

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other in-
structions on
reverse side)Form approved.
Budget Bureau No. 42-R-1000

WELL COMPLETION OR RECOMPLETION REPORT AND LOG*

1. TYPE OF WELL: OIL WELL ☐ GAS WELL ☐ DRY ☒ Other **RECEIVED**2. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DEEP. RESERV. ☐ Other **RECEIVED**3. NAME OF OPERATOR
American Quasar Petroleum Co.4. ADDRESS OF OPERATOR
606 Vaughn Bldg., Midland, Texas 79701

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

At surface 660' FSL & 1980' FEL, Sec. 1

At top prod. interval reported below

At total depth

14. PERMIT NO.

DATE ISSUED

12. COUNTY OR
PARISH
Eddy13. STATE
New Mexico15. DATE SPUDDED
11-29-7316. DATE T.D. REACHED
1-23-7417. DATE COMPL. (Ready to prod.)
-18. ELEVATIONS (DT, DRB, ET, GR, ETC.)*
3463 GR19. ELEV. CASINGHEAD
3463'20. TOTAL DEPTH, MD & TVD
11,850'21. PLUG, PACK T.D., MD & TVD
Plugged22. IF MULTIPLE COMPL.,
HOW MANY?
N/A23. INTERVALS
DRILLED BY
-->24. ROTARY TOOLS
0-1185025. CABLE TOOLS
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26. PRODUCING INTERVAL(S), OF THIS COMPLETION--TOP, BOTTOM, NAME (MD AND TVD)*

None

27. WAS PRODUCTION
SURVEY MADE
No

28. TYPE ELECTRIC AND OTHER LOGS RUN

BH Sonic, Neutron, Density & Dual Laterolog

29. WAS WELL CURED
No

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

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
20"	93#	30'	30"	Ready Mix	0
13 3/8"		338'	17 1/2"	350 sk. - Circ.	0
9 5/8"	40#	1650'	12 1/4"	750 sk. - Circ.	0
7 5/8"	29.7-33.7#	8600'	8 1/2"	300 sk.	5020

31. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
None							

32. PERFORATION RECORD (Interval, size and number)

None

33. ACID, SPOT, FRACTURE, CEMENT SQUEEZE, ETC.

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
None	

34. PRODUCTION

DATE FIRST PRODUCTION
None

PRODUCTION METHOD (Flowing, gas lift, pumping--size and type of pump)

WELL STATUS (Producing or shut-in)

DATE OF TEST	HOURS TESTED	CHOKED SIZE	PROD'N. FOR TEST PERIOD	OIL--BBL.	GAS--MCF.	WATER--BBL.	GAS-OIL RATIO
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FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL--BBL.	GAS--MCF.	WATER--BBL.	OIL GRAVITY-API (COOL)	
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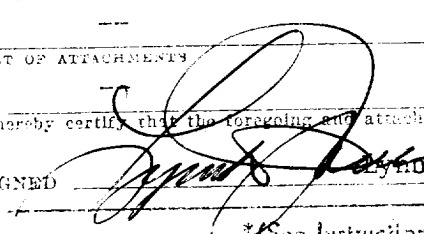
35. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)

MAR 20 1974

TEST WITNESSED BY

36. LIST OF ATTACHMENTS

37. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records

SIGNED  D. Jones TITLE Production Superintendent DATE 3-19-74

*(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 of 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, tribal, 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 21, 22, and 23 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 (wellbore, geologists, sample and core analysis, all types electric logs), 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 23.

Item 1: 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 2: 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.

Item 3: Indicate whether the well is completed for separate production from more than one interval zone (multiple completion), so state in Item 22, and in Item 23 show the producing interval, or intervals, top(s), bottom(s) and zone(s) (if any) for only the interval reported in Item 23. 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: "Stacks 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 23 above.)

37. SUMMARY OF POROUS ZONES:				38. GEOLOGIC MARKERS	
SHOW ALL IMPORTANT ZONES OF POROSITY AND CEMENTS THEREOF; CORED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING LOGS, INTERVAL TESTS, CUSHION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES					
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	TOP
Delaware	3316	3580	DST 3310-3610' - 15 min. IF fair blow, 45 min. ISI 1 hr. FF weak blow 3310' in 1 min., 2-hr. FSI - Rec. 240' mud, IHP 1445, IFF 67, ISIP 161, FFP 134, FSIP, 242 FFP 1445.	Delaware	2,457
Atoka Lime	10,665	10,840	DST 10,695-840' - 15 min. IF fair blow, 30 min. ISI, 2 1/2 hr. FF, fair to weak blow 5 hr. FSI Rec. 533' mud, 1 HP 5122, IFF 115, ISIP 1227, FFP 296, FSIP 2020, FHP 5114.	Bone Springs	5,400
Upper Morrow	11,225	11,290	DST 11,225-290' - 16 min. IF fair blow 92" ISI, 2 hrs. FF-fair blow, GTS 18min. TSTM 6 hr. FSI. Rec. 210' mud. IHP 5569, IFF 103, ISIP 2590, FFP 159, FSIP 4321, FHP 5485	Wolfcamp	8,273
Lower Morrow	11,604	11,669	DST 11,404-649' - 15 min. IF strong blow, 90 min. ISI, 2 hrs. FF GTS 21 min. TSTM 4 hr. FSI. Rec. 850' mud, IHP 5752, IFF 437, ISIP 459, FFP 437, FSIP 431, FHP 5752	Morrow	11,200