Form 9-330 (Rev. 5-53)			O STATES	SUBMIT	IN DUPLICA	N N	MOCC	COPY	
	DEPAR		OF THE IN	TERIOR	structi	t. 10^{-10} ions on 5^{-10}		ATION AND SERIAL NO.	
		GEOLOGIC	CAL SURVEY	/	revers	e side) ->. u		M 492	
WELL CO	MPLETION	OR RECO	MPLETION	REPORT A	ND LOO	5 * ^{6. 1}		LOTTEE OR TRIBE NAME	
1a. TYPE OF WEI		ELL GAS WELL		Other		7. 1	NIT AGREEME	NT NAME	
b. TYPE OF COM				RECE	EIVE	D	huguill:	Canyon-Unit-	
WELL	OVER L E	EP- PLUG BACK	DIFF.	Other	· · · · · · · ·	8. P	ARM OR LEAS	E NAME	
2. NAME OF OPERAT		. V		AUG 1	9 1977		Lin	Alta Maria	į.
W. A. N 3. ADDRESS OF OPE							VELL NO. 5		
Moncrie 4. LOCATION OF WE	ef Buildin	g, 9th & C ion clearly and in	ommerce, For accordance with an		IVED	02 <u>10.</u> [Indesigna	ated	
At surface	2310' FNL	and 1980'	FWL			11.	<u></u>	, OR BLOCK AND SURVEY	ê s
At top prod. int	terval reported t	elow		AUG 1	7 1977				
At total depth					•	1	sec. 15-	r2hs-r24e	
-	Same		14. PERMIT NO	U.S. GEOLOGI ARTESIA, NE	CAL_SURVE	Y 12.	COUNTY OR PARISH	13. STATE	
15. DATE SPUDDED	16. DATE T.D.	REACHED 17. DA	TE COMPL. (Ready t	0 prod.) 15 FT	EVATIONS (DF		$\frac{ddy}{dt}$	New Mexico ELEV. CASINGHEAD	
6/20/77	7/31/7				4387 .9 1				
20. TOTAL DEPTH, MD 10,800 *	▲ TVD 21. PL	UG, BACK T.D., MD	TVD 22. IF MUL HOW M	TIPLE COMPL.	23. INTER DRILL	ED BY	ABY TOOLS	CABLE TOOLS	
24. PRODUCING INTER	BVAL(S), OF THIS	S COMPLETION-TO	DP. BOTTOM, NAME ()	MD AND TVD)*	,			25. WAS DIRECTIONAL SURVEY MADE	
								No	
6. TYPE ELECTRIC								WAS WELL CORD	
Compensated	neutron f	ormation de	ensity logs.	Dual late	ral logs	. Micro-	-SFL.	No	
CABING BIZE	WEIGHT, LB		SING RECORD (Rep						
13 3/8"				LE SIZE		INTING RECOR		AMOUNT PULLED	
<u> </u>	$\frac{48 \text{ lbs}}{24 \text{ lbs}}$		$\frac{356!}{2700!}$ 16		<u>25 sx. c</u>		yds. FM.		
0 27 0		•		<u> </u>	200_sx.	CILL.		None	
			······································		· · · · ·				
9.	···· <u> </u>	LINER RECORD	D		30.	TUBIN	G RECORD		
5 I Z D	TOP (MD)	BOTTOM (MD)	SACKS CEMENT [®]	SCREEN (MD)	SIZE	DEPTH	BET (MD)	PACKER SET (MD)	
	Conn (Internal a				-			-	
1. PERFORATION REC	COED (Interval, a	ize and number)		<u>32.</u>	CID, SHOT,	FRACTURE,	CEMENT SQU	UEEZE, ETC.	
				DEPTH INTERV	AL (MD)	AMOUNT	AND KIND OF	MATERIAL USED	
								the second se	
			•					- V F	
	=							· · · · · · · · · · · · · · · · · · ·	Ċ
3.* ATE FIRST PRODUCT:	ION PROF	CTION METHOD	PRGI Flowing, gas lift, pr	DUCTION					
				imping—size ana	type of pump))	well state shut-in)	us (Producing or	
ATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OILBBL.	GASMCF	. WAT	ERBBL	GAS-OIL RATIO	
LOW. TUBING PRESS.	CASING PRESSU	RE CALCULATED 24-HOUR BA	OILBBL.	GAS-MCF	. w	VATER-BBL.	OIL	GRAVITY-API (CORR.)	
4. DISPOSITION OF G	AB (Sold, used fo	r fuel, vented, etc.)	I		TEST	WITNESSED I	BT	
5. LIST OF ATTACHN	MENTS								
36. I hereby certify	that the foregoi	ng and attached	nformation is some	late and					
Da	A DAY		Via	ce-Presider	nt. Oil &	from all ave 6 Gas	ullable record	9	
SIGNE	ward N II	fice) TITLE Add	<u>ministrativ</u>	<u>ve Servi</u>	ces Co.,	DATE	8/9/77	
<u>r.()</u>	and the second se	e Instructions of	nd Spaces for A	ont for W.	Honn	niofIn			

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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.), forma-tion 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 All attachments

Hem 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

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.
for each additional interval to be separately produced, for this well should show the details of any multiple stage cementing and the location of the cementing tool.
item 29: "Sacks Cement": Attached supplemental reports 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.)

MARY OF POROUS ZONES: SHOW ALL IMPORTANT ZONES OF FOROSITY AND CONTENTS THEREOF: CORED INTERVALS; AND ALL DRILL-STEM TESTS, DEPTH INTERVAL TESTED, CUBHION I SED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES	ILL-STEM TESTS, INCLUDING	38. GE0L0010	GEOLOGIC MARKERS	
DESCRIPTION, CONTENTS, ETC.	, ETC.	NAME	MEAS. DEPIN	TRUE VERT. DEPTH
		Delaware	12618	
		Bone Springs Line	L6201	
		1st Bone Sprg.Sand		
		and Bone Sprr. Sakd		
		Stra Bone Serenate		
		Welfcamp Live	1092L	
		Fenn Line	Strong-	
		Lower Strawn	1 17	
		Atoka	97451	
		Morrow Line	, 1666	
		Morrow Clastics	102621	
		Barnett Shale	106521	
				- gp- 5-929