

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.

5. LEASE DESIGNATION AND SERIAL NO.

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Bowden Federal

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Undesignated

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

Sec. 4 T-23-S, R-38-E

12. COUNTY OR PARISH

Lea

New Mexico

13. STATE

15. DATE SPUDDED

2-24-69

16. DATE T.D. REACHED

3-15-69

17. DATE COMPL. (Ready to prod.)

5-12-69

18. ELEVATIONS (DF, RKB, RT, GR, ETC.)*

3362.5 Gr

19. ELEV. CASINGHEAD

3362.5

20. TOTAL DEPTH, MD & TVD

7310'

21. PLUG, BACK T.D., MD & TVD

72'

22. IF MULTIPLE COMPL., HOW MANY*

one

23. INTERVALS DRILLED BY

→

ROTARY TOOLS

0-TD

CABLE TOOLS

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*

6805'-6426' Drinkard

25. WAS DIRECTIONAL SURVEY MADE

No

26. TYPE ELECTRIC AND OTHER LOGS RUN

BHC Acoustilog; L/L Cal.

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
9-5/8"	36#	830'	12-1/4"	475 sx	
7"	26#	7203'	8-3/4"	900 sx	

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"	6590'	

31. PERFORATION RECORD (Interval, size and number)

6805'-6775'	5 holes	1/2"
6706'-6601'	18 holes	1/2"
6557'-6426'	11 holes	1/2"

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
6805'-6775'	A/2050 gals 15% NEFE acid
6706'-6601'	F/20,000 gals brine & 17,800# sd.
6557'-6426'	A/1000 gals 15% NEFE; F/20,000 gals brine & 15,700# sd.

33.* PRODUCTION

DATE FIRST PRODUCTION	PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)	WELL STATUS (Producing or shut-in)					
March 30, 1969	Pumping 2" X 1-1/2" X 16' insert pump	Prod.					
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
6-5-69	24 hours	---	→	21	26	8	1232
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)	
---	---	→	21	26	8	38.8	

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

Vented

TEST WITNESSED BY

R. Yancey

35. LIST OF ATTACHMENTS

Log and Deviation Survey

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

SIGNED

MJ Smith

TITLE

Production Clerk

DATE

June 6, 1969

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.), formations 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.)

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH	TOP	TRCE VEHT. DEPTH
			No Cores or DST's taken	T/Anhy	1362		
				T/Salt	1447		
				B/Salt	2595		
				T/Yates	2754		
				T/7 Rivers	3010		
				T/Queen	3570		
				T/Grayburg	3730		
				T/San Andres	4153		
				T/Glorieta	5370		
				T/Blinebry	5795		
				T/Tubb	6210		
				T/Drinkard	6392		
				T/Abo	6860		

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

38. GEOLOGIC MARKERS