

UNITED STATES M. G. C. COPY
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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

5. LEASE DESIGNATION AND SERIAL NO.

NM 0501759

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

AVALON HILLS

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Burton Flat - Morrow

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

Sec. 7, T-21S, R-27E

12. COUNTY OR PARISH
Eddy

13. STATE
New Mexico

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

MONSANTO COMPANY

3. ADDRESS OF OPERATOR

101 North Marienfeld, Midland, Texas 79701

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

At surface 660' FSL & 1980' FWL Section 7

At top prod. interval reported below same

At total depth same

14. PERMIT NO.

DATE ISSUED

1/11/74

15. DATE SPUDDED

1/23/74

16. DATE T.D. REACHED

3/16/74

17. DATE COMPL. (Ready to prod.)

3/22/74

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

3199 DF

19. ELEV. CASINGHEAD

3185 Gr.

20. TOTAL DEPTH, MD & TVD

11,420 MD

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

11,360 MD

22. IF MULTIPLE COMPL., HOW MANY*

23. INTERVALS DRILLED BY

ROTARY TOOLS

CABLE TOOLS

0 - 11,420

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

Morrow 11,168 - 11,354

25. WAS DIRECTIONAL SURVEY MADE

No

26. TYPE ELECTRIC AND OTHER LOGS RUN

FDC - CNL, PL, DIL

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	48#	619'	17 1/2"	810 Sx.	None
9 5/8	40#	2714'	12 3/4"	1510 Sx.	None
5 1/2	17#	11,420'	8 1/2"	800 Sx.	None

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					2 7/8"	10,950	10,950

31. PERFORATION RECORD (Interval, size and number)

11,168 - 11,184 32
11,340 - 11,354 28

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED

33.* PRODUCTION

DATE FIRST PRODUCTION 3/22/74 PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)

Flowing

WELL NAME, Producing or shut-in) Shut in

DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
3/28/74	4	12 - 18/64			.68		

FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)
3850 - 3653	0			25.4 (AOF) 25.4 CAOF		

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

Vented (Awaiting pipeline)

TEST WITNESSED BY

James E. Guthrie

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

TITLE

District Engineer

DATE

3/29/74

*(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

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.
Undiff. Permian	Surface	617	Anhydrite, Dolomite, sands & shale
Capitan Reef	617	2610	Dolomite
Delaware Sd	2610	4800	Sand & shale
Bone Spring	4800	8674	Limestone, sand & shale
Wolfcamp	8674	10,038	Limestone & shale
Strawn	10,038	10,454	Limestone & shale
Atoka	10,454	10,806	Limestone & shale
Morrow	10,806	11,385	Sand, shale & limestone
Miss. (Barnett)	11,385	11,420	Shale
		T.D.	

38.

GEOLOGIC MARKERS

NAME	MEAS. DEPTH	TOP	TRUE VERT. DEPTH
Capitan Reef	617		
Delaware	2610		
3rd Bone Spring	8300		
Wolfcamp	8674		
Strawn	10,038		
Atoka	10,454		
Lower Morrow	10,948		
Barnett	11,385		