

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

RECEIVED BY

AUG 10 1984

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

ARTESIA, OFFICE

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 HNG OIL COMPANY						5. LEASE DESIGNATION AND SERIAL NO. NM 19423	
3. ADDRESS OF OPERATOR P. O. Box 2267, Midland, Texas 79702						6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 1650' FNL & 1650' FEL At top prod. interval reported below Same At total depth Same						7. UNIT AGREEMENT NAME	
14. PERMIT NO. -						DATE ISSUED 5-3-84	
15. DATE SPUDDED 5-21-84		16. DATE T.D. REACHED 7-1-84		17. DATE COMPL. (Ready to prod.) 7-9-84		18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 3296.6' GR	
19. ELEV. CASINGHEAD 3296.6'		20. TOTAL DEPTH, MD & TVD 11,875'		21. PLUG, BACK T.D., MD & TVD 11,825'		22. IF MULTIPLE COMPL., HOW MANY*	
23. INTERVALS DRILLED BY		ROTARY TOOLS X		CABLE TOOLS		24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 11,527' - 11,631' (Penn.)	
25. WAS DIRECTIONAL SURVEY MADE No		26. TYPE ELECTRIC AND OTHER LOGS RUN Comp. Density & Neutron, Dual Laterolog, BHC Sonic & Laserlog		27. WAS WELL CORED No		28. CASING RECORD (Report all strings set in well)	
Casing Size		Weight, lb./ft.		Depth Set (MD)		Hole Size	
13-3/8"		54.5#		400'		17-1/2"	
9-5/8"		40# & 36#		1859'		12-1/4"	
7"		26#		9250'		8-1/2"	
29. LINER RECORD		SIZE		TOP (MD)		BOTTOM (MD)	
4-1/2"		9007'		11872'		450 C1 H	
30. TUBING RECORD		SIZE		DEPTH SET (MD)		PACKER SET (MD)	
2-3/8"		9007'		PBR @ 9007'			
31. PERFORATION RECORD (Interval, size and number)		11,527' - 11,631' (.38", 13)		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.		DEPTH INTERVAL (MD)	
						11527-11631	
						AMOUNT AND KIND OF MATERIAL USED	
						3500 gals 7-1/2% Acid w/500 scf/bbl N2	
33.* PRODUCTION		DATE FIRST PRODUCTION 7-9-84		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Flowing		WELL STATUS (Producing or shut-in) Shut-in	
DATE OF TEST 7-18-84		HOURS TESTED 4		CHOKE SIZE 11/64"		PROD'N. FOR TEST PERIOD ACCEPTED FOR RECORD	
FLOW. TUBING PRESS. 1850#		CASING PRESSURE Sealed		CALCULATED 24-HOUR RATE 0		OIL—BBL. 1738	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Vented		GAS—MCF. 0		WATER—BBL. 0		OIL GRAVITY-API (CORR.) -	
35. LIST OF ATTACHMENTS Logs		36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records		SIGNED Betty Gildon		TITLE Regulatory Analyst	
						DATE 7/30/84	

* (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.	38. GEOLOGIC MARKERS	
				NAME	MEAS. DEPTH
Delaware	0	320	Surface rock and lime	Delaware	1900
Cherry Canyon Marker,	320	945	anhy & lime	Cherry Canyon Mkr	2892
Brushy Canyon & Bone	2160	2160	100% anhy	Brushy Canyon	3394
Spgs.	5550	5550	100% sand	Bone Springs	5462
one Springs	6122	6122	100% lime	Wolfcamp	8594
one Springs & Wolfcap.	6587	6587	100% shale	Strawn	10575
Wolfcamp & Strawn	9250	9250	Lime, Shale, Sand	Atoka	10797
Strawn & Atoka	10282	10282	100% shale	Morrow Lime	11186
Atoka & Morrow	11134	11134	lime, shale, sand	Morrow Clastics	11348
	11611	11611	lime, chert, shale, sand		
	11875	11875	lime, shale, sand		