

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE

(See other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R355.5.

3. LEASE DESIGNATION AND SERIAL NO.

114056676

4. FEDERAL INDIAN AGENCIES OR TRIBE NAME

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Mescalero Ridge Unit MA

9. WELL NO.

31

10. FIELD AND POOL, OR WILDCAT

Wildcat

11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA

21-T19S-R34E

12. COUNTY OR PARISH

Lea

13. STATE

New Mexico

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
SINCLAIR OIL & GAS COMPANY

3. ADDRESS OF OPERATOR
P. O. BOX 1920, Hobbs, New Mexico 88240

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*
At surface 1920' fr South line and 660' fr West line

At top prod. interval reported below

as above

At total depth

as above

14. PERMIT NO. DATE ISSUED

15. DATE SPUNDED 6-2-68 16. DATE T.D. REACHED 6-20-68 17. DATE COMPL. (Ready to prod.) 6-22-68

18. ELEVATIONS (DF, REB, RT, GR, ETC.)* 3722' GR 19. ELEV. CASINGHEAD

20. TOTAL DEPTH, MD & TVD 5000' 21. PLUG, BACK T.D., MD & TVD 3996' 22. IF MULTIPLE COMPL. HOW MANY* 23. INTERVALS DRILLED BY 24. ROTARY TOOLS 25. CABLE TOOLS

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*
3952-3958' Yates

25. WAS DIRECTIONAL SURVEY MADE
No

26. TYPE ELECTRIC AND OTHER LOGS RUN
Laterolog and Correlation log.

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
8-5/8" CD	20#	325'	12-1/4"	300	None
4-1/2" CD	10.5#	4064'	7-7/8"	325	None

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	30. TUBING RECORD
					SIZE DEPTH SET (MD) PACKER SET (MD)
					2-3/8" CD 3958' S.N. 3958'

31. PERFORATION RECORD (Interval, size and number)

3952-53-54-55-56-57-58' w/12 - 3/8" holes.
2 holes per. ft.

32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
3952-3958'	500 gals. Mud Acid

33. PRODUCTION

DATE FIRST PRODUCTION	PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)	WELL STATUS (Producing or shut-in)					
6-24-68	Flowing	Shut-in					
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL. TSTM	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
6-28-68	1	21/64"	→	TSTM	2126	0	
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL. TSTM	GAS—MCF. CACF	WATER—BBL.	OIL GRAVITY-API (CORR.)	
34.7#	926#	→	TSTM	CACF 3939	0	27	

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)
Sold

TEST WITNESSED BY
Mr. J. J. Ballard

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 Sub B TITLE Superintendent DATE 7-1-68

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

INDEX TO FORM 37

General instructions for submitting a complete report and log on all types of wells are given on either a Form 37 or both, depending on applicable Federal and/or State law and regulations. A complete set of special instructions concerning the use of this form and the information to be submitted, particularly with regard to local, area, or regional procedures and practices, is shown below or will be furnished by, or may be obtained from, the State or Federal office. See instructions on items 22 and 24, and 33, below regarding separate completions. If not filed prior to the time this summary record is submitted, copies of all currently available well logs, including all pertinent well completion information, pressure tests, and directional surveys, as well as all attached hereto, to the State and/or Federal and/or State laws and regulations. All other information on this form, see item 33.

If applicable, there are no applicable State or Federal laws, regulations, or Federal land should be detailed in accordance with Federal requirements. Complete Form 37 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 each interval reported in item 33. Submit a separate report (page) on this form, adequately identifying 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.)

FORMATION	TOP	BOTTOM	DESCRIPTIONS, CONTENTS, ETC.	38. GEOLOGIC MARKERS	TOP	MEAS. DEPTH	FEET CORRECTED
				Rustler		1728'	1728'
				Tansill		3207'	3207'
				Yates		3513'	3513'
				Queen		4496'	4496'