

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE

(See 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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> DRY <input type="checkbox"/> Other <u>RECEIVED</u>		5. LEASE DESIGNATION AND SERIAL NO. NM 10893	
b. TYPE OF COMPLETION: NEW WELL <input checked="" type="checkbox"/> WORK OVER <input type="checkbox"/> DEEP-EN <input type="checkbox"/> PLUG BACK <input type="checkbox"/> DIFF. RESVR. <input type="checkbox"/> Other _____		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
2. NAME OF OPERATOR Yates Petroleum Corporation ✓		7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR 207 South 4th St., Artesia, NM 88210		8. FARM OR LEASE NAME Godfrey MP Federal	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 660 FNL & 1980 FWL, Sec. 15-7S-25E At top prod. interval reported below At total depth		9. WELL NO. 3	
14. PERMIT NO.		13. STATE NM	
15. DATE SPUDDED 5-20-82		18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 3836.5' GR	
16. DATE T.D. REACHED 5-29-82		19. ELEV. CASINGHEAD	
17. DATE COMPL. (Ready to prod.) 6-23-82		20. TOTAL DEPTH, MD & TVD 4250'	
21. PLUG BACK T.D., MD & TVD 4178'		22. IF MULTIPLE COMPL., HOW MANY*	
23. INTERVALS DRILLED BY →		24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 4009-4022' 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)	
29. LINER RECORD		30. TUBING RECORD	
31. PERFORATION RECORD (Interval, size and number) 4009-4022' w/16 .50" holes		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
33.* PRODUCTION		34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Vented - Will be sold	
35. LIST OF ATTACHMENTS Deviation Survey		36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records	

SIGNED [Signature] TITLE Engineering Secretary DATE 6-24-82

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

Husted ID-2
Comp Book
7-2-82
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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.

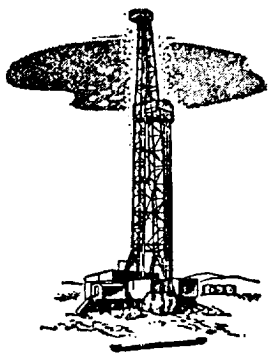
Item 33: Submit a separate completion report on this form for each interval to be separately produced. (See instruction for items 22 and 24 above.)

37. SUMMARY OF POROUS ZONES: SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF: CORRD INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CUSHION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	38. GEOLOGIC MARKERS		
				NAME	MEAS. DEPTH	TRUE VERT. DEPTH

San Andres
Glorieta
Abo

485
1563
3646



LaRue Drilling Co., Inc. — Oil Well Drilling Contractors

P. O. BOX 202

ARTESIA, NEW MEXICO 88210

RECEIVED

JUN 27 1982

O. C. D.
ARTESIA, OFFICE

May 31, 1982

Yates Petroleum Corporation
207 South Fourth Street
Artesia, NM 88210

RE: Godfrey MP Federal #3
1980' FWL & 660' FNL
Sec. 15, T7S, R25E
Chaves County, New Mexico

Gentlemen:

The following is a Deviation Survey for the above
captioned well.

DEPTH	DEVIATION
469'	1/2°
880'	3/4°
1435'	3/4°
2122'	1/2°
2772'	1/2°
3242'	3/4°
3695'	1°
4250'	1°

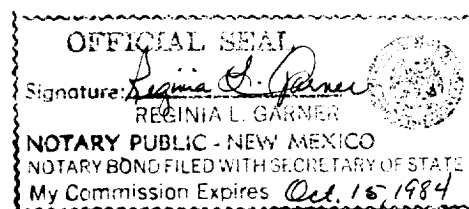
Very truly yours,

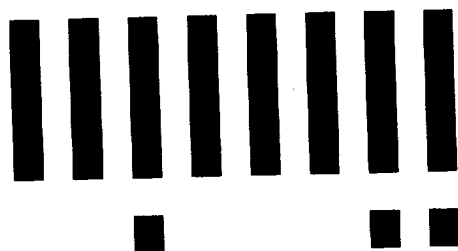
B. N. Muncy Jr.
Secretary

STATE OF NEW MEXICO
COUNTY OF NEW MEXICO

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The foregoing was acknowledged before me this 31st
day of May, 1982.





LTR



Job separation sheet

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN COMPLETION

Form approved.
Budget Bureau No. 42-R355.5.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL: OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> DRY <input type="checkbox"/>		1b. TYPE OF COMPLETION: NEW WELL <input checked="" type="checkbox"/> WORK OVER <input type="checkbox"/> DEEP-EN <input type="checkbox"/> PLUG BACK <input type="checkbox"/> DIFF. RESVR. <input type="checkbox"/>		2. NAME OF OPERATOR Yates Petroleum Corporation	
3. ADDRESS OF OPERATOR 207 South 4th St., Artesia, NM 88210				4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements) At surface 660 FNL & 1980 FWL, Sec. 15-7S-25E At top prod. interval reported below At total depth	
14. PERMIT NO. O.C.D.		DATE ISSUED JUL 1 1982		15. DATE SPUDDED 5-20-82	
16. DATE T.D. REACHED 5-29-82		17. DATE COMPL. (Ready to prod.) 6-23-82		18. ELEVATIONS (DF, RKB, RT, GR, ETC.) * 3836.5' GR	
20. TOTAL DEPTH, MD & TVD 4250'		21. PLUG, BACK T.D., MD & TVD 4178'		22. IF ANY, INTERVALS DRILLED BY 0-4250'	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD) * 4009-4022' 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)	
20"				30'	
8-5/8"		24#		880'	
4-1/2"		10.5#		4250'	
Hole Size		Cementing Record		Amount Pulled	
24"					
12-1/4"		700			
7-7/8"		350			
29. LINER RECORD					
Size		Top (MD)		Bottom (MD)	
Sacks Cement		Screen (MD)		Tubing Record	
				Size	
				Depth Set (MD)	
				Packer Set (MD)	
				2-3/8"	
				3974'	
				3974'	
31. PERFORATION RECORD (Interval, size and number)					
4009-4022' w/16 .50" holes					
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.					
Depth Interval (MD)		Amount and Kind of Material Used			
4009-22'		w/2000 g. 7 1/2% MOD 101 acid.			
		SF w/40000 g. gel KCL wtr,			
		65000# 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)	
6-23-82		Flowing		STWOPLC	
Date of Test		Hours Tested		Choke Size	
6-23-82		4		1 1/2"	
Flow. Tubing Press.		Casing Pressure		Calculated 24-hour Rate	
400		Packer		2586	
Oil—BBL.		Gas—MCF.		Water—BBL.	
-		433		-	
Oil Gravity-API (corr.)		-		-	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)					
Vented - Will be sold					
35. LIST OF ATTACHMENTS					
Deviation Survey					
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records					
Signed		Title		Date	
[Signature]		Engineering Secretary		6-24-82	

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

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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 LOGGING 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				38. GEOLOGIC MARKERS		
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH	TRUE VERT. DEPTH
				San Andres	485	
				Glorieta	1563	
				Abo	3646	