

Form 5-322
(Rev. 5-68)UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other 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 Robert N Enfield ✓									
3. ADDRESS OF OPERATOR P.O. Box 2431, Santa Fe, New Mexico 87501									
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)									
At surface 1980 FSL & 330 FWL									
At top prod. interval reported below									
At total depth									
14. PERMIT NO. _____ DATE ISSUED _____ O. C. C. ARTESIA, OFFICE									
15. DATE SPUDDED		16. DATE T.D. REACHED		17. DATE COMPL. (Ready to prod.)		18. ELEVATIONS (DF, REB, RT, GR, ETC.)*		19. ELEV. CASINGHEAD	
9-30-73		10-20-73		P & A		GR-3005		3005 surf.	
20. TOTAL DEPTH, MD & TVD		21. PLUG, BACK T.D., MD & TVD		22. IF MULTIPLE COMPL., HOW MANY*		23. INTERVALS DRILLED BY		24. WAS DIRECTIONAL SURVEY MADE	
2920						0-2920		No	
25. TYPE ELECTRIC AND OTHER LOGS RUN Electric logs-Gamma Ray Neutron									
26. CASING RECORD (Report all strings set in well)									
CASING SIZE		WEIGHT, LB./FT.		DEPTH SET (MD)		HOLE SIZE		CEMENTING RECORD	
10 3/4		32.5 ST & C		300		15"		300 sx circ.	
29. LINER RECORD									
SIZE		TOP (MD)		BOTTOM (MD)		SACKS CEMENT*		SCREEN (MD)	
30. TUBING RECORD									
SIZE		DEPTH SET (MD)		PACKER SET (MD)					
31. PERFORATION RECORD (Interval, size and number)									
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.									
DEPTH INTERVAL (MD)					AMOUNT AND KIND OF MATERIAL USED				
33.* PRODUCTION									
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)							
DATE OF TEST		HOURS TESTED		CHOKE SIZE		PROD'N. FOR TEST PERIOD		OIL—BBL.	
FLOW. TUBING PRESS.		CASING PRESSURE		CALCULATED 24-HOUR RATE		OIL—BBL.		GAS—MCF.	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)									
TEST WITNESSED BY									
35. LIST OF ATTACHMENTS									
Logs—due to hole condition had to log inside drill pipe									
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records									
SIGNED		TITLE				DATE			
Robert N Enfield		Operator				11-7-73			

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

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.), formations, 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. (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. (See instruction for items 22 and 24 above.)

FORMATION		TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.		GEOLOGIC MARKERS	
				NAME	MEAS. DEPTH	TRUE VERT. DEPTH	
Delaware Sand	2513			Anhydrite	580		
				Lamar Lime	2480		
				Delaware Sand	2513		
Ramsey Sand	2538			Ramsey Sand	2538		
Olds Sand	2575			Olds Sand	2575		
T.D.	2920						

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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

Core #1 2880-2920 -Rec. 38', No shows
 2880-2907 lt. gry fn. gr. friable sand,
 no shows
 2907-2910 lt. gry fn. gr. friable sand,
 no shows with gray shale streaks
 2910-2918 lt. gry fn. gr. friable sand but
 not as friable as sand above, no
 shows.

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