

copy to SG

UNITED STATES DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

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

5. LEASE DESIGNATION AND SERIAL NO.  
NM-0415688-A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME  
OLD INDIAN DRAW UNIT

7. UNIT AGREEMENT NAME  
OLD INDIAN DRAW

8. FARM OR LEASE NAME  
OLD INDIAN DRAW UNIT

9. WELL NO.  
7

10. FIELD AND POOL, OR WILDCAT  
INDIAN DRAW - DELAWARE

11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA  
18-22-28 NMPM

12. COUNTY OR PARISH  
EDDY

13. STATE  
NM

WELL COMPLETION OR RECOMPLETION REPORT AND LOG\*

1a. TYPE OF WELL: OIL WELL  GAS WELL  DRY  Other

b. TYPE OF COMPLETION: NEW WELL  WORK OVER  DEEP-EN  PLUG BACK  DIFF. RESVR.  Other

2. NAME OF OPERATOR  
AMOCO PRODUCTION COMPANY

3. ADDRESS OF OPERATOR  
P.O. DRAWER A, LEVELLAND, TEXAS 79336

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)\*  
At surface 2323' FNL x 1974' FWL SEC. 18 (Unit F, SE/4 NW/4)  
At top prod. interval reported below  
At total depth

14. PERMIT NO. DATE ISSUED

15. DATE SPUDDED 4-10-76 16. DATE T.D. REACHED 4-18-76 17. DATE COMPL. (Ready to prod.) 5-1-76 18. ELEVATION(S) (DF, RKB, RT, GR, ETC.)\* 3091' R.D.B 19. ELEV. CASINGHEAD

20. TOTAL DEPTH, MD & TVD 3457' 21. PLUG, BACK T.D., MD & TVD 3457' 22. IF MULTIPLE COMPL., HOW MANY\* 23. INTERVALS DRILLED BY 0-TD 24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)\* 3280-3290' DELAWARE 25. WAS DIRECTIONAL SURVEY MADE

26. TYPE ELECTRIC AND OTHER LOGS RUN SONIC LOG, DUAL LL 27. WAS WELL CORED SIDE CORE

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

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
10 3/4"	40.48#	410'	14 3/4"	500 Sx CIRC.	
5 1/2"	15.5#-17#	3457'	7 7/8"	950 Sx	

29. LINER RECORD 30. TUBING RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					2 1/8"	3326	

31. PERFORATION RECORD (Interval, size and number) 32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
3280-3290'	2500 GAL 15% BD

33. PRODUCTION

DATE FIRST PRODUCTION	PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)	WELL STATUS (Producing or shut-in)
5-1-76	Pump	PRODUCING

  

DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
5-4-76	24	-	→	81	TSTM	31	TSTM

  

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 PERFORMED BY

35. LIST OF ATTACHMENTS  
NONE

36. I hereby certify that the foregoing and attached information is complete and correct as determined from available records  
SIGNED Ray W. Cox TITLE Administrative Assistant DATE 5-25-76

RECEIVED  
MAY 28 1976  
U.S. GEOLOGICAL SURVEY  
ARTESIA, NEW MEXICO

# 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.

1. 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: "Seeds 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 POROSITY ZONES:			38. GEOLOGIC MARKERS		
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			NAME	TOP	
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	MEAS. DEPTH	TRUE VERT. DEPTH
DELAWARE	3238'	3290'	OIL ZONE	2293'	
			BASE SALT	2382'	
			DELAWARE SAND	3234'	
			OLD INDIAN SAND		