

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE

(See other in-
structions 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. MM-0257673	
b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other PSA				6. IF INDIAN, ALLOTTEE OR TRIBE NAME --	
2. NAME OF OPERATOR Coastal States Gas Producing Company				7. UNIT AGREEMENT NAME --	
3. ADDRESS OF OPERATOR P. O. Box 235, Midland, Texas 79701				8. FARM OR LEASE NAME Federal "24"	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 660' FS & EL, Sec. 24, T-9-S, R-35-E, Lea county, New Mexico At top prod. interval reported below At total depth				9. WELL NO. 1	
14. PERMIT NO. -- DATE ISSUED --				12. COUNTY OR PARISH Lea	
				13. STATE New Mexico	
15. DATE SPUDDED 12-30-70	16. DATE T.D. REACHED 1-29-71	17. DATE COMPL. (Ready to prod.) 2-2-71	18. ELEVATIONS (DF, REB, RT, GR, ETC.)* 4077.5' GR	19. ELEV. CASINGHEAD 4077.5'	
20. TOTAL DEPTH, MD & TVD 9726'	21. PLUG, BACK T.D., MD & TVD 5044'	22. IF MULTIPLE COMPL., HOW MANY* --	23. INTERVALS DRILLED BY →	ROTARY TOOLS X	CABLE TOOLS
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 4806-76' (San Andres)					25. WAS DIRECTIONAL SURVEY MADE Yes
26. TYPE ELECTRIC AND OTHER LOGS RUN SW Neutron Porosity, Laterolog, & GR-CCL					27. WAS WELL CORED Yes
28. CASING RECORD (Report all strings set in well)					
CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
13-3/8"	48#	400	17-1/2	425 sxs	--
8-5/8"	24, 32	4096	11	300 sxs	--
4-1/2"	10.5	5044	7-7/8	200 sxs	--
29. LINER RECORD			30. TUBING RECORD		
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE
					DEPTH SET (MD)
					PACKER SET (MD)
31. PERFORATION RECORD (Interval, size and number)			32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.		
			DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED	
			4806-76'	3000 gal. acid	
33.* PRODUCTION					
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)			WELL STATUS (Producing or shut-in) PSA
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD →	OIL—BBL.	GAS—MCF.
					WATER—BBL.
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 SW Neutron Porosity Log (2); Laterolog (2); Microlaterolog (2); Logarithmic Overlay (2) Form 9-331					
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records					
SIGNED ju R. Howard		TITLE Division Production Manager		DATE 2-9-71	

*(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 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	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH	TRUE VERT. DEPTH
San Andres	4072'	5325'	Cored 4803-4945'. Fractured w/show of oil & water	Yates San Andres Glorieta Abo Wolfcamp Permian	2775' 4072 5508 7703 8934 9302	