

**UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY**

SUBMIT IN DUPLICATE*

(See reverse side for instructions)

Form approved by 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

Cities Service Oil Company

3. ADDRESS OF OPERATOR

P. O. Box 1919, Midland, Texas 79702

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

At surface 2105' FSL, 760' FWL of Section 9, T200S, R28E, S44E

County, New Mexico

At top prod. interval reported below

Same as above

At total depth

Same as above

14. PERMIT NO.

DATE ISSUED

D.C.C.

ARTESIA, OFFICE

15. DATE SPUDDED

1/25/77

16. DATE T.D. REACHED

3/6/77

17. DATE COMPL. (Ready to produce) (DF, REB, BT, GR, ETC.)*

5/23/77

3282.7' GR

19. ELEV. CASINGHEAD

3282.7'

20. TOTAL DEPTH, MD & TVD

11,290'

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

10,905'

22. IF MULTIPLE COMPL., HOW MANY*

23. INTERVALS DRILLED BY

ROTARY TOOLS

CABLE TOOLS

→

0-11,290'

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

9003'-9023' (Wolfcamp)

9294'-9344' (Wolfcamp)

25. WAS DIRECTIONAL SURVEY MADE

No

26. TYPE ELECTRIC AND OTHER LOGS RUN

CNL-FDC, DLL, GR

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" OD	54.5	600'	17-1/2"	550 sacks	None
8-5/8" OD	24 & 32	3,015'	12-1/4"	1600 sacks	None
5-1/2" OD	17 & 20	11,290'	7-7/8"	750 sacks	None

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					2-7/8"	9725.2'	9725.2'

31. PERFORATION RECORD (Interval, size and number)

2-0.29" holes @ 9003', 9004', 9005', 9006', 9007', 9008', 9009', 9021', 9022', & 9023'.
 2-0.48" holes @ 9294', 9295', 9296', 9297', 9298', 9299', 9301', 9330', 9331', 9332', 9340', 9341', 9342', 9343', & 9344'.

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
9294' - 9344'	3000 gals 15% HCl acid, 1000 SCF N ₂ bbl. & 45 RCNCB's
9003' - 9023'	2000 gals 15% HCl acid w/1000 SCF N ₂ & 30 ball sealers

33. PRODUCTION

DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)				WELL STATUS (Producing or shut-in)	
May 3, 1977		Flowing				Shut-in	
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
5-23-77	4	10, 12, 14, 16/64" \longrightarrow		35.8		----	2
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)	
900	---	\longrightarrow	214.8	CAOF 829	---	53.1	

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

Well is shut in waiting on Pipe Line Connection

TEST WITNESSED BY

J. L. Bussell

35. LIST OF ATTACHMENTS

Deviation Test

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

SIGNED

TITLE

Region Operations Manager

DATE

6/1/77

*(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: "Secks 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 PERMEABILITY AND CONTENTS THEREOF: CORRED 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	TOP	
					MEAS. DEPTH	TRUE VEET. DEPTH
			No cores or drill stem tests taken.	Bone Springs Dean Wolfcamp Canyon Strawn Atoka Morrow Chester	4730' 8338' 8649' 9662' 10,054' 10,524' 10,752' 11,258'	

AFFIDAVIT

State of Texas Cities Service Oil Company

County of Midland Lease Name Government "AB" Well # 4

In Sec. 9 Twp. 20-S Rge. 28-E

County of Eddy

State New Mexico

E. Y. Wilder of lawful age being first duly sworn deposes and

says:

That he supervises development and operation of the captioned lease and is duly qualified and authorized to make this affidavit and is fully acquainted with all facts herein set out concerning Deviation and Directional drilling.

Degrees	Depth	Degrees	Depth	Degrees	Depth
.25	250'	1.50	7,333'		
.50	710'	1.25	7,803'		
.75	1,070'	1.50	8,302'		
1.00	1,542'	1.50	8,800'		
1.00	2,015'	1.00	9,122'		
1.50	2,220'	.75	9,617'		
1.75	2,573'	1.00	10,117'		
1.75	3,050'	1.00	10,588'		
1.25	3,485'	1.00	10,770'		
1.50	3,985'	1.75	11,090'		
1.25	4,485'				
1.25	4,985'				
1.25	5,485'				
1.50	5,923'				
1.50	6,395'				
1.50	6,845'				

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U. S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO

Further affiant saith not.

