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NEW MEXICO OIL CONSERVATION COMMISSION
WELL COMPLETION OR RECOMPLETION REPORT AND LOG

OCT 3 1979

O. C. C.
ARTESIA, OFFICEOCT 2 1979
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WELL COMPLETION OR RECOMPLETION REPORT AND LOG

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B. TYPE OF COMPLETION

OIL WELL ☐GAS WELL ☒DRY ☐OTHER ☐NEW WELL ☐WORK OVER ☐DEEPEN ☐PLUG BACK ☐REPAIR ☐OTHER ☐

P/A

C. Name of Operator

Compane Lande

D. Address of Operator

P. O. Box 1118, Carlsbad, New Mexico 88220

E. Location of Well

C

1980

West

660

F. North

3

S

27E

G. Date of Log

11/16/74

7/13/76

P/A 11-9-78

3173.2

H. Total Depth

1330

I. Plug Back To

J. If Multiple Completions, How Many

K. Intervals Drilled By

L. Rotary Tools

M. Cable Tools

0-1200

N. Name of Well, if different from C, D, E, F, G, H, I, J, K, L, M, N, O, P, Q, R, S, T, U, V, W, X, Y, Z

O. Type of Electric and Other Logs Run

NONE

P. Was Well Cased

NO

28. CASING RECORD (Report all strings set in well)

CASING SIZE	WEIGHT LB./FT.	DEPTH SET	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
16	47.22	380'	18	(Pulled casing when plugged)	

29. LINER RECORD

SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN	SIZE	DEPTH SET	PACKER SET

31. Perforation Record (Interval, size and number)

NONE

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

DEPTH INTERVAL	AMOUNT AND KIND MATERIAL USED

NONE

33. PRODUCTION

33.

PRODUCTION							
Date First Production		Production Method (<i>Flowing, gas lift, pumping — Size and type pump</i>)				Well Status (<i>Prod. or Shut-in</i>)	
						P/A	
Date of Test	Hours Tested	Choke Size	Prod'n. For Test Period →	Oil — Bbl.	Gas — MCF	Water — Bbl.	Gas — Oil Ratio
Flow Tubing Press.	Casing Pressure	Calculated 24- Hour Rate →	Oil — Bbl.	Gas — MCF	Water — Bbl.	Oil Gravity — API (<i>Corr.</i>)	

34. Disposition of Gas (Sold, used for fuel, vented, etc.)

Test Witnessed By

35. List of Attachments

NONE

36. I hereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief.

SIGNED

TITLE

Agent

DATE

10/2/79

REFERENCES

This form is to be filled with the following information: (a) Name of the well; (b) Location of the well; (c) Date of completion of any newly drilled or reamed well; (d) Well owner; (e) Well depth; (f) Well diameter; (g) Well completion; (h) Well casing; (i) Well cement; (j) Well liner; (k) Well annulus; (l) Well head; (m) Well valve; (n) Well flowline; (o) Well production; (p) Well test results; (q) Well log; (r) Well completion report; (s) Well completion log; (t) Well completion log; (u) Well completion log; (v) Well completion log; (w) Well completion log; (x) Well completion log; (y) Well completion log; (z) Well completion log.

INDICATE FORMATION TOPS IN CONFORMANCE WITH GEOGRAPHICAL SECTION OF STATE

11. *Journal of the American Medical Association*, 1990; 263: 1001-1005.

Vol. 1, No. 1, Nov. 1950

T. Abby	T. Canyon	T. Ojo Alamo	T. Penn. "B"
T. Salt	T. Strawn	T. Kentucky-Frankford	T. Penn. "C"
B. Salt	T. Abeka	F. Pleasant Cliffs	T. Penn. "D"
F. Yards	F. Mick	F. Cliff House	T. Lockville
F. DEER	F. DeLeon	T. Moffat	T. Madison
F. Queen	T. Shiloh	F. Pilot Knob	T. Elliott
F. Gayburg	T. Montoya	F. Monaca	T. McCracken
F. San Andres	T. Salsman	T. Gallup	F. Igneous Quartz
F. Glorieta	T. McKee	L. Greenhorn	F. Granite
F. Del Rio	F. El Estero	L. Escondido	T.
T. Newberry	F. Garfield	T. Mustang	F.
T. Tule	F. Granite	T. Truth	T.
T. Inland	T. Delaware Sand	T. Sunset	T.
T. Abo	T. Bone Springs	T. Wingate	T.
T. Wolfcamp	T.	T. Chinle	T.
T. Permian	F.	T. Permian	T.
F. Chalk	F.	T. Chalk	F.

FORMATION RECORD (Attach additional sheets if necessary)

From	To	Thickness in Feet	Formation	From	To	Thickness in Feet	Formation