

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 ☐	
b. TYPE OF COMPLETION:		NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other ☐	
2. NAME OF OPERATOR <u>Sunny Mobil Oil Company, Inc.</u>			
3. ADDRESS OF OPERATOR P. O. Box 1800, Hobbs, New Mexico 88240			
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 660' FSL & 660' FEL, Sec. 19, T-8S, R-35E At top prod. interval reported below Same At total depth Same			
14. PERMIT NO.		DATE ISSUED 11-5-64	
15. DATE SPUDDED 11-20-64		16. DATE T.D. REACHED 11-29-64	
17. DATE COMPL. (Ready to prod.) 12-2-64		18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 4224 DF	
19. ELEV. CASINGHEAD		20. TOTAL DEPTH, MD & TVD 4800	
21. PLUG, BACK T.D., MD & TVD 4766		22. IF MULTIPLE COMPL., HOW MANY*	
23. INTERVALS DRILLED BY →		ROTARY TOOLS 0-4800	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 4658-4736		25. WAS DIRECTIONAL SURVEY MADE No	
26. TYPE ELECTRIC AND OTHER LOGS RUN Laterolog 2400-4786 - Acoustic GR 368-4786		27. WAS WELL CORED Yes	
28. CASING RECORD (Report all strings set in well)			
CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE
8-5/8	24	367	12-1/4
4-1/2	9.5	4800	7-7/8
CEMENTING RECORD		AMOUNT PULLED	
Cem w/350 sx Incor Neat			
Cem w/1760 sx Incor Neat			
29. LINER RECORD			
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*
30. TUBING RECORD			
SIZE	DEPTH SET (MD)	PACKER SET (MD)	
31. PERFORATION RECORD (Interval, size and number)			
4658-4738 - 18 - 1" Jet Holes			
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED	
4658-4738		1000 Gals 15% NE Acid	
33. PRODUCTION			
DATE FIRST PRODUCTION 12-2-64		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Flowing	
WELL STATUS (Producing or shut-in) Producing			
DATE OF TEST 12-2-64	HOURS TESTED 24	CHOKE SIZE 20/64"	PROD'N. FOR TEST PERIOD →
OIL—BBL. 172	GAS—MCF. 430	WATER—BBL. 0	GAS-OIL RATIO 250
FLOW. TUBING PRESS. 100	CASING PRESSURE ---	CALCULATED 24-HOUR RATE →	OIL—BBL. 172
GAS—MCF. 430	WATER—BBL. 0	OIL GRAVITY-API (CORR.) 27.9	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Sold			
35. LIST OF ATTACHMENTS TEST WITNESSED BY W. A. Mosley			
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records			
SIGNED <u>J. J. McDaniel</u>		TITLE <u>Group Supervisor</u>	
DATE <u>12/3/64</u>			

*(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, for lands on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

Item 16: 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; CORDED 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
Red Bed	0	2149	Core #1 - Lime - 4646-4701 - Rec. 46' oil show	Rustler Anhy	2180	
Anhydrite	2149	2926	Core #2 - Lime - 4701-4756 - Rec. 34' oil show	Yates	2694	
Anhydrite & Shale	2926	3900		Queen	3397	
Lime	3900	4800		San Andres	3910	
				San Andres "A" Mkr	4632	