

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYNM OIL CONS. COM. STON
SUBMITTAL DRAWING
(See other instructions on reverse side)
Artesia, NM 88210Form approved.
Budget Bureau No. 42 R355.5.

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 <input type="checkbox"/>	RECEIVED	
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 <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 990 FNL & 660 FEL, Sec. 8-7S-26E At top prod. interval reported below At total depth							
14. PERMIT NO.				DATE ISSUED JUN 1 1982			
15. DATE SPUNDED 3-31-82 CT 4-1-82 RT				16. DATE T.D. REACHED 4-11-82		17. DATE COMPL. (Ready to prod.) 5-12-82	
18. ELEVATIONS (DT, RKB, ET, GR, ETC.)* 3594.3' GR				19. ELEV. CASINGHEAD			
20. TOTAL DEPTH, MD & TVD 4350'		21. PLUG, BACK T.D., MD & TVD 4280'		22. IF MULTIPLE COMPL., HOW MANY*		23. INTERVALS DRILLED BY ROTARY TOOLS 0-4350'	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 3827-53' 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)	HOLE SIZE	CEMENTING RECORD		AMOUNT PULLED	
20"		40'	24"				
8-5/8"	24#	900'	12-1/4"	700			
4-1/2"	9.5#	4350'	7-7/8"	375			
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"	3780'	3780'
31. PERFORATION RECORD (Interval, size and number) 3827-53' w/13 .50" holes				32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
				DEPTH INTERVAL (MD)			
				3827-53'			
				AMOUNT AND KIND OF MATERIAL USED			
				w/1000 g. MOD 101 acid, 15 balls. SF w/1000 g. MOD 101 acid, 10000 g. gel KCL wtr, 4000# Block, 30000# 20/40 sd.			
33. PRODUCTION							
DATE FIRST PRODUCTION 5-12-82		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Flowing				WELL STATUS (Producing or shut-in) SIWOPLC	
DATE OF TEST 5-12-82	HOURS TESTED 6	CHOKE SIZE 12/64"	PROD'N. FOR TEST PERIOD →	OIL—BBL. -	WATER—BBL. -	GAS—OIL RATIO -	
FLOW. TUBING PRESS. 280	CASING PRESSURE Packer	CALCULATED 24-HOUR RATE →	OIL—BBL. -	GAS—BBL. -	WATER—BBL. -	OIL GRAVITY-API (COBR)	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Vented - Will be sold						TEST WITNESSED BY Bill Hansen	
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 5-13-82	

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

General: This form is designed for submitting a complete and correct well completion report and log on all types of wells 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.

and not filed prior to the time this summary record is submitted, copies of all currently available logs (cylinders, 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 32.

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, (tops), (bottoms) and names(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: "Seeks Comment". Attached supplemental records for this well should show the details of any multiple stage completion 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.)

SHOW ALL IMPORTANT ZONES OF VARIABILITY AND CONTENTS THEREOF: CORREL. INTERVALS, AND ALL PROBABLE TESTS, INCLUDING DEPEND. INTERVAL, TESTED, CT. SIGN. TEST, TIME TEST, OPEN, FLOWING AND SHUT IN TESTS, AND ALL OTHERS.