

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.

5. LEASE DESIGNATION AND SERIAL NO.

NM 0108997(A)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

J.F. FARRELL - USA

9. WELL NO.

10. FIELD AND POOL OR WILDCAT

CHAUVERCO SAN ANDRES

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

28-7-33 NMPM

12. COUNTY OR
PARISH

ROOSEVELT

13. STATE

N.M.

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 ☐

2. NAME OF OPERATOR

American Petroleum Corp.

3. ADDRESS OF OPERATOR

Box 68, Hobbs N.M. 88240

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*

At surface 660 FSL X 660 FWL, Sec. 28 (UNIT M, SW/4 SW/4)

At top prod. interval reported below

At total depth

14. PERMIT NO.

DATE ISSUED

15. DATE SPUDDED

3-15-65

16. DATE T.D. REACHED

9-24-65

17. DATE COMPL. (Ready to prod.)

9-29-65

18. ELEVATIONS (DF, RKB, RT, GR, ETC.)*

4432' RDB

19. ELEV. CASINGHEAD

20. TOTAL DEPTH, MD & TVD

4411'

21. PLUG, BACK T.D., MD & TVD

4404'

22. IF MULTIPLE COMPL.,
HOW MANY*23. INTERVALS
DRILLED BY

ROTARY TOOLS

CABLE TOOLS

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*

4262'-4392' - SAN ANDRES

25. WAS DIRECTIONAL
SURVEY MADE

No

26. TYPE ELECTRIC AND OTHER LOGS RUN

Density Log, Focused Log, Computed Porosity

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
8 5/8"	24#	440'	11"	250	
4 1/2"	9.5#	4411'	7 7/8"	300	

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					2 3/8	4257'	

31. PERFORATION RECORD (Interval, size and number)

4262', 4276', 4283', 4292', 4305'
4338', 4390', 4392' w/ 1 SPF

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
4262-4392	2500 gal acid
	20600 gal oil w/ 15,500# Sand.

33.* PRODUCTION

DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)					WELL STATUS (Producing or shut-in)	
10-9-65		PUMP					PRODUCING	
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO	
10-9-65	24	—	→	78	NA	0	NA	
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)		
—	—	→				29°		

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

VENTED

TEST WITNESSED BY

M.L. CLAIBORNE

35. LIST OF ATTACHMENTS

NONE

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

J. L. STALEY

TITLE Area Supt

DATE 10-11-65

* (See instructions and spaces for Additional Data on Reverse Side)

INSTRUCTIONS

37. This form is designed for submitting a complete and correct well completion report and on all types of lands on which a Federal agency or a State agency, or both, have an interest. It is to be used in accordance with the instructions contained in the use of this form and the number of copies to be made and submitted to the Federal and/or State agency or agencies, or both, shall be determined by the instructions of the Federal and/or State agency or agencies, or both, in the instructions. See instructions on items 22 and 24, and 33, below regarding separate reports for separate completions. If the well is completed in a single interval, the completion report should be submitted, copies of all currently available logs (including logs of logs, and logs of logs, etc.), formation logs, pressure logs, 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 36: 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 37: 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.

Item 38: Indicate the interval from which the well is completed for separate production from more than one interval zone (multiple completion), so that 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 38. 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 39: 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			
FORMATION		TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH	TRUE VERT. DEPTH
SAN ANTONIO		4262	4392	O.I. Producing Zone	YATES	2280	
					QUEEN	2990	
					SAN ANTONIO	3465	