

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

Artesia, NM 88210

(See other instructions on reverse side)

Form approved,
Budget Bureau No. 2-3355.5.

RECEIVED

5. LEASE DESIGNATION AND SERIAL NO.

USA-NM-11592

6. IF INDIAN, ALLOTTEE OR RESERVE

7. UNIT AGREEMENT NO.

8. FARM OR LEASE NAME

Grynberg 29 Federal

9. WELL NO.

10. FIELD AND POOL, OR WILDCAT

Undesignated Abo

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

Sec 29 T55S R24E

12. COUNTY OR PARISH

Chaves

13. STATE

NM

14. PERMIT NO.

DATE ISSUED

12/11/81

15. DATE SPUDED

12/12/81

16. DATE T.D. REACHED

12/22/81

17. DATE COMPL. (Ready to prod.)

1/18/82

18. ELEVATIONS (DF, REB, RT, GR, ETC.)

4111 K.B.

19. ELEV. CASINGHEAD

20. TOTAL DEPTH, MD & TVD

4177'

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

4108

22. IF MULTIPLE COMPL., HOW MANY*

23. INTERVALS DRILLED BY

ROTARY TOOLS

CABLE TOOLS

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

3615' - 3826' Abo

25. WAS DIRECTIONAL SURVEY MADE?

No

26. TYPE ELECTRIC AND OTHER LOGS RUN

Dual Laterolog-MSFL Density-Neutron

27. WAS WELL CORDED

No

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

Casing Size Weight, lb./ft. Depth Set (MD) Hole Size Cementing Record Amount Pooled

10-3/4" 32# 901' 14-3/4 300 sxs Hall Lite

4-1/2" 10.5# 4177' 7-7/8 300 sxs Class "C"

1900 sxs 5050 POZ

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" 3565'

31. PERFORATION RECORD (Interval, size and number)

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

Depth Interval (MD) Amount and Kind of Material Used

3615-3617 3760 - 3768

3627-3631 3790-3802

3634-3642 3813-3823

3656-3670

3627-3823 frac with 60,000 gals KCL water,

20,000 gal liq CO₂, 125,000 # sand

33. PRODUCTION

Date First Production Production Method (Flowing, gas lift, pumping—size and type of pump)

1/29/82 Flowing

Well Status (Producing or shut-in)

S.I. W.O.P.L.

Date of Test Hours Tested Choke Size Prod'n. for Test Period Oil—BBL. Gas—MCF. Water—BBL. Gas-Oil Ratio

1/29/82 3Hrs. 3/4 206

Flow. Tubing Press. Casing Pressure Calculated 24-Hour Rate Oil—BBL. Gas—MCF. Water—BBL. Oil Gravity-API (CORR.)

122 CAOF 3,607.2

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

Vented

35. LIST OF ATTACHMENTS

Pressure Test

36. I hereby certify that the foregoing and attached information is correct and complete as determined from all available records

SIGNED M. [Signature]

TITLE Exploration Manager

U.S. GEOLOGICAL SURVEY

DATE 2/25/82

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

25010204121

Posted ID-2
Comp. Book
SI
3-5-82

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 83, 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: "Secks 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.)

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