

UNITED STATES DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYForm 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. RESER. ☐	Other ☐
2. NAME OF OPERATOR Gulf Oil Corporation						14. PERMIT NO.	
3. ADDRESS OF OPERATOR P. O. Box 670, Hobbs, NM 88240						DATE ISSUED	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 1650' FSL & 1650' FWL At top prod. interval reported below At total depth						18. ELEVATIONS (DF, REB, RT, GR, ETC.)* 3297' GL	
15. DATE SPUDDED 12-23-82		16. DATE T.D. REACHED 2-27-83		17. DATE COMPL. (Ready to prod.) 3-17-83		19. ELEV. CASINGHEAD --	
20. TOTAL DEPTH, MD & TVD 11,700'		21. PLUG, BACK T.D., MD & TVD 11,659'		22. IF MULTIPLE COMPL., HOW MANY* Single		23. INTERVALS DRILLED BY ROTARY TOOLS CABLE TOOLS	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 11,253'-11,658'						25. WAS DIRECTIONAL SURVEY MADE Yes	
26. TYPE ELECTRIC AND OTHER LOGS RUN GR-FDC-CNL						27. WAS WELL CORED No	
28. CASING RECORD (Report all strings set in well)							
CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD		AMOUNT PULLED	
20"	94#	407'	26"	900 sx - circ			
10-3/4"	40.5#	1,799'	14-3/4"	1850 sx - circ			
7-5/8"	26.4#	8,764'	9 1/2"	650 sx - circ			
5"	15#	11,695'	6-3/4"	650 sx -			
29. LINER RECORD							
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)			
5"	8287'	11,695'	650				
30. TUBING RECORD							
SIZE	DEPTH SET (MD)	PACKER SET (MD)					
2-3/8"	11,182'	11,182'					
31. PERFORATION RECORD (Interval, size and number)							
11,253-57', 11,260-64', 11,314-30', 11,358-66', 11,572-80', 11,642-58'w/(2) 1/2" JH							
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.							
DEPTH INTERVAL (MD)				AMOUNT AND KIND OF MATERIAL USED			
11,638'-11,253'				7.7 bbls 10% acetic acid			
33.* PRODUCTION							
DATE FIRST PRODUCTION 3-17-83		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Flowing				WELL STATUS (Producing or shut-in) Shut In	
DATE OF TEST 3-21-83	HOURS TESTED 4	CHOKE SIZE --	PROD'N. FOR TEST PERIOD --	OIL—BBL. 0	GAS—MCF. 1296	WATER—BBL. 0	GAS-OIL RATIO 0
FLOW. TUBING PRESS. 2560#	CASING PRESSURE 0#	CALCULATED 24-HOUR RATE --	OIL—BBL. 0	GAS—MCF. 7775	WATER—BBL. 0	OIL GRAVITY-API (CORR.) 0	
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 <u>R. D. Pate</u>				TITLE <u>MINERALS MANAGEMENT SERVICE</u> <u>ROSWELL, NEW MEXICO</u>			
				DATE <u>3-25-83</u>			

* (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

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	GEOLOGIC MARKERS		
				NAME	MEAS. DEPTH	TRUE VERT. DEPTH
Morrow	11,253	11,257	2-21-83-DST attempted but unsuccessful	Bone Springs	5,654	(-2330)
	11,260	11,264	3-24-83-4 pt flow test:	Wolfcamp	8,573	(-5249)
	11,314	11,330	CITP 3500psi, 2766 MCFD @ 3360psi,	Penn Top (OCD)	10,106	(-6782)
	11,358	11,366	3653 MCFPD @ 3250psi, 5166 MCFPD @ 3080psi	Strawn (OCD)	10,307	(-6983)
	11,572	11,580	5166 MCFPD @ 3080psi, M775MCFPD @ 2560psi	Atoka (OCD)	10,475	(-7151)
	11,642	11,658	CAOF-15,893 MCFPD SI	Main Atoka Pay	10,796	(-7472)
				Morrow Lime (OCD)	11,070	(-7746)
				Morrow	11,244	(-7920)
				Morrow Clastics (OCD)	11,411	(-8087)
				Mid Morrow Shale	11,690	(-8366)