

RECEIVED BY

MAR 13 1985

BARTESIA OFFICE

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN 1

ICATE\*

(See other instructions on reverse side)

Form approved.  
Budget Bureau No. 42-R355.5.

5. LEASE DESIGNATION AND SERIAL NO.

NM-02 7994-D

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

Federal "RR" Com

8. FARM OR LEASE NAME

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT  
~~Undesignated~~

11. SEC. T., R., M., OR BLOCK AND SURVEY OR AREA

Sec. 24, T-23-S, R-26E

12. COUNTY OR PARISH  
Eddy

13. STATE

New Mexico

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

2. NAME OF OPERATOR

Mobil Producing Texas &amp; New Mexico Inc. ✓

3. ADDRESS OF OPERATOR

9 Greenway Plaza, Suite 2700 - Houston, TX 77046

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

At surface 660' FSL &amp; 1980' FWL, Sec. 24, T-23-S, R-26E

At top prod. interval reported below

At total depth

14. PERMIT NO.

DATE ISSUED

8-28-84

15. DATE SPUDDED

1-1-74

16. DATE T.D. REACHED

2-7-84

17. DATE COMPL. (Ready to prod.)

2-20-85

18. ELEVATIONS (DF, RKB, RT, GR, ETC.)\*

3237 GR

19. ELEV. CASINGHEAD

20. TOTAL DEPTH, MD &amp; TVD

12,005

21. PLUG, BACK T.D., MD &amp; TVD

10,165

22. IF MULTIPLE COMPL., HOW MANY\*

23. INTERVALS DRILLED BY

ROTARY TOOLS

CABLE TOOLS

X

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)\*

9923-9954 ~~6150~~ WOLF CAMP

25. WAS DIRECTIONAL SURVEY MADE

No

26. TYPE ELECTRIC AND OTHER LOGS RUN

Collarlog

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 |
|-------------|-----------------|----------------|-----------------------------|------------------|---------------|
| 13-3/8      |                 | 392            | Original casing undisturbed |                  |               |
| 9-5/8       |                 | 5490           |                             |                  |               |
|             |                 |                |                             |                  |               |
|             |                 |                |                             |                  |               |

29. LINER RECORD

| SIZE | TOP (MD) | BOTTOM (MD) | SACKS CEMENT* | SCREEN (MD) | SIZE   | DEPTH SET (MD) | PACKER SET (MD) |
|------|----------|-------------|---------------|-------------|--------|----------------|-----------------|
| 7"   | 5236     | 11,997      | 1950          | --          | 2-3/8" | 11,478         | 9838            |

31. PERFORATION RECORD (Interval, size and number)

9923-28, 9938-46, 9950-54 (20 holes)

W/ 1 JSPF

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

| DEPTH INTERVAL (MD) | AMOUNT AND KIND OF MATERIAL USED        |
|---------------------|-----------------------------------------|
| 790                 | Sqz cmt csg leak w/200/x Cl C + 2% CaCl |
| 732-700             | Sqz cmt csg leak 2/200/x Cl C + 2% CaCl |

33.\*

PRODUCTION

(See reverse)

|                       |                 |                                                                      |                         |          |            |                                    |               |
|-----------------------|-----------------|----------------------------------------------------------------------|-------------------------|----------|------------|------------------------------------|---------------|
| DATE FIRST PRODUCTION |                 | PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) |                         |          |            | WELL STATUS (Producing or shut-in) |               |
| 12-19-84              |                 | Flowing                                                              |                         |          |            | Producing                          |               |
| DATE OF TEST          | HOURS TESTED    | CHOKE SIZE                                                           | PROD'N. FOR TEST PERIOD | OIL—BBL. | GAS—MCF.   | WATER—BBL.                         | GAS-OIL RATIO |
| 2-20-85               | 24              | 3/4"                                                                 | →                       | 0        | 22         | 0                                  | 0             |
| FLOW. TUBING PRESS.   | CASING PRESSURE | CALCULATED 24-HOUR RATE                                              | OIL—BBL.                | GAS—MCF. | WATER—BBL. | OIL GRAVITY-API (CORR.)            |               |
| 660#                  | 600#            | →                                                                    |                         |          |            | 0                                  |               |

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)

Llano, Inc.

TEST WITNESSED BY

Auld

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

Nancy Lewis

TITLE

Authorized Agent

DATE

\* (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.)

790 Sqz 9-5/8" csg leak w/200/x C1 C + 2% CaCl2. Bob Pipchke w/MMS - Job not witnessed.

730-760 Sqz 4 bbl cmt 25/x into csg leak. Sqz 1/4 BPM @ 500# to 900#.

9923-9954 Acdz Cisco form w/4000 gal Dine FE 15% HCL acid. Foamed to 70% quality w/N2. Flushed w/N2 + 18 RCNBS.

## 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 | TRUE VERT. DEPTH |
|           |     |        |                             |                      |             |                  |