	0/01
Form approved.	
Budget Bureau No.	42-R355.5

36. I hereby certify	Deviat	oingand	attached i				correct	(-)/	ed from	n all available r	_	7-21-83
35. LIST OF ATTACH				sold			ACC	PTED FO	R RE		11150	11
34. DISPOSITION OF G										Bill Ha		
200	Pkr		>				7 30				ope.	•••
FLOW. TUBING PRESS.	CASING PRESS	URE CA	LCULATED	OIL	BBL.	1	AS-MCI	`.	WATER	R-BBL.	OIL G	RAVITY-API (CORR.)
7-8-83	6		24/64"			<u> </u>		182		<u> </u>		-
DATE OF TEST	HOURS TESTER		OKE SIZE	TEST	N. FOR PERIOD	0111	BL.	GAS-M		WATER-BBL		GAS-OIL RATIO
7-8-83	1.00					. ·			•	I I	t-in) IOPL	С
33.* DATE FIRST PRODUCT	ION PRO	DUCTION	METHOD (Flowing, g				type of pur	np)			s (Producing or
22.4					PRO	DUCTION	1		<u> </u>			
									7000	00# 20/40	sa.	
					·	w/40000 g. gel KCL wtr,						
3688-38	57' w/13	.42" h	noles			368	88-385	57'				cid + balls.
						DEPTH	INTERV	AL (MD)	l	MOUNT AND KIN		
31. PERFORATION REC	CORD (Interval, 8	ize and	number)	·····		32.	A	CID, SHOT	, FRAC	TURE, CEMENT	SQU	EEZE, ETC.
		-										
9100	101 (111)	30710	- \					2-3/8	3" -	3558'		3558'
29.	TOP (MD)	,	RECORD M (MD)	SACKS CI	MENT*	SCREEN	(MD)	SIZE		DEPTH SET (M		PACKER SET (MD)
	<u> </u>	LINER	PECOED		1			30.		TUBING RECO	RD	
4-1/2"	9.5#		421	.0'	7	7-7/8		12	<u> </u>			
10-3/4"	40.51	<u> </u>				.4-3/4" 1675 7-7/8" 725						
20"			40'			1 0 11			75			
CASING SIZE	WEIGHT, LB.	/FT.	DEPTH SE		1101	E SIZE		CEM	ENTING	RECORD		AMOUNT PULLED
28.				NG RECO			rings set			DECOSE.		
	CNL/FDC;										<u>N</u>	lo
26. TYPE ELECTRIC A	ND OTHER LOGS	RUN										AS WELL CORED
	3688-3857	'' Abo										No
24. PRODUCING INTER				JOI LOM,			,					SURVEY MADE
4210 * 24. PRODUCING INTER	1		T10N—T0P	BOTTÓM	NAME (M	D AND T	VD)*		→	1	25	. WAS DIRECTIONAL
20. TOTAL DEPTH, MD &		је, васк [.] 4131 '	r.D., MD &	FVD 22.	HOW MA		1. 4 . 4 ,		LED BY	0-4210	-	
6-1-83	6-9-		1	7-8-83	IF MULT	HPLE CO	IPL -	23. INTE		ROTARY TOOL	8	CABLE TOOLS
15. DATE SPUDDED	16. DATE T.D. I				Ready to	prod.)	18. ELE	EVATIONS (DI 2765	г, ккв, . 5	RT, GR, ETC.)*	19. E	LEV. CASINGREAD
				1						Chaves		NM LLEV. CASINGHEAD
				14. PEF	MIT NO.		DATE	ISSUED		12. COUNTY O		13. STATE
At total depth												12 cm/m
At top prod. inte	rvai reported De	:10W								Unit I), S	ec. 14-7S-25
			L, SEC	• T4-T	, U M2	,,,				OR AREA		
	00 FNL & 6							,		11. SEC., T., R		R BLOCK AND SURVEY
4. LOCATION OF WELL	th 4th St	., Ar	tesia,	NM 88	ZIU	State re	AKI	6IA, OFFI	<u> </u>	Pecos S		
3. ADDRESS OF OPERA			. •	ND4 00	210). C. D.	~	10, FIELD AND	POOL	10
	etroleum	Corpo	ration	V				100		9. WELL NO.		10
2. NAME OF OPERATO				/			AU	PIOIA	83		"MI	" Federal
	WORK DEF	:P-	BACK	DIFF.	n. 🗌 🤇	on R 05	ALL A	* 4 * · · ·		S. FARM OR L		
b. TYPE OF COMP						BUK.	1					
1a. TYPE OF WELL			GAS WELL X			Other				7. UNIT AGREE	MENT	NAME
WELL COM	APLETION	OR I	RECOM	APLETIC	ONR	EPOR	IAN	D LOG	ig*			
						-						TEE OR TRIBE NAME
								reverse 1E088210		NM 2		_
	DEPAR	MEN	JT OF	THE	INT	ERIC		structi	ons on		GNATI	ON AND SERIAL NO.

NSTRUCTIONS

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. Aft attachments

or Federal office for specific instructions. 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 should e listed on this form, see item 35.

Hems 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 lem 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 pertunent to such interval.

Hem 29: "Nacks Cement": Attached supplemental records for this well should show the details of any multiple stage cementing and the location of the cementing tool.

Hem 33: Submit a separate completion report on this form for each interval to be separately produced. (See instruction for items 22 and 24 above.)

San Andres 458 Glorieta 1544 Abo 3634	MEAS. DEPTH	FORNATION TOP BOTTOM DESCRIPTION, CONTENTS, ETC.	37. SUMMARY OF POROUS ZONES: SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF; CORED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING SHOW ALL INFORTANT ZONES OF POROSITY AND CONTENTS THEREOF; CORED INTERVALS; AND RECOVERES AND RECOVERES.
544	AS. DEPTH TRUE VERT. DEPTH	TOP	ARKERS