

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other instructions on reverse side)

Form approved
Budget Bureau No. 40-1955-6

5. LEASE DESIGNATION AND SERIAL NO.
NM 28297

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Everette 00 Federal

9. WELL NO.

6

10. FIELD AND POOL, OR WILDCAT

Und. Abo *Acosillo*

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

Unit H, Sec. 25-T5S-R24E

12. COUNTY OR PARISH
Chaves

13. STATE
NM

WELL COMPLETION OR RECOMPLETION REPORT AND LOG*

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

2. TYPE OF COMPLETION: NEW WELL ☐ WORK OVER ☐ REFIN ☐ PLUG BACK ☐ DIFF. RESER. ☐ Other ☐

3. NAME OF OPERATOR
Yates Petroleum Corporation /

JAN 26 1982

4. ADDRESS OF OPERATOR
207 South 4th St., Artesia, NM 88210

O. C. D.

5. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)
At surface 1980 FNL & 660 FEL, Sec. 25-5S-24E

ARTESIA OFFICE

At top prod. interval reported below

At total depth

14. PERMIT NO. DATE ISSUED

15. DATE STARTED 12-21-81 16. DATE T.D. REACHED 1-1-82 17. DATE COMPL. (Ready to prod.) 1-25-82 18. EVALUATIONS (IF, EBB, ET, GR, ETC.)* 3872' DE 19. ELEV. CASINGHEAD

20. TOTAL DEPTH, MD & TVD 4160' 21. PLUG BACK T.D., MD & TVD 4101' 22. IF MULTIPLE COMPL., HOW MANY* 23. INTERVALS PRODIED BY 0-4160' 24. ROTARY TOOLS CABLE TOOLS

24. PRODUCING INTERVAL(S) OF THIS COMPLETION TOB. BOTTOM, NAME (MD AND TVD)* 3795-3805' Abo 25. WAS DIRECTIONAL SURVEY MADE No

26. TYPE ELECTRIC AND OTHER LOGS RUN CNL/FDC; DLL 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
*13-3/8"	72#	168'		150 sx Circ	
*8-5/8"	24#	1060'		500 sx	
4-1/2"	9.5#	4160'	6-1/4"	600 sx	
*IN PLACE					

29. LINER RECORD					30. TURING RECORD		
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					2-3/8"	3771'	

31. PERFORATION RECORD (Interval, size and number)		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
INTERVAL (MD)	HOLES	DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
3795-3805'	w/12 .50" holes	3795-3805'	w/1000 g. acid, ball sealers. Frac'd w/40000 g. gel KCL wir., 37 tons CO2, 80000# 20/40 sd.

33. PRODUCTION							
DATE FIRST PRODUCTION	PRODUCTION METHOD (Flowing, gas lift, pumping--size and type of pump)	WELL STATUS (Producing or shut-in)					
1-25-82	Flowing	SIWOPLC					
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL--BBL.	GAS--MCF.	WATER--BBL.	GAS-OIL RATIO
1-25-82	12	1/2"		-	229	-	-
FLOW TURING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL--BBL.	GAS--MCF.	WATER--BBL.	OIL GRAVITY-API (CCER.)	
60	-		-	457	-		

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)
Vented - Will be sold.

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 *Bill Hansen* TITLE Engineering Secretary DATE 1-26-82

*(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.

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.), formation 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 22.

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 pro-

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

Item 29: “*Stocks (cont’d)*”: 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; CORRECTION INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL, TESTED, TIME TOOL OPEN, PLOWING AND SHUT-IN PRESSURE, AND RECOVERY

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