

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. LC-060978	
b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other ☐		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
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, New Mexico		8. FARM OR LEASE NAME Jacobs Federal	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 660' FSL & 625' FWL of Section 19 At top prod. interval reported below At total depth		9. WELL NO. 15	
14. PERMIT NO.		DATE ISSUED	
15. DATE SPUNDED 2/25/64		16. DATE T.D. REACHED 3/7/64	
17. DATE COMPL. (Ready to prod.) 3/24/64		18. ELEVATIONS (DF, RKE, RT, GR, ETC.)* 4243 KB	
19. ELEV. CASINGHEAD		20. TOTAL DEPTH, MD & TVD 4725	
21. PLUG, BACK T.D., MD & TVD 4710		22. IF MULTIPLE COMPL., HOW MANY*	
23. INTERVALS DRILLED BY 0-4725		ROTARY TOOLS	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 4640-76, 4694-4705, San Andres		CABLE TOOLS	
25. WAS DIRECTIONAL SURVEY MADE Yes		26. TYPE ELECTRIC AND OTHER LOGS RUN Gamma Ray	
27. WAS WELL CORED No		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		24#	
365		12 1/4	
225 sacks Class A		none	
4 1/2		10.5#	
4724		7 7/8	
200 sacks Class C		none	
29. LINER RECORD		30. TUBING RECORD	
SIZE		TOP (MD)	
BOTTOM (MD)		SACKS CEMENT*	
SCREEN (MD)		SIZE	
DEPTH SET (MD)		PACKER SET (MD)	
2 3/8		4677	
31. PERFORATION RECORD (Interval, size and number) 4640-76, 4694-4705 J-2 Jet Charge		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED	
4640-4705		1,000 gal 15% H ₂ SO ₄ acid, 20,000 gal lse oil, 20,000# sand, 500# admixite	
33.* PRODUCTION		DATE FIRST PRODUCTION 3/24/64	
PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) 2" x 1 1/2" x 16" insert pump		WELL STATUS (Producing or shut-in) producing	
DATE OF TEST 3/24 & 3/25		HOURS TESTED 24	
CHOKE SIZE pump		PROD'N. FOR TEST PERIOD 212	
OIL—BBL. 212		GAS—MCF. no test	
WATER—BBL. none		GAS-OIL RATIO no test	
FLOW. TUBING PRESS. 212		CASING PRESSURE no test	
CALCULATED 24-HOUR RATE 212		WATER—BBL. none	
OIL GRAVITY-API (CORR.) 29.2		34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Sold	
TEST WITNESSED BY Claude Vinson		35. LIST OF ATTACHMENTS 2 copies electric log	
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records		SIGNED H. L. Smith TITLE Agent DATE 3/26/64	

*(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 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	TOP TRUE VERT. DEPTH
No cores cut				Anhydrite	2190	
No drill stem tests				Salt	2285	
San Andres	4640	4705	Line. San Andres Porosity	San Andres	3920	