

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. C.LC-060978	
b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other _____		6. IF INDIAN, ALLOTTEE OR TRIBE NAME 64	
2. NAME OF OPERATOR El Chorro Exploration, Inc.		7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR c/o Oil Reports & Gas Services, Box 763, Hobbs, N. M.		8. FARM OR LEASE NAME Jacobs Federal	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 1980' FSL & 1909.5' FWL of Section 19 At top prod. interval reported below At total depth		9. WELL NO. 14	
14. PERMIT NO.		10. FIELD AND POOL, OR WILDCAT Undesignated	
DATE ISSUED		11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA Sec. 19, T8S, R35E	
15. DATE SPUNDED 11/27/63		12. COUNTY OR PARISH Roosevelt	
16. DATE T.D. REACHED 12/5/63		13. STATE N. M.	
17. DATE COMPL. (Ready to prod.) 12/25/63		18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 4244 KB	
19. ELEV. CASINGHEAD		20. TOTAL DEPTH, MD & TVD 4755	
21. PLUG, BACK T.D., MD & TVD 4740		22. IF MULTIPLE COMPL., HOW MANY*	
23. INTERVALS DRILLED BY →		24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 4650-78, 4700-24; San Andres	
25. WAS DIRECTIONAL SURVEY MADE Yes		26. TYPE ELECTRIC AND OTHER LOGS RUN Gamma Ray - Neutron	
27. WAS WELL CORED No		28. CASING RECORD (Report all strings set in well)	
29. LINER RECORD		30. TUBING RECORD	
31. PERFORATION RECORD (Interval, size and number) 4650-78, 4700-24 J-2 Jet charge		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC. DEPTH INTERVAL (MD) 4650-4724 AMOUNT AND KIND OF MATERIAL USED 1000 gal 15% DS-30 acid, 20,000 gal oil, 20,000# sand, 500# adomite	
33.* PRODUCTION		34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Sold	
DATE FIRST PRODUCTION 12/25/63		TEST WITNESSED BY Claude Vinson	
PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) 2" X 1 1/2" X 16' HF metal to metal		35. LIST OF ATTACHMENTS 2 copies electric log	
WELL STATUS (Producing or shut-in) Producing		36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records	
DATE OF TEST 12/25/63		SIGNED H. L. Smith	
HOURS TESTED 24		TITLE Agent	
CHOKE SIZE Pump		DATE 12/31/63	
PROD'N. FOR TEST PERIOD →			
OIL—BBL. 160			
GAS—MCF. no test			
WATER—BBL. 20			
OIL GRAVITY-API (CORR.) 29.8			
FLOW. TUBING PRES.			
CASING PRESSURE			
CALCULATED 24-HOUR RATE →			
OIL—BBL. 160			
GAS—MCF. no test			
WATER—BBL. 20			

*(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.

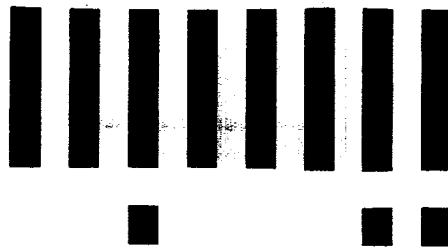
Item 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

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
No cores cut.				Anhydrite	2182	
No drill stem tests.				Salt	2280	
San Andres	4650	4724	Lime. San Andres Porosity	San Andres	3917	



LTR



Job separation sheet

NUMBER OF COPIES RECEIVED	
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LAND OFFICE	
TRANSPORTER	OIL GAS
PRODUCTION OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION

(Form C-104)
Revised 7/1/57

Santa Fe, New Mexico

REQUEST FOR (OIL) - (GAS) ALLOWABLE

DEC 31 8 54 AM '63
New Well
HOBBS, N.M.

This form shall be submitted by the operator before an initial allowable will be assigned to any completed Oil or Gas well. Form C-104 is to be submitted in QUADRUPPLICATE to the same District Office to which Form C-101 was sent. The allowable will be assigned effective 7:00 A.M. on date of completion or recompletion, provided this form is filed during calendar month of completion or recompletion. The completion date shall be that date in the case of an oil well when new oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

Hobbs, New Mexico

December 31, 1963

(Place)

(Date)

WE ARE HEREBY REQUESTING AN ALLOWABLE FOR A WELL KNOWN AS:

El Chorro Exploration, Inc. Jacobs Federal, Well No. 14, in NE 1/4 SW 1/4,
(Company or Operator) (Lease)

K, Sec. 19, T. 8 S, R. 35 E, NMPM, Undersaturated (Milnesand-San Andres)
Unit Letter

Roosevelt

County. Date Spudded 11/27/63

Date Drilling Completed 12/5/63

Please indicate location:

Elevation 4244 KB Total Depth 4755 PBD 4740

Top Oil/Gas Pay 4650 Name of Prod. Form. San Andres

PRODUCING INTERVAL -

Perforations 4650-78, 4700-24

Open Hole Depth Casing Shoe 4755 Depth Tubing 4737

OIL WELL TEST -

Natural Prod. Test: bbls.oil, bbls water in hrs, min. Size

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of Choke load oil used): 160 bbls.oil, 20 bbls water in 24 hrs, no min. Size pump

GAS WELL TEST -

Natural Prod. Test: MCF/Day; Hours flowed Choke Size

Method of Testing (pitot, back pressure, etc.):

Test After Acid or Fracture Treatment: MCF/Day; Hours flowed

Choke Size Method of Testing:

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): See remarks

Casing Press. 3500# Tubing Press. Date first new oil run to tanks 12/25/63

Oil Transporter Magnolia Pipe Line Company

Gas Transporter Sinclair Oil & Gas Company

Remarks: 1,000 gal 15% DS-30 acid, 20,000 gal lease crude, 20,000# sand, 500# addomite, 75 ball sealers.

See attachment for deviation surveys.

I hereby certify that the information given above is true and complete to the best of my knowledge.

Approved: 19.

El Chorro Exploration, Inc.
(Company or Operator)

By: [Signature]
(Signature)

OIL CONSERVATION COMMISSION

By: [Signature]

Title

Title. Agent

Send Communications regarding well to:

Name. El Chorro Exploration, Inc.

Address. % OIL REPORTS & GAS SERVICES
BOX 763 HOBBS, NEW MEXICO