

NEW MEXICO OIL CONSERVATION COMMISSION
MULTIPOINT AND ONE POINT BACK PRESSURE TEST FOR GAS WELL

Form C-122
Revised 9-1-65

RECEIVED

Type Test ☒ Initial ☐ Annual ☐ Special						Test Date 11-2-79		NOV 9 1979	
Company HNG Oil Company				Connection El Paso Natural Gas Company				Unit D.B.C.	
Pool Golden Lane / <i>Atoka</i>				Formation Atoka				ARTESIA, OFFICE	
Completion Date 8-27-79		Total Depth 12,633'		Plug Back TD 12,549'		Elevation 3395' GR		Farm or Lease Name Golden Lane 36 Federal	
Csg. Size 7"	Wt. 23#	d 6.366	Set At 10,907'	Perforations: From 11,411' To 11,416'		Well No. 1			
Tbg. Size 2-3/8"	Wt. 6.5#	d 1.853	Set At 10,698'	Perforations: From To		Unit Sec. Twp. Rge. J 36 20S 29E			
Type Well - Single - Bradenhead - G.C. or G.O. Multiple Single						Packer Set At PBR 10,698'		County Eddy	
Producing Thru Tubing		Reservoir Temp. °F 120 @ 10,698		Mean Annual Temp. °F		Baro. Press. - P _a		State New Mexico	
L 10,698'	H	Gg .687	% CO ₂ .25	% N ₂ 1.04	% H ₂ S 0	Prover	Meter Run 2"	Taps Flg	

FLOW DATA							TUBING DATA		CASING DATA		Duration of Flow
NO.	Prover Line Size	X	Orifice Size	Press. p.s.i.g.	Diff. h _w	Temp. °F	Press. p.s.i.g.	Temp. °F	Press. p.s.i.g.	Temp. °F	
1.	2	X	1.75				350	70	Pkf.		24 hours
2.											
3.											
4.											
5.											

RATE OF FLOW CALCULATIONS							
NO.	Coefficient (24 Hour)	$\sqrt{h_w P_m}$	Pressure P _m	Flow Temp. Factor Ft.	Gravity Factor Fg	Super Compress. Factor, Fpv	Rate of Flow Q, Mcfd
1.							1000
2.							
3.							
4.							
5.							

NO.	P _r	Temp. °R	T _r	Z	Gas Liquid Hydrocarbon Ratio 125 Mcf/bbl.
1.					A.P.I. Gravity of Liquid Hydrocarbons 30.0 Deg.
2.					Specific Gravity Separator Gas .687 XXXXXXXXXX
3.					Specific Gravity Flowing Fluid XXXXX
4.					Critical Pressure P.S.I.A. R
5.					Critical Temperature R

NO.	P _r ²	P _w ²	P _w ²	P _c ² - P _w ²	(1) $\frac{P_c^2}{P_c^2 - P_w^2} =$	(2) $\left[\frac{P_c^2}{P_c^2 - P_w^2} \right]^n =$
1.						
2.						
3.						
4.						
5.						

Absolute Open Flow 1000 Mcfd @ 15.025				Angle of Slope @	Slope, n
Remarks: Well is producing through a compressor.					
Approved By Commission:		Conducted By:		Checked By:	

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 _____		5. LEASE DESIGNATION AND SERIAL NO. NM 17425																									
b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-IN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other _____		6. IF INDIAN, ALLOTTEE OR TRIBE NAME																									
2. NAME OF OPERATOR HNG Oil Company		7. UNIT AGREEMENT NAME																									
3. ADDRESS OF OPERATOR P. O. Box 2267, Midland, Texas 79702		8. FARM OR LEASE NAME Golden Lane 36 Federal																									
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements) At surface 2080' FSL & 1880' FEL Sec. 36 At top prod. interval reported below Same At total depth Same		9. WELL NO. 1																									
14. PERMIT NO. ARTESIA, NEW MEXICO 1-12-79		10. FIELD AND POOL, OR WILDCAT Golden Lane /Atoka/																									
15. DATE SPURRED 3-3-79		11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA Sec. 36, T20S, R29E																									
16. DATE T.D. REACHED 4-17-79		12. COUNTY OR PARISH Eddy																									
17. DATE COMPL. (Ready to prod.) 8-27-79		13. STATE NM																									
18. ELEVATIONS (DF, RKB, RT, GE, ETC.)* 3395' GR		19. ELEV. CASINGHEAD 3395																									
20. TOTAL DEPTH, MD & TVD 12,633'		21. PLUG BACK T.D., MD & TVD 12,549'																									
22. IF MULTIPLE COMPL., HOW MANY*		23. INTERVALS DRILLED BY ROTARY TOOLS CABLE TOOLS																									
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 11,411 - 11,416 /Atoka/		25. WAS DIRECTIONAL SURVEY MADE No																									
26. TYPE ELECTRIC AND OTHER LOGS RUN BHC Sonic, Dual Laterlog & Cement Bond Log		27. WAS WELL CORED No																									
28. CASING RECORD (Report all strings set in well)																											
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31. PERFORATION RECORD (Interval, size and number) 11,411 - 11,416 (29" 6) Reperf 11,411 - 11,416 (34" 6)*(See Below)																											
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.																											
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34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Vented																											
35. LIST OF ATTACHMENTS Logs																											
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records																											
SIGNED <u>Beatty A. Gildon</u> TITLE <u>Regulatory Clerk</u> DATE <u>10-12-79</u>																											

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

* Perfs 12,191-12,487 (38" 18) acidized w/6000 gals Morrow Flow BC 7-1/2% acid.
Cmt. ret. set at 12,370 w/35 sx C1 H. Acidize perfs 12,191-12,328 w/4000 gals
Morflo acid. Sqaz. w/50 sx C1 H.

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	3875	6540				
Bone Springs	6540	9850				
Wolfcamp	9850	11024				
Strawn	11024	11368				
Atoka	11368	11640				
Atoka Lime	11640	12073				
Morrow	12073	TD				