

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 Temporary Aband.		5. LEASE DESIGNATION AND SERIAL NO. LC - 062471	
b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other Other		6. IF INDIAN, ALLOTTEE OR TRIBE NAME -	
2. NAME OF OPERATOR Cities Service Oil Company		7. UNIT AGREEMENT NAME -	
3. ADDRESS OF OPERATOR Box 69 - Hobbs, New Mexico		8. FARM OR LEASE NAME Government G	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 1980' FSL & 660' FWL Sec. 8-T8S-R35E Roosevelt County, New Mexico At top prod. interval reported below At total depth 1980' FSL & 660' FWL of Sec. 8-T8S-R35E, Roosevelt Co., New Mexico		9. WELL NO. 4	
14. PERMIT NO.		DATE ISSUED 8-25-64	
15. DATE SPUDDED 9-5-64		16. DATE T.D. REACHED 9-16-64	
17. DATE COMPL. (Ready to prod.) -		18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 4244 DF, 4236 Gr.	
19. ELEV. CASINGHEAD 4236		12. COUNTY OR PARISH Roosevelt	
20. TOTAL DEPTH, MD & TVD 4885		13. STATE New Mexico	
21. PLUG BACK T.D., MD & TVD 4850		10. FIELD AND POOL, OR WILDCAT Milnesand San Andres	
22. IF MULTIPLE COMPL., HOW MANY* -		11. SEC., T. R., M., OR BLOCK AND SURVEY OR AREA Sec. 8-T8S-R35E	
23. INTERVALS DRILLED BY →		12. COUNTY OR PARISH Roosevelt	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*		13. STATE New Mexico	
25. WAS DIRECTIONAL SURVEY MADE yes		14. PERMIT NO.	
26. TYPE ELECTRIC AND OTHER LOGS RUN Sonic-Gamma Ray, Microlaterolog, Laterlog		DATE ISSUED 8-25-64	
27. WAS WELL CORED yes		15. DATE SPUDDED 9-5-64	
28. CASING RECORD (Report all strings set in well)		16. DATE T.D. REACHED 9-16-64	
29. LINER RECORD		17. DATE COMPL. (Ready to prod.) -	
30. TUBING RECORD		18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 4244 DF, 4236 Gr.	
31. PERFORATION RECORD (Interval, size and number)		19. ELEV. CASINGHEAD 4236	
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.		20. TOTAL DEPTH, MD & TVD 4885	
33.* PRODUCTION		21. PLUG BACK T.D., MD & TVD 4850	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)		22. IF MULTIPLE COMPL., HOW MANY* -	
35. LIST OF ATTACHMENTS Sonic-Gamma Ray, Microlaterolog, Laterolog and Deviation Test.		23. INTERVALS DRILLED BY →	
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records		24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*	
SIGNED EL Hadden		25. WAS DIRECTIONAL SURVEY MADE yes	
TITLE District Supt.		26. TYPE ELECTRIC AND OTHER LOGS RUN Sonic-Gamma Ray, Microlaterolog, Laterlog	
DATE 10-23-64		27. WAS WELL CORED yes	

*(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:			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				
FORMATION	TOP	BOTTOM	NAME	MEAS. DEPTH
				TRUE VERT. DEPTH
San Andres A	4579	4885	Anhydrite Yates Queen San Andres SA -A Zone	2133 2679 3374 3862 4579
Core #1: 4592-4650 (58'). Rec. 56' dolo. w/anhydrite inclusions, dense w/sli bldg. oil (4594-96) hairline frac. w/sli bldg. oil. Salt water (4602-4625$\frac{1}{2}$) bldg. oil & gas (4625$\frac{1}{2}$-32$\frac{1}{2}$), bldg. oil & salt water w/small vugs(4633-40) Core #2: 4650-4708 (58') Rec. 58' dolo. & anhydrite w/so @ 4656-65, 4674-81, 4698-4701 & 4702-03. Core #3: 4708-4727 (19') Rec. 19' dolo. & anhydrite w/so @ 4718-19. Core #4: 4727-4785 (58') rec. 58' dolo & anhydrite w/so @ 4727-30, 4735-36, 4740-4742, 4751-67, & 4777-85.				