

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

SUBMIT IN DUPLICAT

(See other 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
Atlantic Richfield Company ✓

FEB 19 1975

3. ADDRESS OF OPERATOR
P. O. Box 1710, Hobbs, New Mexico 88240

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)
At surface 660' FSL & 1980' FEL (Unit letter O)

U.S. GEOLOGICAL SURVEY
ARTESIA, OFFICE

At top prod. interval reported below as above

At total depth as above

14. PERMIT NO. _____ DATE ISSUED _____

15. DATE SPUDDED 11/7/74 16. DATE T.D. REACHED 12/20/74 17. DATE COMPL. (Ready to prod.) 1/20/75 18. ELEVATIONS (DF, REB, RT, GR, ETC.)* 3280.6' GR 19. ELEV. CASINGHEAD _____

20. TOTAL DEPTH, MD & TVD 11,100' 21. PLUG, BACK T.D., MD & TVD 11,096' 22. IF MULTIPLE COMPL., HOW MANY* _____ 23. INTERVALS FILLED BY _____ 24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 10,867-10,916' Morrow Gas 25. WAS DIRECTIONAL SURVEY MADE No

26. TYPE ELECTRIC AND OTHER LOGS RUN
Gamma Ray, Density, Dual Laterolog, BHC Neutron & GR

27. WAS WELL CORED No

CASINO SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD
13-3/8" OD	48#	536'	17 1/2"	560 sx to surface
8-5/8" OD	24#	2500'	12 1/4"	900 sx to surface
5 1/2" OD	15.5 & 17#	11096'	7-7/8"	1080 sx. TOC @ 5010'

29. LINER RECORD					30. TUBING RECORD		
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
						10,748'	10,748'

31. PERFORATION RECORD (Interval, size and number)
10867, 68, 69, 70, 73, 76, 10909, 11, 13, 14, 15 & 10916' = 12 holes, .25"

32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.
DEPTH INTERVAL (MD) AMOUNT AND KIND OF MATERIAL USED
10867-916' 1600 gal 7 1/2% MS acid, 38,000 ft³ N₂ & ball sealers. Flushed w/28 bbls 4% KCL wtr w/1000 ft³ N₂/bbl. Preceded w/5000 ft³ N₂.

33. PRODUCTION
DATE FIRST PRODUCTION 1/20/75 PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Flowing 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
1/30/75	3.8	Various	→	0	396	0	-

FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)
2863#	Pkr	→	0	2502	0	0

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Sold - Shut-in pending purchaser connection TEST WITNESSED BY Dan Dodd

35. LIST OF ATTACHMENTS
Logs as listed in Item 26 & inclination from vertical report.

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records
SIGNED H. J. Bernard TITLE Dist. Drlg. Supv. DATE 2/11/75

*(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			38. GEOLOGIC MARKERS				
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH	TOP	TRUE VERT. DEPTH
DST #1 Morrow	10,820'	10,925'	No WC. Opened well 15 mins, good blow, decr to fair. SI 1 hr. Rec no fluid. IFP 216#, FFP 394#, 1 hr ISIP 4515#, 1 hr IFP 303#, FFP 763#, 1 1/2 hr FSP 4515#, leveled off. FHYDP 5762#. Gas flow 330# press on 1/2" ck, estd 2160 MCFPD.	Delaware Mtn. Bone Springs 3rd Bone Springs Sand Wolfcamp Cisco Strawn Atoka Gas Morrow Gas			2237' 4287' 7878' 8235' 9245' 9674' 10062' 10555'