

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE

(See other In-
structions on
reverse side)Form approved.
Budget Bureau No. 42-R355.5.

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 Hanson Oil Corporation						MAR 13 1975	
3. ADDRESS OF OPERATOR P.O. Box 1515 Roswell, New Mexico 88201						O. C. C. ARTESIA, OFFICE	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface SW ¹ / ₄ NE ¹ / ₄ , Sec. 27, T-26-S, R-29-E At top prod. interval reported below 1980' FEL & 1980' FNL At total depth							
14. PERMIT NO.				DATE ISSUED			
15. DATE SPUDDED 11-30-73				16. DATE T.D. REACHED 7-18-74		17. DATE COMPL. (Ready to prod.) 11-15-74	
18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 2876 G.L.				19. ELEV. CASINGHEAD 2878			
20. TOTAL DEPTH, MD & TVD 2982		21. PLUG, BACK T.D., MD & TVD 2982		22. IF MULTIPLE COMPL., HOW MANY* None		23. INTERVALS DRILLED BY 1345-2982	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* Delaware 2904-2916 & 2950-2974						25. WAS DIRECTIONAL SURVEY MADE yes	
26. TYPE ELECTRIC AND OTHER LOGS RUN BHC Acoustilog, Laterlog & Micro Laterlog						27. WAS WELL CORED yes	
28. CASING RECORD (Report all strings set in well)							
CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD		AMOUNT PULLED	
20"	91#	350	24"	700 sx. Cl.C (circ.)		none	
8 5/8"	32#	901	11"	none		901	
5 1/2"	15.5	2982	7 7/8"	126 sx. Cl. C		none	
29. LINER RECORD				30. TUBING RECORD			
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					2 3/8	2940'	2940'
31. PERFORATION RECORD (Interval, size and number)				32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
2906'-14' 2 shots per ft.				DEPTH INTERVAL (MD)			
2946'-52' 2 shots per ft.				AMOUNT AND KIND OF MATERIAL USED			
				2906'-14' 20,000# 10/20 sand			
				2946'-52' 10,000# 10/20 sand			
				gelled H2O as carrying agent.			
33.*							
DATE FIRST PRODUCTION 12-15-74		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) flow				WELL STATUS (Producing or shut-in) Producing	
DATE OF TEST 12-15-74	HOURS TESTED 24	CHOKE SIZE 3/4"	PROD'N. FOR TEST PERIOD →	OIL—BBL. 4	GAS—MCF. nil	WATER—BBL. 120	GAS-OIL RATIO nil
FLOW. TUBING PRESS. 30	CASING PRESSURE nil	CALCULATED 24-HOUR RATE →	OIL—BBL. 4	GAS—MCF. nil	WATER—BBL. 120	OIL GRAVITY-API (CORR.) 38.3	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) none						TEST WITNESSED BY R.H. Long	
35. LIST OF ATTACHMENTS BHC Acoustilog, Laterlog & Micro Laterlog							
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records							
SIGNED Raymond		TITLE Vice President - Prod.				DATE 3-10-75	

*(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
Surface	0	130	Caliche & Sand	Rustler	310	310
Triassic	130	310	Red Salt & Shale	Top of Salt	2150	
Permian Rustler	310	845	Anhydrite	Base of Salt	2674	
Salt	845	1075	Salt, Anhydrite & shale	Deleware Lime	2864	
Band of Anhy.	1075	2150	Anhydrite	Deleware Sand	2895	
Salt	2150	2674	Salt & Anhydrite			
Castele	2674	2864	Anhydrite			
Deleware Lime	2864	2895	Black Shaley Limestone			
Deleware Sand	2895	2991	Sand & Shale			