

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE

(See other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R355.6.

CISF

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL: OIL WELL ☒ GAS WELL ☐ DRY ☐ Other ☐		5. LEASE DESIGNATION AND SERIAL NO. LE 065928 A	
b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other ☐		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
2. NAME OF OPERATOR Geo. H. Mitchell		7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR Box 963 Kermit, Texas 79745		8. FARM OR LEASE NAME Federal Littlefield B0 F	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements) At surface 400' FNL 2310' FET FNL At top prod. interval reported below At total depth		9. WELL NO. 4	
14. PERMIT NO.		10. FIELD AND POOL, OR WILDCAT Brushy Draw Delaware	
15. DATE SPUDDED 1-6-87		11. SEC., T., R., M., OR BLOCK AND SURVEY Sec 34, T26S, R29E	
16. DATE T.D. REACHED 1-17-87		12. COUNTY OR PARISH Eddy	
17. DATE COMPL. (Ready to prod.) 3-16-87		13. STATE N.M.	
18. ELEVATIONS (DF, RKB, RT, GR, ETC.) 2870.2' GR		19. ELEV. CASING HEAD	
20. TOTAL DEPTH, MD & TVD 5216'		21. PLUG BACK T.D., MD & TVD 5127'	
22. IF MULTIPLE COMPL., HOW MANY?		23. INTERVALS DRILLED BY ROTARY TOOLS ☒ CABLE TOOLS ☐	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 4861 - 4922 12 holes		25. WAS DIRECTIONAL SURVEY MADE Yes	
26. TYPE ELECTRIC AND OTHER LOGS RUN GRN/CCL		27. WAS WELL CORED No	
28. CASING RECORD (Report all strings set in well)			
CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE
9 5/8	36#	372'	12 1/4
4 1/2	10.50#	5216'	7 7/8
CEMENTING RECORD		AMOUNT PULLED	
Cement to surface			
650 sx Poz mix A			
29. LINER RECORD			
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*
N/A			
30. TUBING RECORD		PACKER SET (MD)	
SIZE	DEPTH SET (MD)		
2 3/8	4866'	N/A	
31. PERFORATION RECORD (Interval, size and number)			
4861 - 4922 12 holes			
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED	
4861-4922		1500 gal 15% NEEF	
		70,000 gal 40# gel	
		36,000 lbs 20/40 sand	
		112,000 lbs 12/20 sand	
33. PRODUCTION			
DATE FIRST PRODUCTION 3-17-87		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Pumping 2x1 1/2 x 16"	
DATE OF TEST 3-21-87		WELL STATUS (Producing or shut-in) Prod	
HOURS TESTED 24	CHOKE SIZE None	PROD'N. FOR TEST PERIOD OIL—BBL 120 GAS—MCF 65	WATER—BBL 70 OIL GRAVITY—API (CORR.) 54.1
FLOW. TUBING PRESS. N/A	CASING PRESSURE 280	CALCULATED 24-HOUR RATE OIL—BBL 120 GAS—MCF 65	WATER—BBL 70 OIL GRAVITY—API (CORR.) 37.5
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Sold to Conoco			
35. LIST OF ATTACHMENTS Inclination report Form C-104			
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records			
SIGNED <i>Geo. P. Mitchell II</i>		TITLE Agent	
DATE 3-24-87		DATE 3-24-87	

* (See Instructions and Spaces for Additional Data on Reverse Side)

CARLSBAD, NEW MEXICO

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. All types electric, etc.), formations 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: "Rocks 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.)

LOG *

37. SUMMARY OF POROUS ZONES:		38. GEOLOGIC MARKERS		39. WELL COMPLETION OR RECOMPLETION REPORT	
FORMATION	TOP	MEAS. DEPTH	TRUE VERT. DEPTH	NAME	TYPE OF COMPLETION
Anhydrite	0	2860'	2860'	Lamar	
Salt & Anhy	2200	2910'	2910'	Delaware Sand	
Sand & Lime	2860	3820'	3820'	Bell Canyon	
		4810'	4810'	Cherry Canyon	
		5180'	5180'	Brushy Draw	