

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 _____

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

2. NAME OF OPERATOR
Tom L. Ingram

3. ADDRESS OF OPERATOR
POB 1757 - Roswell, New Mexico 88201

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*
At surface 660' FNL & 1980' FWL of Sec. 24

At top prod. interval reported below Same

At total depth Same

14. PERMIT NO. _____ DATE ISSUED _____

5. LEASE DESIGNATION AND SERIAL NO.
NM-044216-C

6. IF INDIAN, ALLOTTEE OR TRIBE NAME _____

7. UNIT AGREEMENT NAME _____

8. FARM OR LEASE NAME
Federal "E"

9. WELL NO.
1

10. FIELD AND POOL, OR WILDCAT
East Bluit San Andres

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

Sec. 24 - T3S - R37E

12. COUNTY OR PARISH
Roosevelt

13. STATE
New Mexico

15. DATE SPUDDED Re-spud 2/24/69 16. DATE T.D. REACHED 2/26/69 17. DATE COMPL. (Ready to prod.) 6/15/69 18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 4003 DF 19. ELEV. CASINGHEAD _____

20. TOTAL DEPTH, MD & TVD 4330 21. PLUG, BACK T.D., MD & TVD 4725 22. IF MULTIPLE COMPL., HOW MANY* _____ 23. INTERVALS DRILLED BY Sur-TD ROTARY TOOLS _____ CABLE TOOLS _____

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*
4668 - 4691 San Andres

25. WAS DIRECTIONAL SURVEY MADE
Totco Only by original Operator

26. TYPE ELECTRIC AND OTHER LOGS RUN
Gamma-Ray Neutron Log

27. WAS WELL CORED
Yes-by orig. Operator

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

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
8-5/8	32#	339	11"	375 sx	circ.
4-1/2	10.5#	4830	7-7/8"	200 sx	0

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					2-3/8	4550	4487

31. PERFORATION RECORD (Interval, size and number)

1 shot/foot @ 4668, 69, 73, 74, 75, 81, 4683, 35, 39 & 91

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
<u>4668 - 4691</u>	<u>A/2500 gals DS-30</u>
	<u>ReA/6000 gals. DS-30</u>

33.* PRODUCTION

DATE FIRST PRODUCTION 6/15/69 PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Flowing WELL STATUS (Producing or shut-in) Producing

DATE OF TEST 6/15/69 HOURS TESTED 24 CHOKE SIZE 32/64 PROD'N. FOR TEST PERIOD 8 OIL—BBL. 243 GAS—MCF. 0 WATER—BBL. 31000:1 GAS-OIL RATIO

FLOW. TUBING PRESS. 25 CASING PRESSURE 0 CALCULATED 24-HOUR RATE 8 OIL—BBL. 248 GAS—MCF. 0 WATER—BBL. 27 OIL GRAVITY-API (CORR.)

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

Vented

TEST WITNESSED BY
Tom L. Ingram

35. LIST OF ATTACHMENTS

Radioactivity Logs (2 copies)

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

SIGNED Tom L. Ingram TITLE Operator DATE 6/17/69

*(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
Surface sands, caliche & red beds	0	353		Yates	2709	
Red Beds, Sand & Shale	353	1390		San Andres	3969	
Red Beds, Anhy. & Shale	1390	2360				
Anhyd. & Salt	2360	2877				
Anhy. & Gyp	2877	3805				
Anhy. & Dol.	3805	4011				
Dolomite	4011	4830				

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPPLICATE
(Other instructions
reverse side)

Form approved.
Budget Bureau No. 42-R1424.

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐		5. LEASE DESIGNATION AND SERIAL NO. M-344216-C	
2. NAME OF OPERATOR Tom L. Ingram		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR Box 1757 - Roswell, New Mexico 88201		7. UNIT AGREEMENT NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 600' FWL & 1380' FWL of Sec. 24		8. FARM OR LEASE NAME Federal #E	
14. PERMIT NO.		9. WELL NO. 1	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4003 DF		10. FIELD AND POOL, OR WILDCAT East Bluff San Andres	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 24 - T3S - R37E	
		12. COUNTY OR PARISH Roosevelt	13. STATE New Mexico

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐	PULL OR ALTER CASING ☐
FRACTURE TREAT ☐	MULTIPLE COMPLETE ☐
SHOOT OR ACIDIZE ☐	ABANDON* ☐
REPAIR WELL ☐	CHANGE PLANS ☐
(Other) ☐	

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☒	REPAIRING WELL ☐
FRACTURE TREATMENT ☐	ALTERING CASING ☐
SHOOTING OR ACIDIZING ☐	ABANDONMENT* ☐
(Other) ☐	

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

5/4/69 Pumped 130 BH

6/11/69 Pulled rods, bottom hole pump & tubing. Set Halliburton E-Z drill retainer @ 4725. Squeezed perforations from 4742-4770 w/100 sx. Incor cement W/CFR-2. Max. pressure 3500 psi. Rev. out 2 bbls. cement. WOC 24 hrs. - tested-held OK.

18. I hereby certify that the foregoing is true and correct

SIGNED Tom L. Ingram TITLE Operator

DATE 6/17/69

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

APPROVED

DATE _____

JUN 10 1969

*See Instructions on Reverse Side

J. L. GORDON
ACTING DISTRICT ENGINEER

Instructions

General: This form is designed for submitting proposals to perform certain well operations, and reports of such operations when completed, as indicated, on Federal and Indian lands pursuant to applicable Federal law and regulations, and, if approved or accepted by any State, on all lands in such State, pursuant to applicable State law 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.

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 17: Proposals to abandon a well and subsequent reports of abandonment should include such special information as is required by local Federal and/or State offices. In addition, such proposals and reports should include reasons for the abandonment; data on any former or present productive zones, or other zones with present significant fluid contents not sealed off by cement or otherwise; depths (top and bottom) and method of placement of cement plugs; mud or other material placed below, between and above plugs; amount, size, method of parting of any casing, liner or tubing pulled and the depth to top of any left in the hole; method of closing top of well; and date well site conditioned for final inspection looking to approval of the abandonment.