

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPL. *E*

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

5. LEASE DESIGNATION AND SERIAL NO.

NM 8831

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

FEDERAL (USA) "F" NCT-1

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

UNDESIGNATED

11. SEC., T. R., M., OR BLOCK AND SURVEY
OR AREA

SEC. 30, T-18-S, R-10-E

12. COUNTY OR
PARISH

OTERO

13. STATE

NEW MEXICO

1a. TYPE OF WELL:

OIL

☐

GAS

☐

DRY

☒

Other

b. TYPE OF COMPLETION:

NEW

☒

WORK

☐

DEEP-

☐

PLUG

☐

DIFF.

☐

Other

2. NAME OF OPERATOR

TEXACO Inc.

3. ADDRESS OF OPERATOR

P.O. BOX 728 - HOBBS, NEW MEXICO 88240

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)
At surface Well is located 1980' from the South line & 1980' from
the East line of Section 30, T-18-S,
R-10-E, Unit Letter J
At top prod. interval reported below
At total depth

14. PERMIT NO.

REGULAR

DATE ISSUED

9-2-70

15. DATE SPUDDED

9-18-70

16. DATE T.D. REACHED

10-31-70

17. DATE COMPL. (Ready to prod.)

COMPL. DRY

18. ELEVATIONS (DF, REB, RT, GR, ETC.)*

4043' GR

19. ELEV. CASINGHEAD

4043'

20. TOTAL DEPTH, MD & TVD

8288'

21. PLUG, BACK T.D., MD & TVD

PLUG AT SURFACE

22. IF MULTIPLE COMPL.,
HOW MANY*

-

23. INTERVALS
DRILLED BY

ROTARY TOOLS

0-8288

CABLE TOOLS

-0-

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*

25. WAS DIRECTIONAL
SURVEY MADE

YES

26. TYPE ELECTRIC AND OTHER LOGS RUN

GAMMA RAY SONIC

27. WAS WELL CORED

NO

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

CASINO SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
20"	78.60	383'	26"	1000 SX	-
13-3/8"	48,54.5 & 61#	2455'	17-1/2"	2600 SX	-

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
NONE							

31. PERFORATION RECORD (Interval, size and number)

NONE

32. ACID, SHOT, FRACTION, CEMENT SQUEEZE, ETC.

DEPTH INTERVAL (MD)

AMOUNT OF MATERIAL USED

33.* PRODUCTION

DATE FIRST PRODUCTION

DRILLED DRY

PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)

WELL (Producing or
shut-in)

DATE OF TEST

HOURS TESTED

CHOKE SIZE

PROD'N. FOR
TEST PERIOD

OIL—BBL.

GAS—MCF.

WATER—BBL.

GAS-OIL RATIO

FLOW. TUBING PRESS.

CASING PRESSURE

CALCULATED
24-HOUR RATE

OIL—BBL.

GAS—MCF.

WATER—BBL.

OIL GRAVITY-API (CORR.)

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)

TEST WITNESSED BY

35. LIST OF ATTACHMENTS

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records

SIGNED

TITLE

ASSISTANT

DISTRICT SUPERINTENDENT

DATE

NOV. 5, 1970

*(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 or Federal land ownership 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 a 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 in 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 (s) 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 record 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 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

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.
			DST #1 - 5252' to 5523': Tool open Packer failed.
			DST #2 - 5245' to 9523': Tool open w/strong blow & decreased @ end of 1 hr. Rec. 450' drilling mud, 2139' mud cut formation water & 884' formation water.
			DST #3 - 6762' to 6946': Tool open for 1 hr w/fair blow of air. Rec 450' drilling mud, 3586' slightly salty water. No oil or gas.
			DST #4 - 7366' to 7410': Tool open w/weak blow for 1 hr & 20 mins. Rec 90' drilling mud, 125' water cut mud & 270' brackish water. No oil or gas.
			DST #5 - 7675' to 8000': Tool open w/weak blow. Rec 837' drilling mud & 217' brackish water. No show oil or gas.

38.

GEOLOGIC MARKERS

NAME	MEAS. DEPTH	TOP
Verbally given to USGS November 3, 1970.		