

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 *

5. LEASE DESIGNATION AND SERIAL NO.

N.M. 0145685

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

USA RUSSELL E. HORTON

9. WELL NO.

30

10. FIELD AND POOL, OR WILDCAT

MILNESAND SAN ANDRES

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

29-8-35 N.M.PM

12. COUNTY OR
PARISH

ROOSEVELT

13. STATE

N.M.

1a. TYPE OF WELL: OIL WELL ☒ GAS WELL ☐ DRY ☐ Otherb. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVB. ☐ Other

2. NAME OF OPERATOR

Petrochem Corp.

3. ADDRESS OF OPERATOR

Box 68, Hobbs, N.M.

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

At surface

2310' FSL X 1650' FWL, Sec. 29, (Unit K, N 1/4 SW 1/4)

At top prod. interval reported below

At total depth

14. PERMIT NO.

DATE ISSUED

15. DATE SPUDDED

3-8-65

16. DATE T.D. REACHED

3-17-65

17. DATE COMPL. (Ready to prod.)

3-21-65

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

4219' RDB

19. ELEV. CASINGHEAD

20. TOTAL DEPTH, MD & TVD

4720'

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

4719'

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

ROTARY TOOLS

CABLE TOOLS

O-TD

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

4696'-4716' San Andres

25. WAS DIRECTIONAL
SURVEY MADE

No

26. TELLURIC AND OTHER LOGS RUN

Gamma Ray-Neutron

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 #	397'	12 1/4"	225 Sx. Circ.	
4 1/2"	9.5 #	4720'	7 7/8"	250 Sx.	

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					2 3/8"	4717'	

31. PERFORATION RECORD (Interval, size and number)

4696-4716' w/ 2JSPF	32.	ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
	DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED	
	4696-4716	750 gal. acid	

33.*

PRODUCTION

DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)				WELL STATUS (Producing or shut-in)	
3-21-65		Swabbing				Producing	
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
3-22-65	19	—	→	140	NA	88 BBL 52 BBL	NA
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)	
—	—	→	177	NA	NA	27°	

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

Sold - Sinclair Oil & Gas Co.	TEST WITNESSED BY
None	M.R. Frazier

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

Original Signed by: V. E. STALLEY TITLE: Area Supt. DATE: 3-22-65

*(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 POROSITY ZONES: SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF; CORED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CEMENT 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
	4696	4716	Oil & Gas Prod. Zone	Anthony	2192	
				Sam Lindsay	3935	

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE*
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R-424.

5. LEASE DESIGNATION AND SERIAL NO.
NM 0145685
6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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 <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR <i>Pan American Petroleum Corp.</i>	8. FARM OR LEASE NAME <i>W. Russell E. Horton</i>
3. ADDRESS OF OPERATOR <i>Box 68, Hobbs, N.M.</i>	9. WELL NO. <i>30</i>
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface <i>2310' FSL x 1650' FWL, Sec. 29 (Unit K, NE 1/4 SW 1/4)</i>	10. FIELD AND POOL, OR WILDCAT <i>MILNE AND SAN ANDRES</i>
14. PERMIT NO.	11. SEC., T., R., M., OR BLM. AND SURVEY OR AREA <i>29-8-35 NMPM</i>
15. ELEVATIONS (Show whether DF, RT, GR, etc.) <i>4219' RDB</i>	12. COUNTY OR PARISH <i>ROOSEVELT</i>
	13. STATE <i>N.M.</i>

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) <input type="checkbox"/>	

SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input checked="" type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
(Other) <input type="checkbox"/>	

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.)

On 3-18-65, 4 1/2" OD 9.5 # J-55 STC Casing was set at TD, 4720', with 250 sx. Incon. Tested casing with 1500 psi for 30 minutes. Test O.K. Perforated San Andres 4696-4716 w/21SPF. Acidized with 750 gallons. Swabbed in and potentialed.

On PT, well swabbed 140 BO x 88 BLW x 52 BNW in 19 hours.

CTD-4720', PBD-4719'. 4 1/2" CSA 4720'. TRAY 4696'. 2" T69 @ 4717', San Andres.

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

SIGNED [Signature] TITLE Area Supt DATE 3-22-65

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

SGS
18
P.

APPROVED

*See Instructions on Reverse Side

MAR 23 1965

J. L. GORDON
ACTING DISTRICT ENGINEER