

N. M. O. C. C. COPY
UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE

(See instructions 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

MONSANTO COMPANY

JUL 9 1974

3. ADDRESS OF OPERATOR

101 North Marienfeld, Midland, Texas 79701

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

At surface 1980' FWL & 3300' FSL Section 5

At top prod. interval reported below

At total depth

14. PERMIT NO.

DATE ISSUED

4/22/74

12. COUNTY OR PARISH

Eddy

13. STATE

New Mexico

15. DATE SPUDDED

4/28/74

16. DATE T.D. REACHED

6/6/74

17. DATE COMPL. (Ready to prod.)

6/27/74

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

3205 Gr.

19. ELEV. CASINGHEAD

3205

20. TOTAL DEPTH, MD & TVD

10,875

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

10,820

22. IF MULTIPLE COMPL., HOW MANY *

No

23. INTERVALS DRILLED BY

→

ROTARY TOOLS

10,875

CABLE TOOLS

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

MORROW: 10,664-10,710

25. WAS DIRECTIONAL SURVEY MADE

No

26. TYPE ELECTRIC AND OTHER LOGS RUN

CNL, FDC, GR, DIL, PML

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	54.5	500	17 1/2	600 Sx.	None
9 5/8	36	2030	12 1/2	1000 Sx.	None
5 1/2	20 & 17#	10,875	8 3/4	800 Sx.	None

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					2 7/8	10,446	10,436

31. PERFORATION RECORD (Interval, size and number)

10,664 - 10,674 20 shots

10,696 - 10,710 28 shots

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED

33. PRODUCTION

DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)				WELL STATUS (Producing or shut-in)	
6/27/74		Flowing				Shut in	
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
6/27/74	4	10 - 24/64	→	0	453	1.50	
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)	
2667 - 1208	Pkr.	→	0	4258 AOF	9.0		

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

Vented

35. LIST OF ATTACHMENTS

Logs Mailed

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

SIGNED

TITLE

Dist. Prod. Mgr.

DATE

7/3/74

*(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 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 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.)

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

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	38. GEOLOGIC MARKERS		
				NAME	MEAS. DEPTH	TRUE VERT. DEPTH
Delaware	1900	3720	Sandstone & shale	Delaware	1900	
Bone Spring	3720	8007	Limestone, shale & sandstone	3rd Bone Spring	7638	
Wolfcamp	8007	8928	Limestone, shale & sandstone	Wolfcamp	8007	
Strawn	8928	9930	Limestone & shale	Strawn	8928	
Atoka	9930	10,212	Limestone, shale & sandstone	Morrow	10,212	
Morrow	10,212	10,802	Limestone, shale & sandstone	Barnett	10,802	
Barnett	10,802	10,875 TD	Shale			