

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 _____		
b. TYPE OF COMPLETION:		NEW WELL ☒	WORK OVER ☐	DEEP-EN ☐	PLUG BACK ☐	DIFF. RESVR. ☐	Other _____
2. NAME OF OPERATOR Meadco Properties, Ltd. ✓						O. C. D.	
3. ADDRESS OF OPERATOR P. O. Box 2236, Midland, Texas 79702						ARTESIA, OFFICE	
4. LOCATION OF WELL (Report location clearly and in accordance with instructions on reverse side) At surface 3153' FNL & 660' FWL, Sec. 4, T-21-S, R-29-E At top prod. interval reported below Same At total depth Same						RECEIVED AUG 11 1980 U.S. GEOLOGICAL SURVEY ARTESIA, NEW MEXICO	
14. PERMIT NO. _____							
5. LEASE DESIGNATION AND SERIAL NO. LC-029588		6. IF INDIAN, ALLOTTEE OR TRIBE NAME		7. UNIT AGREEMENT NAME		8. FARM OR LEASE NAME Harris Federal	
9. WELL NO. 1		10. FIELD AND POOL, OR WILDCAT Undesignated		11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA Sec. 4, T-21-S, R-29-E		12. COUNTY OR PARISH Eddy	
13. STATE NM		15. DATE SPUDDED 4/12/80		16. DATE T.D. REACHED 4/22/80		17. DATE COMPL. (Ready to prod.) 8/5/80	
18. ELEVATIONS (DF, REB, RT, OR, ETC.)* 3439.2 GR		19. ELEV. CASINGHEAD		20. TOTAL DEPTH, MD & TVD 4400'		21. PLUG, BACK T.D., MD & TVD	
22. IF MULTIPLE COMPL., HOW MANY*		23. INTERVALS DRILLED BY 0		24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 4007 - 4161 - Undesignated Delaware		25. WAS DIRECTIONAL SURVEY MADE No	
26. TYPE ELECTRIC AND OTHER LOGS RUN Gamma Ray-Neutron		27. WAS WELL CORED No		28. CASING RECORD (Report all strings set in well)		29. LINER RECORD	
30. TUBING RECORD		31. PERFORATION RECORD (Interval, size and number) 4007 - 4161 (24 Holes)		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.		33. PRODUCTION	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Vented		35. LIST OF ATTACHMENTS Inclination Survey, 2 - copies Gamma Ray Neutron Log		36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records		37. TEST WITNESSED BY Jack Ottoberry	
38. DATE FIRST PRODUCTION 8/5/80		39. PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Pumping		40. WELL STATUS (Producing or shut-in) Producing		41. DATE OF TEST 8/5/80	
42. HOURS TESTED 24		43. CHOKER SIZE Pump		44. PROD'N. FOR TEST PERIOD 12		45. OIL—BBL. 12	
46. GAS—MCF. .9		47. WATER—BBL. 10		48. GAS-OIL RATIO 75-1		49. FLOW. TUBING PRESS. 0	
50. CASING PRESSURE 0		51. CALCULATED 24-HOUR RATE 12		52. OIL—BBL. 12		53. GAS—MCF. .9	
54. WATER—BBL. 10		55. OIL GRAVITY-API (CORR.) 41.1		56. DATE 8/7/80		57. SIGNED Agent	
58. TITLE Agent		59. DATE 8/7/80		60. SIGNED Agent		61. DATE 8/7/80	

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

AUG 13 1980
U.S. GEOLOGICAL SURVEY
ROSWELL, NEW MEXICO

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: "Seals 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	TOP TRUE VERT. DEPTH
Reef	1980	3740	Water	Rustler Andhy.	196	
Del. Sand	3740	4150	Oil, gas & water	Salt	540	
Delaware Sand	4150	4400	Water	Base Salt	1720	
				Yates	1820	
				Capitan Reef	1980	
				Delaware Sand	3740	