

UNITED STATES DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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

415P

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

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

Gulf Oil Corporation

3. ADDRESS OF OPERATOR

P. O. Box 670, Hobbs, NM 88240

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

At surface 1830' FSL & 1650' FWL

At top prod. interval reported below

At total depth

OCT 5 1982

GULF OIL CORPORATION
U.S. GEOLOGICAL SURVEY

O. C. B. PERMIT NO. _____
ARTESIA, OFFICE

DATE ISSUED

15. DATE SPUDDED 2-26-82 16. DATE T.D. REACHED 5-18-82 17. DATE COMPL. (Ready to prod.) 7-15-82 18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 3389' GL 19. ELEV. CASINGHEAD --

20. TOTAL DEPTH, MD & TVD 11,500' 21. PLUG, BACK T.D., MD & TVD 11,424' 22. IF MULTIPLE COMPL., HOW MANY* Single 23. INTERVALS DRILLED BY 0'-11,500' 24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* Morrow 10,922'-11,376' Atoka 10,366'-10,599'

26. TYPE ELECTRIC AND OTHER LOGS RUN GR-CNL-FDC DLLW/RXO

27. WAS WELL CORED No

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

CASINO SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
10-3/4"	40.5#	1812'	14-3/4"	1600 sx - circ	
7-5/8"	26.4#	8684'	9 1/2"	1500 sx -TSTOC 4760'	
5"	15#	11,500'	6 1/2"	415 sx - circ	

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)
5"	8237'	11,500'	415	

30. TUBING RECORD

SIZE	DEPTH SET (MD)	PACKER SET (MD)
2-3/8"	10,319'	10,319'

31. PERFORATION RECORD (Interval, size and number)

10,922-24', 11,010-12', 11,060-62', 11,080-82', 11,170-72', 11,194-96w/(5) JHPF (plugged) 11,372-76'w/(7) JHPF; 10,596-600w/(10) JHPF 10,521-23', 10,503-05'w/(5) JHPF; 10,423-35', 10,386-88'w/(5) JHPF; 10,366-70'w/(10) JHPF

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
10,922'-11,376'	10,500 gals 10%, (42) RCNB's
10,366'-10,600'	11,200 gals 15%, (30) RCNB's

33.* PRODUCTION

DATE FIRST PRODUCTION 7-15-82 PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Flowing WELL STATUS (Producing or shut-in) Shut In

DATE OF TEST 7-23-82 HOURS TESTED 4 CHOKE SIZE -- PROD'N. FOR TEST PERIOD -- OIL—BBL. 0 GAS—MCF. 118 WATER—BBL. 0 GAS-OIL RATIO 0

FLOW. TUBING PRESS. 1165# CASING PRESSURE 0# CALCULATED 24-HOUR RATE -- OIL—BBL. 0 GAS—MCF. 713

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

Waiting on Connection

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

R. D. Pate

TITLE

Area Engineer

DATE

8-3-82

*(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 33.

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				38. GEOLOGIC MARKERS	
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH
Wolfcamp	9157	9257	IHP 5677, FHP 5630, IFP 237-205, ISIP 5282, FFP 284-221, FSIP 5235, est 380 MCF/D	Barnett	11,418
Strawn	9956	9978	IHP 6182, FHP 6182, IFP 911-911, ISIP 5116, FFP 934-957, FSIP 5204, Rec 280' drlg flu	Morrow Clastic Morrow Lime Atoka	10,910 10,677 10,072
Morrow	11,100	11,226	IHP 7002, FHP 7002, IFP 1047-1135, ISIP 3421, FFP 1115-1183, FSIP 3421, rec 2200' WB, 186' DF, sampler 975psi, 4.88 cu ft gas, '950ct mud	Strawn Penn Top Wolfcamp Bonespring Delaware	9,784 9,590 8,240 5,100 1,495