

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other in-
structions 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 _____		14. PERMIT NO. _____ DATE ISSUED _____		12. COUNTY OR PARISH Otero		13. STATE New Mexico	
b. TYPE OF COMPLETION: NEW WELL ☐ WORK OVER ☐ DEEP-EN ☐ Other _____		15. DATE SPUDDED 1-1-64		16. DATE T.D. REACHED 5-9-64		17. DATE COMPL. (Ready to prod.) 10-1-64	
2. NAME OF OPERATOR D. S. G. Dunn		3. ADDRESS OF OPERATOR Box 250, Artesia, New Mexico		18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 015.2		19. ELEV. CASINGHEAD 24.6	
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		5. LEASE DESIGNATION AND SERIAL NO. LG 00791-A		6. IF INDIAN, ALLOTTEE OR TRIBE NAME		7. UNIT AGREEMENT NAME	
8. FARM OR LEASE NAME Dale Federal		9. WELL NO. A		10. FIELD AND POOL, OR WILDCAT Luisa Springs-San Andres		11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA Sec. 26, T1P S. R. 1E.	
20. TOTAL DEPTH, MD & TVD 192		21. PLUG, BACK T.D., MD & TVD 1530		22. IF MULTIPLE COMPL., HOW MANY*		23. INTERVALS DRILLED BY Rotary Tools	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 112 to 1505 Slaughter San Andres		25. WAS DIRECTIONAL SURVEY MADE No		26. TYPE ELECTRIC AND OTHER LOGS RUN Gamma Ray Neutron		27. WAS WELL CORED Yes	
28. CASING RECORD (Report all strings set in well)							
CASING SIZE		WEIGHT, LB./FT.		DEPTH SET (MD)		HOLE SIZE	
1 1/2"		20		112		1 1/2"	
1 1/2"		20		1530		3"	
29. LINER RECORD							
SIZE		TOP (MD)		BOTTOM (MD)		SACKS CEMENT*	
30. TUBING RECORD							
SIZE		DEPTH SET (MD)		PACKER SET (MD)			
1 1/2"		112		None			
31. PERFORATION RECORD (Interval, size and number)							
Sigs jetted one hole at the following depths: 1490, 1492, 1495, 1502, 1503 & 1505							
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.							
DEPTH INTERVAL (MD)				AMOUNT AND KIND OF MATERIAL USED			
1490-1495				Treated with 1500 gal. of 15% acid and 1500 lbs. cement			
33. PRODUCTION							
DATE FIRST PRODUCTION 1-1-64		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Pumping - 6" 0"8" Bore working barrel				WELL STATUS (Producing or shut-in) Pumping	
DATE OF TEST 1-1-64		HOURS TESTED 24		CHOKE SIZE None		PROD'N. FOR TEST PERIOD →	
FLOW. TUBING PRESS.		CASING PRESSURE		CALCULATED 24-HOUR RATE →		OIL—BBL. 5	
						GAS—MCF. 135M	
						WATER—BBL. 5	
						OIL GRAVITY-API (CORR.)	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Vent						TEST WITNESSED BY L. R. Ufford	
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 Pat Thompson		TITLE Agent		DATE Nov. 1, 1964			

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

NMOCC - ARTESIA
NMOCC - HOBBS
BLM - SANTA FE

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 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 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 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 producing 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 identified, for 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				38. GEOLOGIC MARKERS	
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH TOP TRUE VERT. DEPTH
San Andres	0	1400	San. and. lime and dolomite Dolomite, lime, Anhydrite		
San Andres	1457	1500	Dolomite and anhydrite (mainly anhydrite) Dolomite, anhydrite, lime and shale		