

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE\*

(See instructions on  
reverse side)

Form approved,  
Bureau No. 42 R355.5

5. LEASE DESIGNATION AND SERIAL NO.

NM 11951

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Federal F

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Wildcat SA

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

Sec. 24-T23S-R23E

12. COUNTY OR PARISH

Eddy

13. STATE

NM

WELL COMPLETION OR RECOMPLETION REPORT AND LOG \*

1a. TYPE OF WELL: OIL WELL ☐ GAS WELL ☐ DRY ☐ Other Temp Aban. ☒

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

2. NAME OF OPERATOR

CITIES SERVICE COMPANY

3. ADDRESS OF OPERATOR

P. O. Box 1919 Midland, Texas 79702 ARTESIA OFFICE

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

At surface 1980' FSL & 330' FWL, Sec. 24, T23S, R23E, Eddy Co., NM

At top prod. Interval reported below

At total depth Same as above

14. PERMIT NO.

DATE ISSUED

SEP 14 1981

15. DATE SPUDDED 6-21-81 16. DATE T.D. REACHED 8-6-81 17. DATE COMPL. (Ready to prod.) Temp. Aban. 18. ELEVATIONS (DF, RKB, RT, GR, ETC.)\* 4107' GR 19. ELEV. CASINGHEAD 4107'

20. TOTAL DEPTH, MD & TVD 1125' 21. PLUG BACK T.D., MD & TVD 604 22. IF MULTIPLE COMPL., HOW MANY\* 23. INTERVALS DRILLED BY 387-T.D. 1125 0-387

24. PRODUCING INTERVAL(S), OF THIS COMPLETION--TOP, BOTTOM, NAME (MD AND TVD)\* 25. WAS DIRECTIONAL SURVEY MADE

26. TYPE ELECTRIC AND OTHER LOGS RUN CN-FD, DLL-MSFL 27. WAS WELL CORED

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

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
7-7/8"	26#	298	10"	300 sx + 12 YDS. Redi-Mix	circulated

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) WELL STATUS (Producing or shut-in)

TEMPORARILY ABANDONED

DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL--BBL.	GAS--MCF.	WATER--BBL.	GAS-OIL RATIO

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

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 Elmer Stutz TITLE Reg. Oper. Mgr.-Prod. DATE 9-11-81

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