

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 ☐		5. LEASE DESIGNATION AND SERIAL NO. N.M. 024759-A	
b. TYPE OF COMPLETION: NEW WELL ☐ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other ☐ Re-Drill Old Hole		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
2. NAME OF OPERATOR Ernest A. Hanson		7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR P. O. Box 1515, Roswell, N.M.		8. FARM OR LEASE NAME Honolulu Federal	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements) At surface At top prod. interval reported below At total depth		9. FIELD AND POOL, OR WILDCAT Wildcat	
10. PERMIT NO. 660 FNL & 1980 FNL		11. SEC. T., R., M. OR BLOCK AND SURVEY OR AREA Sec. 15 - 14S - 28E	
12. COUNTY OR PARISH Chaves		13. STATE N. Mex.	
14. DATE STUDDED 6-21-67		15. DATE T.D. REACHED 9-7-67	
16. DATE COMPL. (Ready to prod.) 12-12-67		17. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 3571' GL	
18. TOTAL DEPTH, MD & TVD 10,260'		19. ELEV. CASINGHEAD 3572'	
20. PLUG, BACK T.D., MD & TVD 1891'		21. IF MULTIPLE COMPL., HOW MANY*	
22. INTERVALS DRILLED BY →		23. ROTARY TOOLS 0-1900'	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 1720-1754' Grayburg Formation		25. WAS DIRECTIONAL SURVEY MADE No	
26. TYPE ELECTRIC AND OTHER LOGS RUN Gamma Ray Perforating Log		27. WAS WELL CORED No	
28. CASING RECORD (Report all stringers in well)			
Casing Size 9-5/8"		Weight, lb./ft. 1900'	
Depth Set (MD) 1900'		Hole Size circulated	
29. LINER RECORD			
Size 2-3/8"		Top (MD) 1700'	
Bottom (MD) 1670'		Sacks Cement*	
Screen (MD)		Packer Set (MD)	
30. TUBING RECORD			
Size 2-3/8"		Depth Set (MD) 1700'	
Packer Set (MD) 1670'		Sacks Cement*	
31. PERFORATION RECORD (Interval, size and number)			
1 - 0.48" SPF @ 1720', 1725', 1735', 1738', 1743', 1745', 1752' & 1754'.		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
Depth Interval (MD) 1720-1754'		Amount and Kind of Material Used Frac. w/1500 gals. acid + 20,000 gals. water + 20,000 lbs. sand.	
33. PRODUCTION			
Date First Production Shut-In		Production Method (Flowing, gas lift, pumping—size and type of pump) Flowing	
Well Status (Producing or shut-in) Shut-In		Date of Test 12-12-67	
Hours Tested 16		Choke Size 3/4"	
Prod'n. for Test Period →		Oil—BBL. 0	
Gas—MCF. 215.2		Water—BBL. Trace	
Gas—Oil Ratio		Flow. Tubing Press. 70	
Casing Pressure 0		Calculated 24-Hour Rate →	
Oil—BBL. 0		Gas—MCF. 322.8	
Water—BBL. Trace		Oil Gravity-API (corr.)	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Shut-In			
35. LIST OF ATTACHMENTS None			
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records.			
Signed Exploration Manager		Date 12-27-67	

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

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 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 electrical logs, formation and pressure tests, and directional surveys, should be attached hereto, to the extent required by applicable Federal and/or State laws and regulations. A separate report should be included in this form, see item 33.

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), state, in item 22, and in item 24, show the production 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 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.)

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				GEOLOGIC MARKERS		
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH	TRUE VERT. DEPTH
				T. Yates	430'	
				T. Seven Riv.	575'	
				T. Queen	1146'	
				T. Penrose	1268'	
				T. San Andres	1760'	