

RECEIVED P

NEW MEX. OIL CONS. COMMISSION

Drawer D

Artesia, 1 88210

SUBMIT IN DUPLICATE*

(See other in-
structions on
reverse side)Form approved.
Budget Bureau No. 42-R355.5.AUG 03 1983
UNITED STATES
DEPARTMENT OF THE INTERIOR
O. GEOLOGICAL SURVEY

ARTESIA, OFFICE

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

1a. TYPE OF WELL: OIL WELL ☒ GAS WELL ☐ DRY ☐		1b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other ☐		MAY 27 1983	
2. NAME OF OPERATOR Exxon Corporation				OIL & GAS	
3. ADDRESS OF OPERATOR P. O. Box 1600, Midland, TX 79702				ROSWELL, NEW MEXICO	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 1980' FNL and 1980' FEL of Section At top prod. interval reported below At total depth					
14. PERMIT NO.		DATE ISSUED 11-10-82		12. COUNTY OR PARISH Eddy	
15. DATE SPUDDED 12-2-82		16. DATE T.D. REACHED 12-13-83		17. DATE COMPL. (Ready to prod.) 12-30-82	
18. ELEVATIONS (DF, REB, RT, GR, ETC.)* KB-3248'; GL-3234'		19. ELEV. CASINGHEAD		20. TOTAL DEPTH, MD & TVD 4700'	
21. PLUG, BACK T.D., MD & TVD		22. IF MULTIPLE COMPL., HOW MANY*		23. INTERVALS DRILLED BY 0-4700'	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* Delaware 3448-3650'				25. WAS DIRECTIONAL SURVEY MADE No	
26. TYPE ELECTRIC AND OTHER LOGS RUN LDT-CNL; DLL-MSFL; EPT; CST				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
8 5/8"	24#	618'	11"	402 SPT 150 M	
5 1/2"	14#	4693'	7 7/8"	1215 SPT C1 C	
29. LINER RECORD					
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	
None					
30. TUBING RECORD					
SIZE	DEPTH SET (MD)	PACKER SET (MD)			
2 7/8"	3405'				
31. PERFORATION RECORD (Interval, size and number) 3448-3650' w/182 shots			32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.		
			DEPTH INTERVAL (MD)		
			3448-3650'		
			AMOUNT AND KIND OF MATERIAL USED		
			Acidz w/6000 gal 15% 202 acid		
			Frac 2/78,000 gals gel H ₂ O		
			54,000# 20-40 sd.		
			48,000# 10-20 sd.		
33. PRODUCTION					
DATE FIRST PRODUCTION 12-30-82		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Pump			WELL STATUS (Producing or shut-in) Producing
DATE OF TEST 5-17-83	HOURS TESTED 24.0	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL. 121	GAS—MCF. 93
FLOW. TUBING PRESS. 98#	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL. 233
				OIL GRAVITY-API (CORR.) 42	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)					TEST WITNESSED BY
ACCEPTED FOR RECORD					
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 <i>Melba Knippling</i>		TITLE Unit Head		DATE 5-25-83	

* (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	TRUE VERT. DEPTH
Delaware Sand	2568		sandstone, dolomite, sand	Delaware	2568'	