

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.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL:		OIL WELL ☐	GAS WELL ☒	DRY ☐	Other ☒ <u>RE-ENTERED</u>		
b. TYPE OF COMPLETION:		NEW WELL ☐	WORK OVER ☒	DEEP-EN ☐	PLUG BACK ☐	DIFF. RESVR. ☐	Other ☐ <u>APR - 1974</u>
2. NAME OF OPERATOR Black River Corporation						7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR 620 Commercial Bank Tower Midland, Texas						8. FARM OR LEASE NAME BR 4 Federal	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 1986' FNL 330' FEL Section 4 At top prod. interval reported below At total depth						9. WELL NO. 3	
14. PERMIT NO. Approved						DATE ISSUED 2-22-73	
15. DATE SPUDDED 2-28-73		16. DATE T.D. REACHED 3-14-73		17. DATE COMPL. (Ready to prod.) 3-21-74		18. ELEVATIONS (DF, RKB, RT, GR, ETC.) * 3773.5 RKB	
19. ELEV. CASINGHEAD 3768 GR		20. TOTAL DEPTH, MD & TVD 1414		21. PLUG, BACK T.D., MD & TVD 1378 MD		22. IF MULTIPLE COMPL., HOW MANY*	
23. INTERVALS DRILLED BY →		24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* Delaware 1331 to 1335		25. WAS DIRECTIONAL SURVEY MADE Yes		26. TYPE ELECTRIC AND OTHER LOGS RUN BHC GR Sonic	
27. WAS WELL CORED Yes		28. CASING RECORD (Report all strings set in well)					
CASING SIZE		WEIGHT, LB./FT.		DEPTH SET (MD)		HOLE SIZE	
8-5/8		32		1275		11"	
5-1/2		14		1414		6-1/2"	
CEMENTING RECORD		AMOUNT PULLED					
340 Sx							
50 Sx							
29. LINER RECORD		30. TUBING RECORD					
SIZE		TOP (MD)		BOTTOM (MD)		SACKS CEMENT*	
31. PERFORATION RECORD (Interval, size and number)		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.					
1331 - 35 - 8 holes		DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED			
				500 gallons Dowell BDA			
				10,000 gallons Lease Oil			
				3,000 # sand			
33. PRODUCTION		DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)		WELL STATUS (Producing or shut-in)	
				Flowing		Shut-in	
DATE OF TEST		HOURS TESTED		CHOKE SIZE		PROD'N. FOR TEST PERIOD	
3-21-74		76 hours		1/4"		→	
FLOW. TUBING PRESS.		CASING PRESSURE		CALCULATED 24-HOUR RATE		OIL—BBL. GAS—MCF. WATER—BBL. OIL GRAVITY-API (CORR.)	
373		377		→		-- 569 -- --	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)		35. LIST OF ATTACHMENTS		TEST WITNESSED BY R. Reston			
Vented & Flared During Test							
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records		SIGNED <u>Ronnie Sawchuk</u>		TITLE <u>Treasurer</u>		DATE <u>3-25-74</u>	

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

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.

tion 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 cell is used as reference (where not otherwise shown) for depth measurements given in other spaces on this form and in any attachments.

For each additional interval to be separately produced, showing the additional data pertinent to such interval.

Item 29: "Seeks 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.)

SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF; COED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CUSHION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES

U.S. GOVERNMENT PRINTING OFFICE: 1963-O-683636

NEW MEXICO OIL CONSERVATION COMMISSION
WELL LOCATION AND ACREAGE DEDICATION PLAT

Form O-102
Superseded 6-128
Effective 1-1-75

All distances must be from the outer boundaries of the section.

Operator BLACK RIVER CORPORATION		Lease BR 4 FEDERAL		Well No. 3
Grid Letter H	Section 4	Township 26 SOUTH	Range 24 EAST	County EDDY
Artificial Well Location (Feet)				
330		EAST		1986 NORTH
Ground Type Elev. H	Producing Formation DELAWARE	Foot 201.34	Estimated Acreage 160	

- Outline the acreage dedicated to the subject well by colored pencil or hatchure marks on the plat below.
- If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).
- If more than one lease of different ownership is dedicated to the well, have the interests of all owners been consolidated by communitization, unitization, forced-pooling, etc?

☐ Yes ☐ No If answer is "yes," type of consolidation _____

If answer is "no," list the owners and tract descriptions which have actually been consolidated. Use reverse side of this form if necessary.

No allowable will be assigned to the well until all interests have been consolidated (by communitization, unitization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interests, has been approved by the Commission.

LOCATION IS 0.4' HIGHER THAN
BLACK RIVER CORP. BR 4 No. 1
LOCATED IN SECTION 4.

CERTIFICATION
RECEIVED

I hereby certify that the information contained hereon is true and complete to the best of my knowledge and belief.

U. S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO

Name
Ronnie Saunders
Position
TREASURER
Company
BLACK RIVER CORPORATION
Date
3-26-74

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my knowledge and belief.

Date Surveyed
FEBRUARY 14, 1973
Registered Professional Engineer
and State Surveyor
John W. White