

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN DUPLICATE
Other instructions on reverse side)Form approved.
Budget Bureau No. 42-R355.5.

Artesia, NM 88210

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL:		OIL WELL <input type="checkbox"/>	GAS WELL <input checked="" type="checkbox"/>	DRY <input type="checkbox"/>	Other _____		
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 _____
2. NAME OF OPERATOR						JUN 4 1982	
Yates Petroleum Corporation ✓						O. C. D.	
3. ADDRESS OF OPERATOR						ARIESIA OFFICE	
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 & 660 FWL, Sec. 24-T6S-R25E							
At top prod. interval reported below							
At total depth							
14. PERMIT NO.				DATE ISSUED		12. COUNTY OR PARISH	
						Chaves	
						13. STATE	
						NM	
15. DATE SPUDDED		16. DATE T.D. REACHED		17. DATE COMPL. (Ready to prod.)		18. ELEVATIONS (DF, RKB, RT, GR, ETC.) *	
4-6-82		4-19-82		5-3-82		3801.4' GR	
20. TOTAL DEPTH, MD & TVD		21. PLUG, BACK T.D., MD & TVD		22. IF MULTIPLE COMPL., HOW MANY *		23. INTERVALS DRILLED BY	
4400'		4394'				0-4400'	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD) *							25. WAS DIRECTIONAL SURVEY MADE
3744-3997' Abo							No
26. TYPE ELECTRIC AND OTHER LOGS RUN							27. WAS WELL CORED
CNL/FDC; DLL							No
28. CASING RECORD (Report all strings set in well)							
CASING SIZE		WEIGHT, LB./FT.		DEPTH SET (MD)		HOLE SIZE	
20"				60'		24"	
10-3/4"		40.5#		850'		14-3/4"	
4-1/2"		9.5#		4395'		7-7/8"	
29. LINER RECORD				30. TUBING RECORD			
SIZE		TOP (MD)		BOTTOM (MD)		SIZE	
						2-3/8"	
						3689'	
						3690'	
31. PERFORATION RECORD (Interval, size and number)				32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
3744-3997' w/32 .50" holes				DEPTH INTERVAL (MD)			
				3744-3997'			
				AMOUNT AND KIND OF MATERIAL USED			
				w/4500 g. 7 1/2% Spearhead acid.			
				SF w/60000 g. 2% KCL wtr.			
				120000# 20/40 sd, 800# Benzoic flakes.			
33.* PRODUCTION							
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)				WELL STATUS (Producing or shut-in)	
5-3-82		Flowing				SI NOPLC	
DATE OF TEST		HOURS TESTED		CHOKE SIZE		PROD'N. FOR TEST PERIOD	
5-3-82		3		1 1/2"		OIL—BBL. 268	
FLOW. TUBING PRESS.		CASING PRESSURE		CALCULATED 24-HOUR RATE		OIL—BBL. 2148	
330		Packer				GAS—MCF. 2148	
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	
J. A. Ta. J. W. Hott		Engineering Secretary				5-12-82	

*(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 33.

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 LOGS, ZONES:

SHOW ALL IMPORTANT ZONES OF LOGS, AND CONTENTS THEREOF: CORED INTERVALS, AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL, TESTED, CEMENT, SET, TIME TOOL, OPEN, FLOWING, AND SHUT-IN PRESSURE, AND RECOVERIES

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	38.	GEOLOGIC MARKERS	TOP	MEAN DEPTH	TRUE VERT. DEPTH
					San Andres	537		
					Glorieta	1609		
					Fullerton	3030		
					Abo	3685		