E. Y. Wilder

Subscribed and sworn to before me this 2nd day of June, 19 77

My Commission Expires 6-1-79 *Christine Hamlin* Notary Public
Midland County, Texas

NEW MEXICO OIL CONSERVATION COMMISSION
WE LOCATION AND ACREAGE DEDICATION PLAT

Form O-102
Superseded O-128
Effective 1-1-65

All distances must be from the outer boundaries of the Section

CITIES SERVICE OIL COMPANY			Lease Government "AB"		Well No. 4
Section 9	Township 20 South	Range 28 East	County Eddy		
Actual Well Location of Well:					
2105	feet from the south line and	760	feet from the west line		
Ground Level Elev. 3282.7	Producing Formation Wolfcamp	Foot Burton Flat Wolfcamp, North	Depth 320	Acres	

1. Outline the acreage dedicated to the subject well by colored pencil or hatchure marks on the plat below.
2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).
3. If more than one lease of different ownership is dedicated to the well, have the interests of all owners been consolidated by communitization, unitization, force-pooling, etc?

☐ Yes ☐ No If answer is "yes," type of consolidation _____

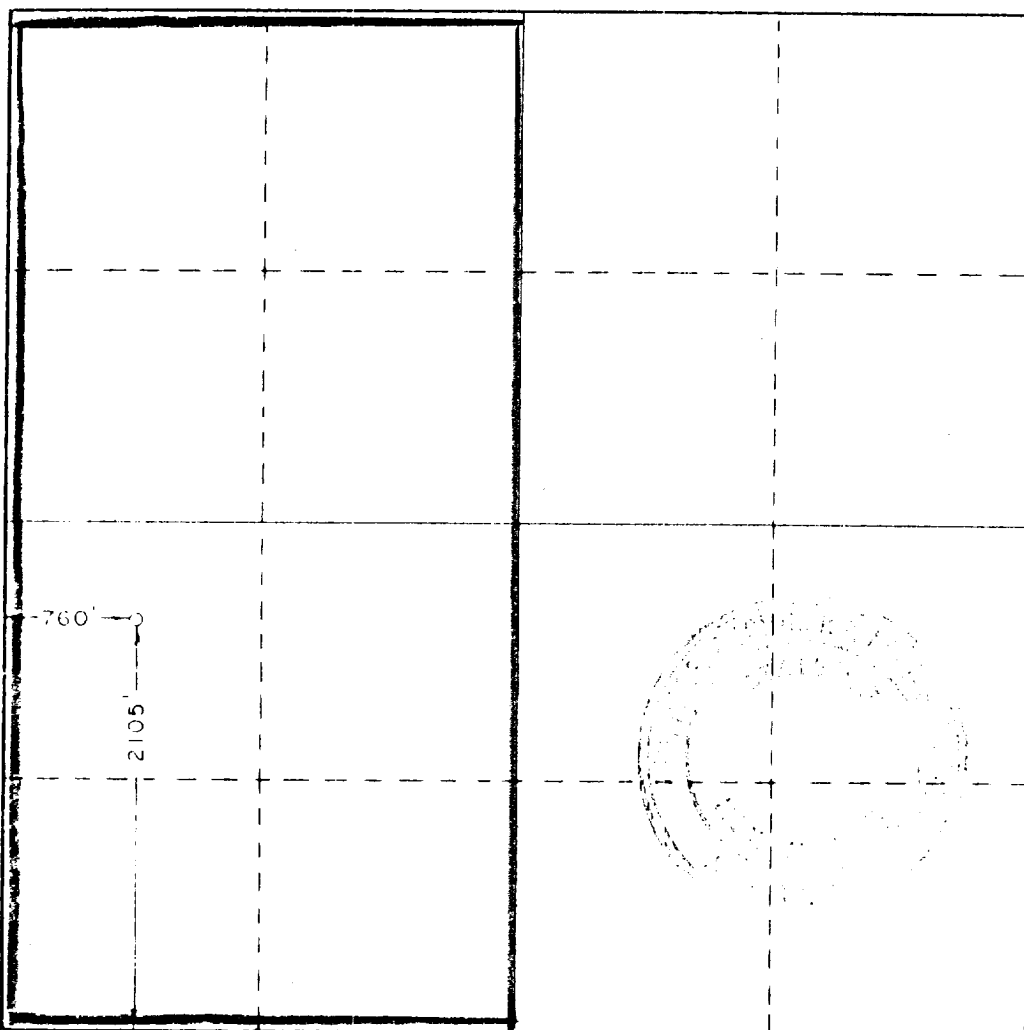
If answer is "no," list the owners and tract descriptions which have not been consolidated. (Use reverse side of this form if necessary.) _____

No allowable will be assigned to the well until all interests have been consolidated (by communitization, unitization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interests, has been approved by the Commission.

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ARTESIA, NEW MEXICO



CERTIFICATION

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief

Name *E. Spiller*
Position Region Operation Manager
Company Cities Service Oil Company
Date June 2, 1977

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my knowledge and belief.

Date Surveyed Dec. 3, 1976
Registered Professional Engineer and/or Land Surveyor

John W. West
Certificate No. 676

330 660 990 1320 1650 1980 2310 2640 2970 3300 3630 3960 4290 4620 4950 5280 5610 5940 6270 6600