

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

(See other in-  
stru-  
rev side)

Budget Bureau No. 4-355.5.

5. LEASE DESIGNATION AND SERIAL NO.

NM 6010

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Stinking Draw

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Wildcat *Moscow*

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

Sec. 10-21S-22E

Unit I NMPM

12. COUNTY OR PARISH

Eddy

13. STATE

NM

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

Yates Petroleum Corporation

3. ADDRESS OF OPERATOR

207 South 4th Street - Artesia, NM 88210

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

At surface

1383' FSL & 695' FEL of Section 10-21S-22E

At top prod. interval reported below

At total depth

14. PERMIT NO.

DATE ISSUED

15. DATE SPUDDED

3-29-78

16. DATE T.D. REACHED

6-29-78

17. DATE COMPL. (Ready to prod.)

Dry *PA* 7-11-78

18. ELEVATIONS (DF, RSB, RT, GR, ETC.)\*

4177'

19. ELEV. CASINGHEAD

20. TOTAL DEPTH, MD & TVD

9464'

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

22. IF MULTIPLE COMPL., HOW MANY\*

23. INTERVALS DRILLED BY

ROTARY TOOLS

CABLE TOOLS

0-9464'

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

Dry

25. WAS DIRECTIONAL SURVEY MADE

No

26. TYPE ELECTRIC AND OTHER LOGS RUN

CNL/FDC, DLL

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"	48#	167'	18"	125 sacks	
8-5/8"	24#	1130'	12 1/4"	975 sacks	

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)

31. PERFORATION RECORD (Interval, size and number)

32. ACID, SHOT, FRACTURING, 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)

DRY

DATE OF TEST

HOURS TESTED

CHOKE SIZE

PROD'N. FOR TEST PERIOD

OIL—BBL.

GAS—MCF.

WATER—BBL.

GAS-OIL RATIO

FLOW. TUBING PRESS.

CASING PRESSURE

CALCULATED 24-HOUR RATE

OIL—BBL.

GAS—MCF.

WATER—BBL.

OIL GRAVITY-API (CORR.)

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

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

*Christine Johnson* TITLE

DATE

7-11-78

\*(See Instructions and Spaces for Additional Data on Reverse Side)