

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 ☐						
b. TYPE OF COMPLETION:		NEW WELL ☒	WORK OVER ☐	DEEP-EN ☐	PLUG BACK ☐	DIFF. BEVR. ☐	Other ☐				
2. NAME OF OPERATOR Security Mobil Oil Company, Inc.											
3. ADDRESS OF OPERATOR Box 1800, Hobbs, New Mexico											
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 1720' FSL & 660' FEL, Sec. 19, T-8S, R-35E At top prod. interval reported below Same At total depth Same											
12. PERMIT NO.				DATE ISSUED 11-25-64		13. COUNTY OR PARISH Roosevelt		18. STATE New Mexico			
15. DATE SPUDDED 11-30-64		16. DATE T.D. REACHED 12-7-64		17. DATE COMPL. (Ready to prod.) 12-22-64		18. ELEVATIONS (DF, REB, RT, GR, ETC.)* DF 4222		19. ELEV. CASINGHEAD			
20. TOT. DEPTH, MD & TVD 4775		21. PLUG, BACK T.D., MD & TVD 4746		22. IF MULTIPLE COMPL., HOW MANY*		23. INTERVALS DRILLED BY 0-4775		ROTARY TOOLS -			
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 4677-4740								25. WAS DIRECTIONAL SURVEY MADE No			
26. TYPE ELECTRIC AND OTHER LOGS RUN GR Neutron 0-4747								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"		29#		357		12 1/4		Cem. w/350 sx. Incon Neat			
4 1/2"		9.5#		4775		7 7/8		Cem. w/1645 sx. Incon Neat			
29. LINER RECORD										30. TUBING RECORD	
SIZE		TOP (MD)		BOTTOM (MD)		SACKS CEMENT*		SCREEN (MD)		SIZE	
										DEPTH SET (MD)	
										PACKER SET (MD)	
31. PERFORATION RECORD (Interval, size and number) 4677-4740 23 - 1 Jet holes										32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
DEPTH INTERVAL (MD)					AMOUNT AND KIND OF MATERIAL USED						
4677-4740					1000 gal 15% NE Acid + 20 BS						
4677-4740					20,000 gal. rebind oil + 30,000#						
					20-40 sand + 18 RCN ball sealers						
33. PRODUCTION											
DATE FIRST PRODUCTION 12-22-64		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Swab Test				WELL STATUS (Producing or shut-in) Producing					
DATE OF TEST 12-22-64		HOURS TESTED 24		CHOKE SIZE -		PROD'N. FOR TEST PERIOD 288		OIL—BBL. 526		WATER—BBL. 24	
FLOW. TUBING PRESS. -		CASING PRESSURE -		CALCULATED 24-HOUR RATE 288		OIL—BBL. 526		GAS—MCF. 24		WATER—BBL. 27.4	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Sold										TEST WITNESSED BY W. A. Mosley	
35. LIST OF ATTACHMENTS											
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records											
SIGNED				TITLE Group Supervisor				DATE 12-23-64			

*(See Instructions and Spaces for Additional Data on Reverse Side)

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 analysts, 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.)

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INSTRUCTIONS

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LOG #	
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UNITED STATES DEPARTMENT OF THE INTERIOR GEOLOGICAL SURVEY WELL COMPLETION OR RECOMPLETION REPORT	
NAME Rustler Yates Queen San Andres San Andres "A" MKR	MEAS. DEPTH 2195 2688 3395 3910 4622
TRUE VERT. DEPTH 4622	
LOG 1-30-64 12-7-64 12-22-64	
DESCRIPTION, CONTENTS, ETC. 1-30-64 12-7-64 12-22-64	
ITEM 33: 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	
FORMATION Red Bed & Shale Anhy & Shale Anhy & Salty Sh Anhy & Shale Anhy & Lime Lime	TOP 2200 2280 3355 3854 3969
BOTTOM 2200 2280 3355 3854 3969 4775	SHOT, PR. CTR. 1000 2000 3000 4000 5000