEOLOGIC MARKERS			
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							
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	TOP		
					MEAS. DEPTH	TRUE VERT. DEPTH	
	11,300	11,490	DST #1 w/1500' WB. GTS in 45", 6500 MCF. 60" ISIP 4969, IFP 1439, 60" test, 60" FSIP 4152				