

UN ^{N.M.O.C.D. COPY}ED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY(See other in-
structions on
reverse side)Form approved.
Budget Bureau No. 42-R355.5.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG*

RECEIVED

1a. TYPE OF WELL: OIL WELL ☐ GAS WELL ☒ DRY ☐ Other <u>OCT 26 1979</u>		5. LEASE DESIGNATION AND SERIAL NO. NM-9545	
b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other <u>O.C.C.</u>		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
2. NAME OF OPERATOR Amoco Production Company ✓		7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR P. O. Box 68, Hobbs, NM 88240		8. FARM OR LEASE NAME Federal AA	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 1980' FNL & 1980' FWL, Sec. 17 (Unit <u>E, FSW/4, NW/4</u>) At top prod. interval reported below At total depth		9. WELL NO. 1	
14. PERMIT NO.		DATE ISSUED OCT 23 1979	
15. DATE SPEUDED 5-31-79		16. DATE T.D. REACHED 7-13-79	
17. DATE COMPL. (Ready to prod.) 9-10-79		18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 3650.8 GL	
20. TOTAL DEPTH, MD & TVD 12047'		21. PLUG, BACK T.D., MD & TVD 11320'	
22. IF MULTIPLE COMPL., HOW MANY* --		23. INTERVALS DRILLED BY 0-TD	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 11156'-11168' 11284'-11360' Morrow		25. WAS DIRECTIONAL SURVEY MADE No	
26. TYPE ELECTRIC AND OTHER LOGS RUN Comp Neutron From Density; Dual Laterolog Micro SFL		27. WAS WELL CORED No	
28. CASING RECORD (Report all strings set in well)			
CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE
13-3/8"	54.5#	396'	17-1/2"
9-5/8"	36#	2648'	12-1/4"
5-1/2"	17# & 20#	12050'	8-3/4"
CEMENTING RECORD		AMOUNT PULLED	
200 sx Thickset; 500 sx C		C Circ 260 sx	
400 sx Thickset; 2000 sx		Lite: 200 sx C	
1800 sx Lite; 500 sx C		H TCMT 1710'	
29. LINER RECORD			
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*
TUBING RECORD		PACKER SET (MD)	
SIZE	DEPTH SET (MD)		
31. PERFORATION RECORD (Interval, size and number)			
11156'-11168' w/4 JSPF			
11284'-11290' w/4 JSPF			
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED	
11156'-11290'		4000 gal 7-1/2% MS acid	
33.* PRODUCTION			
DATE FIRST PRODUCTION 9-10-79		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) FLW	
DATE OF TEST 9-10-79		WELL STATUS (Producing or shut-in) SI	
HOURS TESTED 24	CHOKE SIZE 19/64	PROD'N. FOR TEST PERIOD OIL—BBL. 0	GAS—MCF. 1300
WATER—BBL. 0	GAS-OIL RATIO		
FLOW. TUBING PRESS. 600#	CASING PRESSURE --	CALCULATED 24-HOUR RATE OIL—BBL. 0	GAS—MCF. 1300
WATER—BBL. 0		OIL GRAVITY-API (CORR.)	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) To be sold			
35. LIST OF ATTACHMENTS Logs Mailed 10-22-79			
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records			
SIGNED <u>Ray Cox</u>		TITLE Administrative Supervisor	
DATE 10-2-79			

0+4 USGS-A, 1-Hou, 1-Susp, 1-BD, 1-Read & Stevens, 1-Holly Energy Corp.

*(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
Morrow	11156'	11290'	Dry Gas	Delaware Bone Springs Wolfcamp Strawn Atoka Morrow Mid. Morrow Barnett Shale Miss Lime	2740' 5030' 8669' 10212' 10731' 11111' 11346' 11600' 11992'	