

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

Form approved.
Budget Bureau No. 42-R355.5.NEW OIL CONS. COM. 310N
DRAWER DD
Artesia, NM 88210

WELL COMPLETION OR RECOMPLETION REPORT AND LOG*

1a. TYPE OF WELL: OIL WELL ☐ GAS WELL ☒ DRY ☐ Other ☐		5. LEASE DESIGNATION AND SERIAL NO. LC-065347	
b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESRV. ☐ Other ☐		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
2. NAME OF OPERATOR Pennzoil Company		7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR P. O. Drawer 1828 - Midland, Tx-79702 - 1828		8. FARM OR LEASE NAME Eddy - 21 - Federal Com.	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 1650' FNL & 1650' FWL of Sec. 21, T24S, R26E At top prod. interval reported below At total depth 1650' FNL & 1650' FWL		9. WELL NO. 1	
11. SEC., T., R., M. OR BLOCK AND SURVEY OR AREA Sec. 21, T24S, R26E		12. COUNTY OR PARISH Eddy	
13. STATE NM		14. PERMIT NO. OIL & GAS 5-19-82	
15. DATE SPUDDED 6-28-82		16. DATE T.D. REACHED 8-9-82	
17. DATE COMPLETION (If applicable) 8-26-82		18. ELEVATIONS (DF, RKB, RT, GB, ETC.)* ROSWELL, NEW MEXICO 3373.4' GR	
19. ELEV. CASINGHEAD		20. TOTAL DEPTH, MD & TVD 11,503	
21. PLUG, BACK T.D., MD & TVD 11,429		22. IF MULTIPLE COMPL., HOW MANY*	
23. INTERVALS DRILLED BY ROTARY TOOLS 0-11,503		24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 11,048 - 11,409 Morrow	
25. WAS DIRECTIONAL SURVEY MADE No		26. TYPE ELECTRIC AND OTHER LOGS RUN Dual Laterolog, CNL-FDC-GR, Repeat Formation Tester	
27. WAS WELL CORED No		28. CASING RECORD (Report all strings set in well)	
29. LINER RECORD		30. TUBING RECORD	
31. PERFORATION RECORD (Interval, size and number) 11,048-51-53-54-95-96-99-11,100-02-03-04-05-06-07-26-27-28-29-91-92-93-94-96-97-11,208-09-10-11-29-30-31-32-11,404-05-07-08-09. Total of 37 holes, .25" dia.		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC. DEPTH INTERVAL (MD) 11,048-11,409 AMOUNT AND KIND OF MATERIAL USED 7500 gal 7 1/2% HCL w/N ₂	
33. PRODUCTION DATE FIRST PRODUCTION 8-26-82 PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) flowing DATE OF TEST 8-28-82 HOURS TESTED 24 CHOKE SIZE 1/4" IN PROD'N. FOR TEST PERIOD 0 BBL OIL—BBL 0 GAS—MCF 750 WATER—BBL 0 GAS-OIL RATIO FLOW. TUBING PRESS. 470 CASING PRESSURE packer CALCULATED 24-HOUR RATE 0 BBL OIL—BBL 0 GAS—MCF 750 WATER—BBL OIL GRAVITY API (CORR.)		34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Vented - waiting on pipeline connection	
35. LIST OF ATTACHMENTS Logs, deviation survey, 4-pt test (C-122) BHP data		36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records. SIGNED Jess Dullnig TITLE Operations Engr. DATE OCT 1 1982	

*(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			38. GEOLOGIC MARKERS			
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH	TRUE VERT. DEPTH
Anhydrite	0	1,610	Anhydrite			
Lamar	1,610	1,753	Limestone			
Delaware	1,753	2,710	Sand & shale			
Cherry Canyon	2,710	5,212	Sand & shale			
Bone Spring	5,212	8,330	Limestone & shale			
Wolfcamp	8,330	10,095	Limestone & shale			
Strawn	10,095	10,255	Limestone & shale			
Atoka	10,255	10,833	Limestone, sandstone, shale			
Morrow	10,833	11,495	Limestone, sandstone, shale			
Mississippian	11,495		Shale			
(Chester)						