

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE

(See other instructions on reverse side)

Form approved.  
Budget Bureau No. 42-R355.5

Copy to SF ✓

## WELL COMPLETION OR RECOMPLETION REPORT AND LOG \*

1a. TYPE OF WELL: OIL WELL  GAS WELL  DRY  Other **Water Injection**

b. TYPE OF COMPLETION:

NEW WELL  WORK OVER  DEEP-EN  PLUG BACK  DIFF. RESVR.  Other \_\_\_\_\_

2. NAME OF OPERATOR

**Anadarko Production Company** ✓

3. ADDRESS OF OPERATOR

**P. O. Box 67, Loco Hills, New Mexico 88255**

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)\*

**RECEIVED 1980' PBL & 2080' PBL Sec. 6, T 18S, R 29E Eddy County, New Mexico**At top prod. interval reported below **Same**NOV 23 1976  
At total depth **Same**

14. PERMIT NO.

DATE ISSUED

12. COUNTY OR PARISH

13. STATE

**Eddy New Mexico**

O. C. C.

ARTESIA OFFICE

15. DATE SPUN  
**8-20-76**16. DATE T.D. REACHED  
**8-25-76**17. DATE COMPL. (Ready to prod.)  
**11-8-76 RECEIVED**18. PERFORATIONS (DF, RBK, RT, GR, ETC.)\*  
**3616.2 GL**19. ELEV. CASINGHEAD  
**3617**20. TOTAL DEPTH, MD & TVD  
**2750'**

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

22. IF MULTIPLE COMPL., HOW MANY\*

NOV 22 1976

23. INTERVALS DRILLED BY

ROTARY TOOLS

CABLE TOOLS

**X**

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

**Grayburg**U. S. GEOLOGICAL SURVEY  
ARTESIA, NEW MEXICO

25. WAS DIRECTIONAL SURVEY MADE

**Yes**

26. TYPE ELECTRIC AND OTHER LOGS RUN

**Gamma Ray Compensated Neutron (Cased Hole).**

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
<b>8 5/8"</b>	<b>28#</b>	<b>373' KB</b>	<b>12 1/4"</b>	<b>150 sx.</b>		<b>None</b>
<b>4 1/2"</b>	<b>10.5#</b>	<b>2750' KB</b>	<b>7 7/8"</b>	<b>250 sx.</b>		<b>None</b>

29.

LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)

30.

TUBING RECORD

SIZE	DEPTH SET (MD)	PACKER SET (MD)
<b>2 3/8"</b>	<b>2381'</b>	<b>2381'</b>

31. PERFORATION RECORD (Interval, size and number)

**Metax: 2466-70, 2478-82, 2494-98, 2503-08, 2520-24, 2532-38, 2540-44, 2564-68 @ 2 SFF.**  
**Premier: 2603-10, 2613-20, 2634-38, 2649-52, 2658-66 @ 2 SFF.**

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
<b>2466-2666</b>	<b>3150 Gals 15% HCL Acid</b>

33.\*

PRODUCTION

DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)				WELL STATUS (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 **Original Signed By Jerry E. Buckles** TITLE **Area Supervisor** DATE **Nov. 16, 1976**

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

POSTER ID 2-116  
11-26-116

## 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	DESCRIPTION, CONTENTS, ETC.	NAME
	BOTTOM		MEAS. DEPTH
			TRUE VERT. DEPTH
<p>Yates 7 Rivers Queen Grayburg San Andres</p>	<p>0 130 280 755 910 1270 1920 2300 2690</p>	<p>Sand, Caliche, Red Shale Anhydrite, Red Shale Salt Anhydrite, Sand Sand, Anhydrite, Dolomite " " " " " " Sand, Sandy Dolomite Lime</p>	<p>TOP</p>