

UNITED STATES DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYForm approved.
Budget Bureau No. 42-R355.5.

5. LEASE DESIGNATION AND SERIAL NO.

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

9. WELL NO.

10. FIELD AND POOL, OR WILDCAT

11. SEC., T., R., M., OR BLOCK AND SURVEY
OL. AREA12. COUNTY OR
PARISH

13. STATE

14. ELEVATIONS (DF, RGR, RT, GR, ETC.)

15. DATE SPUNDED

16. DATE T.D. REACHED

17. DATE COMPI. (Ready to prod.)

18. TOTAL DEPTH, MD & TVD

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

20. PRODUCING INTERVAL(S) OF THIS COMPLETION

21. TYPE ELECTRIC AND OTHER LOGS RUN

22. WAS DIRECTIONAL
SURVEY MADE

23. WAS WELL CURED

24. CEMENTING RECORD

25. AMOUNT PULLED

26. PERFORATION RECORD (Interval, size and number)

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

28. DATE FIRST PRODUCTION

29. PRODUCTION METHOD (Flowing, gas lift, pumping--size and type of pump)

30. WELL STATUS (Producing or shut-in)

31. DATE OF TEST

32. HOURS TESTED

33. CHOKER SIZE

34. PROD'N. FOR TEST PERIOD

35. OIL, BRL.

36. GAS, MCF.

37. WATER, BRL.

38. GAS-OIL RATIO

39. OIL GRAVITY-AP (CORR.)

40. 100% WITNESSED BY

41. U.S. GEOLOGICAL SURVEY

42. ROSWELL, NEW MEXICO

43. MAY 5 1982

44. SIGNED

45. TITLE

46. DATE

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL: OIL WELL ☐ GAS WELL ☒ DRY ☐ Other ☐ RECEIVEDb. TYPE OF COMPLETION: NEW WELL ☐ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☒ DIFF. RESVR. ☐ Other ☐ MAY - 6 1982

2. NAME OF OPERATOR

3. ADDRESS OF OPERATOR

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

At surface 1980' FSL & 1930' FEL OF SEC. UNIT J

At top prod. interval reported below

At total depth

13. PERMIT NO.

DATE ISSUED

15. DATE SPUNDED

16. DATE T.D. REACHED

17. DATE COMPI. (Ready to prod.)

18. TOTAL DEPTH, MD & TVD

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

20. PRODUCING INTERVAL(S) OF THIS COMPLETION

21. TYPE ELECTRIC AND OTHER LOGS RUN

22. WAS DIRECTIONAL SURVEY MADE

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* (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: "Stacks 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.)

27. SUMMARY OF LOGS, ZONES, SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF; CORREL. INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CUSHION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES				28. GEOLOGIC MARKERS		
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH	TRUE VERT. DEPTH
			SEE TOTAL P-331 DATED 9-16-80 FOR DST DETAILS.			
				T/DEL. SD	2514	+ 725
				T/BONE SPRING	5974	- 2735
				T/WILSON	9602	- 6363
				T/STRAIN	10,780	- 7481
				T/ATKIN	11,120	- 7881
				M/WILSON	11,866	- 8627
				L/WILSON	12,138	- 8899