

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.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL: OIL WELL ☐ GAS WELL ☒ DRY ☐ Other ☐		5. LEASE DESIGNATION AND SERIAL NO. NM 02-10347	
b. TYPE OF COMPLETION: NEW WELL ☐ WORK OVER ☐ DEEP-EN ☐ FEED BACK ☒ DIFF. RESVR. ☐ Other ☐		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
2. NAME OF OPERATOR Pen American Petroleum Corporation		7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR Box 68 - Hobbs, New Mexico - 88240		8. FARM OR LEASE NAME Federal "A"	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 660' E. 1930' SW, Sec. 33 (T14N, R10E, S14E) At top prod. interval reported below At total depth		9. WELL NO. 1	
14. PERMIT NO.		DATE ISSUED	
15. DATE SPUN 12-30-63	16. DATE T.D. REACHED	17. DATE COMPL. (Ready to prod.)	18. ELEVATIONS (DF, RKB, RT, GR, ETC.)*
20. TOTAL DEPTH, MD & TVD 9625	21. PLUG, BACK T.D., MD & TVD 1000'	22. IF MULTIPLE COMPL., HOW MANY*	19. ELEV. CASINGHEAD 100'
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 4746' - 4770' San Andres 1/2 SPT 4790' - 4810' San Andres 1/2 SPT			25. WAS DIRECTIONAL SURVEY MADE
26. TYPE ELECTRIC AND OTHER LOGS RUN NONE			27. WAS WELL CORED
28. CASING RECORD (Report all strings set in well)			
CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE
See Previous Records			
29. LINER RECORD			
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*
See Previous Records			
30. TUBING RECORD		PACKER SET (MD)	
SIZE	DEPTH SET (MD)	4652'	
2-1/2"	4654'		
31. PERFORATION RECORD (Interval, size and number)			
1746' - 1770' 1/2 SPT 1790' - 1810' 1/2 SPT			
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED	
4790-4810		1500 Gal Acid	
4746-4810		7000 Gal Acid	
33.* PRODUCTION			
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)	
1-12-64		Flowing	
DATE OF TEST		WELL STATUS (Producing or shut-in)	
1-14-64		Shut-In	
HOURS TESTED	CHOKER SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.
25/24"	25/24"	2635	
FLOW. TUBING PRESS.	CASING PRESSURE	GAS—MCF.	WATER—BBL.
650			
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)			
TEST WITNESSED BY			
35. LIST OF ATTACHMENTS Shut-In waiting pipeline connection			
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records			
SIGNED V. E. STALEY		TITLE Area Superintendent	
DATE 1-22-64			

*(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 agency.

[illegible]

Item 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Complete information and pressure coordinates should be listed on this form, see item 35.

Item 5: The depth measurement should be taken at the same location as reference (where not otherwise shown) for depth measurements given in other spaces on this form and in any attachments. Item 6: The date of completion should be entered in item 22, and in item 24 show the producing interval zone (multiple completion), so state in item 22, and in item 24 show the producing interval zone (multiple completion).

Item 18: Indicate which elevation is used as reference (where not otherwise shown) for depth measurements generally or Federal office for specific instructions.

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 intervals, top(s), bottom(s) and name(s) (if any) for each interval reported in item 33. Submit a separate report (page) on this form, adequately identified, for each additional data pertinent to such interval.

[illegible]

Item 29: "Sacks Cement": Attached supplemental report on this form for each interval to be separately produced. (See instruction for items 22 and 23 above.)

[illegible]