

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE

(See instructions on reverse side)

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

C/SF

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL: OIL WELL ☐ GAS WELL ☒ DRY ☐ Other ☐ RECEIVED

b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other ☐ APR 8 1982

2. NAME OF OPERATOR
Yates Petroleum Corporation /

3. ADDRESS OF OPERATOR
207 South 4th St., Artesia, NM 88210 O. C. D. ARTESIA, OFFICE

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*
At surface 860 FSL & 660 FWL, Sec. 9-T8S-R25E
At top prod. interval reported below
At total depth

14. PERMIT NO. DATE ISSUED

15. DATE SPUNDED 2-27-82 16. DATE T.D. REACHED 3-13-82 17. DATE COMPL. (Ready to prod.) 3-27-82 18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 3649.5' GR

20. TOTAL DEPTH, MD & TVD 4100' 21. PLUG BACK T.D., MD & TVD 3947' 22. IF MULTIPLE COMPL., HOW MANY* 23. INTERVALS DRILLED BY 0-4100'

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*
3613-3781' Abo

26. TYPE ELECTRIC AND OTHER LOGS RUN
CNL/FDC; DLL

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

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
20"		40'	24"		
10-3/4"	40.5#	999'	14-3/4"	800	
8-5/8"	24#	1500'	12-1/4"	250	
4-1/2"	9.5#	4076'	7-7/8"	400	

29. LINER RECORD					30. TUBING RECORD		
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					2-7/8"	3625'	3625'

31. PERFORATION RECORD (Interval, size and number)				32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
3613-3781' w/12 .50" holes				DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
				3613-3781'	w/1000 g. 7 1/2% Spearhead acid, ball sealers. SF w/2000 g. gel KCL wtr, 19 tons CO2, 40000# 20/40 sd.

33.* PRODUCTION
DATE FIRST PRODUCTION 3-27-82 PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Flowing WELL STATUS (Producing or shut-in) SIWOPLC

DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
3-27-82	12	3/4"		-	132	-	-
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—REL.	OIL GRAVITY-API (CORR.)	
5	Packer		-	264	-	-	

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Vented—will be sold TEST WITNESSED BY Larry Dade

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 4-7-82

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

Posted ID-2
+ Comp. Book
SI
4-16-82

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: "Stacks 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 POROSITY 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	TRUEVERT. DEPTH
				San Andres	368	
				Glorieta	1447	
				Fullerton	2886	
				Abo	3590	