

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMISSIONS COMMISSION
NM OIL & GAS
Artesia, NM 88210Form approved.
Budget Bureau No. 42-R355.5.

57 file

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 Stevens Operating Corporation						DEC 11 1981	
3. ADDRESS OF OPERATOR P. O. Box 2203, Roswell, New Mexico 88201						ARTESIA OFFICE	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 660' N, 660' W, Sec. 1-8S-26E						NOV 23 1981	
At top prod. interval reported below Same							
At total depth Same							
14. PERMIT NO.						DATE ISSUED	
15. DATE SPUDDED						18. ELEVATIONS (DF, RKB, RT, GR, ETC.)*	
8-30-81						3864' GL	
16. DATE T.D. REACHED						19. ELEV. CASINGHEAD	
9-19-81						3864' GL	
17. DATE COMPL. (Ready to prod.)							
10-11-81							
20. TOTAL DEPTH, MD & TVD						22. IF MULTIPLE COMPL., HOW MANY*	
5000'						23. INTERVALS DRILLED BY	
21. PLUG, BACK T.D., MD & TVD						ROTARY TOOLS	
4904'						CABLE TOOLS	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*						0-ID	
4816.5 - 4825.5 Abo							
26. TYPE ELECTRIC AND OTHER LOGS RUN CNL/FDC, DLL/RXO						25. WAS DIRECTIONAL SURVEY MADE	
						No	
27. WAS WELL CORED						No	
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#	1130'	12 1/4"	400 sx 65/30, 200 Class C			
4 1/2"	9.5#	5000'	7 7/8"	200 sx 65/35, 150 Self Stress			
29. LINER RECORD							
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)			
30. TUBING RECORD							
SIZE	DEPTH SET (MD)	PACKER SET (MD)					
2 3/8"	4721'	4721'					
31. PERFORATION RECORD (Interval, size and number)							
4816.5, 17, 17.5, 20.5, 21, 21.5, 22, 24.5, 25, 25.5							
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.							
DEPTH INTERVAL (MD)			AMOUNT AND KIND OF MATERIAL USED				
4816.5-4825.5			3000 gals 7.5% HCL, 1000 SCF N ₂				
" "			Frac 30,000 gals 75% foam,				
			45,000# 20-40 sand.				
33. PRODUCTION							
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)			WELL STATUS (Producing or shut-in)		
SI/NO Pipeline		Flowing			SI/NO Pipeline		
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	
11-13-81	24	8/64	→	-----	CAOF 523	-----	
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)	
697#	Pkr	→	-----	CAOF 523	-----	-----	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)						TEST WITNESSED BY	
Well SI/NO Pipeline Connection						Mike Vowell	
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			DATE		
Donald G. Allen		President			11-19-81		

*(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 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	1028	Red Sand, Shale, Anhydrite	San Andres	1028	
Glorietta	1028	2216	Limestone, Dolomite	Glorietta	2216	
Tubb	2216	3639	Sandstone, Anhydrite, Dolomite	Tubb	3639	
Abo	3639	4426	Sandstone, Dolomite, Salt	Abo	4426	
	4426	5000	Red Sand, Shale			