

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other in-
structions on
reverse side)Form approved,
Budget Item No. 42-R355.5.

RECEIVED

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL: OIL WELL ☐ GAS WELL ☒ DRY ☐ Other _____		5. LEASE DESIGNATION AND SERIAL NO. LC-064490	
b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other <u>Aug 28 '89</u>		6. IF INDIAN, ALLOTTEE OR TRIBE NAME _____	
2. NAME OF OPERATOR Chevron U.S.A. Inc. ✓		7. UNIT AGREEMENT NAME _____	
3. ADDRESS OF OPERATOR P.O. Box 670 Hobbs, New Mexico		8. FARM OR LEASE NAME Lee K Federal	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 1780' FSL & 2080' FEL At top prod. interval reported below At total depth		9. WELL NO. 1	
14. PERMIT NO.		DATE ISSUED	
15. DATE SPUDDED 5/29/89		16. DATE T.D. REACHED 7/16/89	
17. DATE COMPL. (Ready to prod.) 8-2-89		18. ELEVATIONS (DE, RKB, RT, GR, ETC.)* 3345.9	
19. ELEV. CASINGHEAD		20. TOTAL DEPTH, MD & TVD 11,810	
21. PLUG, BACK T.D., MD & TVD 11,805		22. IF MULTIPLE COMPL., HOW MANY*	
23. INTERVALS DRILLED BY		ROTARY TOOLS X	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* Morrow 11487'-11627'		25. WAS DIRECTIONAL SURVEY MADE NO	
26. TYPE ELECTRIC AND OTHER LOGS RUN GR/DLL/MICRO-LL/ZDL/CML/CAL/CCL		27. WAS WELL CORED NO	
28. CASING RECORD (Report all strings set in well)			
CASINO SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE
13 3/8	48	427	17 1/2
9 5/8	40	2758	12 1/4
5 1/2	17	11810	7 7/8
CEMENTING RECORD		AMOUNT PULLED	
1150sx Class "C"		Post FD-2	
1290sx Class "C"		9-22-89	
2100sx Class "C"		comp & BK	
29. LINER RECORD			
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*
30. TUBING RECORD		PACKER SET (MD)	
SIZE	DEPTH SET (MD)	11,422'	
2 3/8"	11,422'		
31. PERFORATION RECORD (Interval, size and number) 11487-504', 11580-87', 11616-27' (112 holes 4" x 35 gram SPF-90 DEG)			
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED	
11487-11627		2000psi Nitrogen blanket (3500 SCF)	
SCF N2/BBL Dropping		Acidz. W/4500g 7 1/2% NFFE 1000 107 RCN balls Displ W/8700	
33.* PRODUCTION SCF N2.			
DATE FIRST PRODUCTION 8-2-89		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Flowing	
WELL STATUS (Producing or shut-in) Shut-in			
DATE OF TEST 8-8-89	HOURS TESTED 24	CHOKE SIZE 7.5/64"	PROD'N. FOR TEST PERIOD →
FLOW. TUBING PRESS. 2880#	CASING PRESSURE 0#	CALCULATED 24-HOUR RATE →	OIL—BBL. 0
GAS—MCF. 1905		WATER—BBL. 0	
OIL GRAVITY-API (CORR.) N/A			
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) To be sold. Well is shut-in, waiting on transporter			
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 <u>C. McCarney</u>		TITLE NM Area Prod. Supt.	
DATE 8-10-89			

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

CARLSBAD, 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: "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	NAME	MEAS. DEPTH	TRUE VERT. DEPTH
			T/Delaware	2738	
			T/BONE SPRING	4934	
			T/AND BONE SPRING SAND	8154	
			T/WOLF CAMP	8605	
			T/CISCO LS	9128	
			T/CANYON LS	9964	
			T/STRAWN LS	10150	
			T/ATOKA	10423	
			T/MORROW	10896	
			T/MORROW CLASTICS	11121	
			B/MID MORROW SHALE	11465	