

NM OIL CONS. COMMISSION
Drawer DD UNITED STATES
Artesia, NM 88210
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other in-
structions on
reverse side)Form approved.
Budget Bureau No. 42-R355.5.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG*

1a. TYPE OF WELL: OIL WELL ☐ GAS WELL ☒ DRY ☐		5. LEASE DESIGNATION AND SERIAL NO. NM 31947	
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 Yates Petroleum Corporation		7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR 207 South 4th St., Artesia, NM 88210		8. FARM OR LEASE NAME Nickey RF Federal	
4. LOCATION OF WELL (Report location clearly with an accuracy of 1/4 section) At surface 1980 FNL & 660 FWL, Sec. 19-T7S-R26E At top prod. interval reported below At total depth		9. WELL NO. 2	
10. FIELD AND POOL, OR WILDCAT Pecos Slope Abo		11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA Unit E, Sec. 19-T7S-R26E	
12. COUNTY OR PARISH O. C. D. ARTESIA, OFFICE		13. STATE N.M.	
15. DATE SPUDDED 1-16-83	16. DATE T.D. REACHED 1-23-83	17. DATE COMPL. (Ready to prod.) 2-12-83	18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* -3629' GR 3630.4
19. ELEV. CASING HEAD	20. TOTAL DEPTH, MD & TVD 4300'		
21. PLUG BACK T.D., MD & TVD 4260'	22. IF MULTIPLE COMPL., HOW MANY*	23. INTERVALS DRILLED BY →	ROTARY TOOLS 0-4300'
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 3685-4176' 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
10-3/4"	40.5#	850'	14-3/4"
4-1/2"	9.5#	4300'	7-7/8"
CEMENTING RECORD			
650			
700			
AMOUNT PULLED Post ID-2 2-18-83 Camp + BK			
29. LINER RECORD			
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*
30. TUBING RECORD			
SIZE	DEPTH SET (MD)	PACKER SET (MD)	
2-3/8"	3639'	3639'	
31. PERFORATION RECORD (Interval, size and number) 3685-4176' w/29 .42" holes			
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED	
3685-4176'		w/3750 g. 7 1/2% acid. SF	
		w/70000g. gel KCL wtr,	
		130000# 20/40 sd.	
33.* PRODUCTION			
DATE FIRST PRODUCTION 2-12-83		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Flowing	
DATE OF TEST 2-12-83		WELL STATUS (Producing or shut-in) SIWOPLC	
HOURS TESTED 3	CHOKE SIZE 3/4"	PROD'N. FOR TEST PERIOD →	OIL—BBL. -
GAS—MCF. 503	WATER—BBL. -	GAS-OIL RATIO -	
FLOW. TUBING PRESS. 265	CASING PRESSURE Packer	CALCULATED 24-HOUR RATE →	OIL—BBL. -
GAS—MCF. 4028	WATER—BBL. -	OIL GRAVITY-API (CORR.) -	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Vented - Will be sold (ORIG. SGD.) DAVID R. GLASS			
35. LIST OF ATTACHMENTS Deviation Survey			
I hereby certify that the foregoing and attached information is complete and correct as determined from all available records			
SIGNED [Signature]		TITLE Production Supervisor	
DATE 2-14-83		DATE 2-14-83	

* (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 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: "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
				San Andres Glorieta Abo	432 1532 3651	