

UNITED STATES DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY
Artesia, NM 88210Form approved.
Budget Bureau No. 42-R355.6.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL: OIL WELL ☐ GAS WELL ☒ DRY ☐ Other ☐		5. LEASE DESIGNATION AND SERIAL NO. NM-32355 32335																			
b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other ☐		6. IF INDIAN, ALLOTTEE OR TRIBE NAME																			
2. NAME OF OPERATOR Transwestern Gas Supply Company		7. UNIT AGREEMENT NAME																			
3. ADDRESS OF OPERATOR P. O. Box 2521, Houston, Texas 77252		8. FARM OR LEASE NAME Antelope Federal																			
4. LOCATION OF WELL (Report location clearly and in accordance with any State or Federal laws) At surface 1980' FNL & 660' FWL Sec. 29-4S-22E At top prod. interval reported below same At total depth same		9. WELL NO. 1																			
14. PERMIT NO. O. C. D. DATE ISSUED ARTESIA OFFICE		10. FIELD AND POOL, OR WILDCAT Undesignated-Abo																			
15. DATE SPUDDED 6/12/82		11. SEC. T. R., M., OR BLOCK AND SURVEY OR AREA Sec. 29, T4S, R22E																			
16. DATE T.D. REACHED 6/20/82		12. COUNTY OR PARISH Chaves																			
17. DATE COMPL. (Ready to prod.) 8/14/82		13. STATE N.M.																			
18. ELEVATIONS (DF, REB, BT, OR, ETC.)* 4472 GR		19. ELEV. CASINGHEAD Same																			
20. TOTAL DEPTH, MD & TVD 3600'		21. PLUG, BACK T.D., MD & TVD 3131'																			
22. IF MULTIPLE COMPL., HOW MANY*		23. INTERVALS DRILLED BY Rotary																			
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 3079-3111' (Abo)		25. WAS DIRECTIONAL SURVEY MADE No																			
26. TYPE ELECTRIC AND OTHER LOGS RUN CNL/FDL; DIL		27. WAS WELL CORED Yes																			
28. CASING RECORD (Report all strings set in well)																					
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31. PERFORATION RECORD (Interval, size and number)																					
3431, 33 & 34; 3252, 54, 56, 81, 83, 85, 87, 89 & 91; 3079, 81, 83, 85, 87, 3101, 03, 05, 07, 09, 11, 79, 80, 82, 3093, 95 & 99 (Abo). 3 1/8" hole; 31 holes																					
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.																					
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34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Vented																					
35. LIST OF ATTACHMENTS Form C-122; Form C-122F; Graph of AOF; Analysis sheet; Meter Chart																					
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records																					
SIGNED <u>Pamie Spruill</u> TITLE <u>Production Engineer ASST.</u> DATE <u>9/15/82</u>																					

*(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 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	TRUE VERT. DEPTH
	0	1500	Surface sands and clay.	Tubb	2502	2502
	1500	1700	Sand & Anhydrite	Drinkard	2745	2745
	1700	1900	Dolomite, Siltstone, Anhydrite, Sand	Abo	3012	3012
	1900	2100	Siltstone			
	2100	3015	Dolomite, Shale, Anhydrite, Siltstone			
	3015	3138	Cored. Shale, Dolomite, Anhydrite, Sand			
	3138	3600	Shale and Siltstone			