

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

5. LEASE DESIGNATION AND SERIAL NO.

NM 16107

RECEIVED

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

DEC 5 1980

7. UNIT AGREEMENT NAME

O.C.D.

8. FARM OR LEASE NAME

ARTESIA, OREGON

Malstrom-Federal

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Wildcat Miss

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

Sec 19, T-12S, R-29E

12. COUNTY OR
PARISH

Chaves

13. STATE

NM

WELL COMPLETION OR RECOMPLETION REPORT AND LOG*

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

b. TYPE OF COMPLETION:

NEW
WELL ☐WORK
OVER ☐DEEP-
EN ☐PLUG
BACK ☐DIFF.
RESVR. ☐

Other _____

2. NAME OF OPERATOR

Ralph E. Williamson ✓

3. ADDRESS OF OPERATOR

P. O. Box 16, Midland, Texas 79702

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)

At surface 2310' FNL & 2195.8 FWL of Section

At top prod. interval reported below

At total depth

14. PERMIT NO.

DATE ISSUED

15. DATE SPUDDED

7-23-79

16. DATE T.D. REACHED

17. DATE COMPL. (Ready to prod.)

7-27-79

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

3743.8 DF

19. ELEV. CASINGHEAD

20. TOTAL DEPTH, MD & TVD

8777'

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

N/A

22. IF MULTIPLE COMPL.,
HOW MANY*

N/A

23. INTERVALS
DRILLED BY

ROTARY TOOLS

CABLE TOOLS

→

X

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

See attached Daily Well History

25. WAS DIRECTIONAL
SURVEY MADE

26. TYPE ELECTRIC AND OTHER LOGS RUN

Gamma Ray Neutron

27. WAS WELL CORED

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

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
8-5/8	24#	2100'	12-3/4	950 sx, circ.	None
4-1/2	10-1/2#	8777'	7-7/8"	500 sx 1st stage	5605
				375 sx 2nd stage	
				DV tool 6532'	

* See attached plugging report

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)

31. PERFORATION RECORD (Interval, size and number)

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

33.* PRODUCTION

DATE FIRST PRODUCTION PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) WELL STATUS (Producing or shut-in)

DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
			→				
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	→	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)
			→				

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

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

TITLE

Agent

DATE

Nov. 21, 1980

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