

DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

WELL COMPLETION OR RECOMPLETION REPORT AND LOG*

1. TYPE OF WELL: OIL WELL ☒ GAS WELL ☐ DRY ☐ Other ☐

2. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. REVR. ☐ Other ☐

3. NAME OF OPERATOR
Jack Plemons /

4. ADDRESS OF OPERATOR
Box 385, Artesia, New Mexico 88210

5. LOCATION OF WELL (Report location clearly and in accordance with any State requirements):
At surface 330' North, 1411' West 30-17S-31E
At top prod. interval reported below
At total depth

14. PERMIT NO. DATE ISSUED

16. DATE SPUNDED 9-26-81 18. DATE T.D. REACHED 2-11-82 17. DATE COMPL. (Ready to prod.) 2-23-82 19. ELEVATIONS (DP, SURF, ET, etc.) 3520 GR

20. TOTAL DEPTH, MD & TVD 2570 21. PLUG BACK T.D., MD & TVD 2209 22. IF MULTIPLE COMPL., HOW MANY? 23. INTERVALS DRILLED BY

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*
1965-1967, 1969-1976, 1978-1980, 1994-1996, 1998-2000, 2007-2009, 2012-2016
2076-2078, 2085-2087

25. TYPE ELECTRIC AND OTHER LOGS RUN
Neutron Log

26. CASING RECORD (Report all strings set in well)

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT OF CEMENT
8 5/8"	20 lb.	437'	10"	405 sacks circulated	
5 1/2"	14 lb.	2209	8"	500 sacks circulated to surface	

27. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	CEMENT	DEPTH (MD)	SIZE	DEPTH (MD)	CEMENT

28. PREPARATION RECORD (Interval, size and number)

INTERVAL	SIZE	NUMBER
1965-1967, 2012-2016	OH & GAS	
1969-1976, 2076-2078	U.S. GEOLOGICAL SURVEY	
1978-1980, 2085-2087	ROSWELL NEW MEXICO	
1994-1996	one shot per foot	
2007-2009		

29. ACID, SHOT, FRACTURE, CURRENT BOTTOMHOLE INFO

DEPTH INTERVAL (MD)	AMOUNT AND TYPE OF MATERIAL
Where perforated	6000 lbs. acid
	2500 lbs. cement
	200 lbs. water

30. PRODUCTION

DATE FIRST PRODUCTION 2-23-82

PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Swabbing

DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. POR. TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.
2-23-82	12 hrs.	2"		10	TSYM	

31. FLOW, TUBING PRESS., Casing Pressure, CALCULATED FLOW RATE, etc.

FLOW, TUBING PRESS.	CASING PRESSURE	CALCULATED FLOW RATE	OTHER DATA
0	0		

32. DISPOSITION OF GAS (Hold, used for fuel, vented, etc.)

33. LIST OF ATTACHMENTS

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

SIGNED *[Signature]* DATE MAR 14 1982

(See Instructions and Space for Additional Data on Reverse Side)

INSTRUCTIONS

Comments: This form is to be filled out by a business or individual who has information to report and has an obligation to report on all types of reports and returns 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, as well as with regard to local, area, or regional procedures and practices, either are shown below or will be known by, or may be obtained from, the local Federal and/or State office. See Instructions on Forms 23 and 24, and 25, below regarding separate reports for separate companies.

If not filed prior to the time this summary report is submitted, copies of all currently available logs (drill logs, geologic logs, sample and core analysis, all types electric, etc.), formation and pressure logs, and directional surveys, should be attached hereto, to the extent required by applicable Federal and/or State laws and regulations. All attachments should be filed on this form, as item 25.

Form 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 officials for assistance.

Notes: 18. Indicate which direction is used as reference (where not otherwise shown) for depth measurements given in other spaces on this form and in any attachments.
 19. 20. 21. 22. 23. If this well is completed for separate production from more than one interval zone (multiple completion), so state in item 22 and in item 23.

Interval, or intervals, top(s), bottom(s) and name(s) (if any) for only the interval reported in item 23. Submit a separate report (page) on this form, adequately identified, for each additional interval to be separately produced, showing the additional data pertinent to each interval.

Item 33: Submit a separate cementation report on this form for each interval to be separately produced. (See instruction for items 22 and 24 above.)

37. SUMMARY OF FOREOBS 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.
Red bed	0	400	
Salt	400	1300	
Anhy	1300	1965	
Salt & Red bed	1965	2087	
Anhy.	2087	2570	

38.

GEOLOGIC MARKERS

[illegible]