

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other instructions on reverse side)

Form approved.
Budget Bureau No. 42-10550.

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 P & A

2. NAME OF OPERATOR

MINERALS, INC. ✓

3. ADDRESS OF OPERATOR

Box 1320, Hobbs, New Mexico 88240

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

At surface 660 FSL & FEL of Section

At top prod. interval reported below Same

At total depth Same

14. PERMIT NO.

DATE ISSUED

12. COUNTY OR PARISH

13. STATE

Chaves

New Mexico

15. DATE SPUDDED 1-31-70 16. DATE T.D. REACHED 2-23-70 17. DATE COMPL. (Ready to prod.) P & A 2/27/70 18. ELEVATIONS (DF, RKB, RT, etc.)* 3592 GR 19. ELEV. CASINGHEAD 3592

20. TOTAL DEPTH, MD 960' 21. PLUG, BACK T.D., MD & TVD ---- 22. IF MULTIPLE COMPL., HOW MANY* ---- 23. INTERVALS DRILLED BY ---- ROTARY TOOLS ---- CABLE TOOLS 0-960'

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

P & A

26. TYPE ELECTRIC AND OTHER LOGS RUN

None

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

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
9 5/8"	32	370	12 1/2"	181 sx - Circ.	

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)
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30. TUBING RECORD

SIZE	DEPTH SET (MD)	PACKER SET (MD)
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31. PERFORATION RECORD (Interval, size and number)

None

32. ACID, SHOT, FRACTURE, GEL, ETC.

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
None	

33.* PRODUCTION

DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)				ARTESIA, OFFICE		
P & A		-----				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.)

TEST WITNESSED BY

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

R. F. Montgomery

TITLE

President

DATE 3-2-70

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

RECEIVED
MAR 5 1970
S. G. G. ARTESIA OFFICERECEIVED
MAR 16 1970
S. G. G. ARTESIA OFFICE

INSTRUCTIONS

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 (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 24: 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 13: 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.

Item 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 23: "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 TEST, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH	TOP	DETH. DEPTH
Quaternary	0	110'	red ss. & caliche-show wtr @ 90'.				
U. Permian	110'	240'	red sh, anhy, gypsum, Tr. red ss. show wtr @ 210'.				
Yates	240'	360'	Mostly red sh, some anhy trace red ss. Gray ss 350-60 (basal Yates) bailed 2 bbls/hr of fm. water H ₂ S good trace Fe No trace Cl 128,400 Density 1.165 @ 70°F Total solids 215,000 PH 7 Show of oil & gas 15TGM Anhy, salt, some red sh & tr red ss	T/Anhydrite (7-Rivers)	360		
7-Rivers	360'	948'	Gray ss 948-958 show gas est. 50. MCHGID when bailed dry. No show free oil! Cutting had tr of fl & cut, bailed 30 cols. in 30 min	T/Queen	948		
Queen	948	960	SL overlying 350' from surface & found 350' from surface				