

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 ☐		5. LEASE DESIGNATION AND SERIAL NO. 10-062509-A	
b. TYPE OF COMPLETION: ☐ NEW WELL ☐ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ REVS. ☐ Other ☐		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
2. NAME OF OPERATOR Jack L. McClellan		7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR P. O. Box 846, Roswell, New Mexico		8. FARM OR LEASE NAME Mark Federal	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 560' E. & 600' N. At top prod. interval reported below At total depth		9. WELL NO. 1	
14. PERMIT NO.		DATE ISSUED	
15. DATE SPUNDED 11/31/63		16. DATE T.D. REACHED 11/23/63	
17. DATE COMPLETION (Ready to prod.) December 1, 1963		18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 4015 DF	
19. FLEV. CASINGHEAD 4201		10. FIELD AND POOL OR WILDCAT Wildcat	
20. TOTAL DEPTH, MD & TVD 4346		21. PLUG BACK T.D., MD & TVD 4302	
22. IF MULTIPLE COMPLETIONS, HOW MANY*		23. INTERVALS DRILLED BY ROTARY TOOLS CABLE TOOLS	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 4211 - 4221 San Andres		25. WAS DIRECTIONAL SURVEY MADE Yes	
26. TYPE ELECTRIC AND OTHER LOGS RUN Geologic, Microlaterolog, Laterolog & Moveable Oil Plot		27. WAS WELL CORED Yes	
CASING RECORD (Report all strings set in well)			
CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE
3-9/16"	24	390	10-3/4"
2-1/2"	15.5	4346	7-7/8"
CEMENTING RECORD			
AMOUNT PULLED			
175 sacks (Circ.)			
24 sacks			
LINER RECORD			
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*
SCREEN (MD)			
TUBING RECORD			
SIZE	DEPTH SET (MD)	PACKER SET (MD)	
2"	4176	4176	
31. PERFORATION RECORD (Interval, size and number)			
4211, 4212, 4214, 4216, 4217, 4219			
4220, 4221 (1 shot/ft) .49"			
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED	
4211 - 4221		1500 gals. 15% HF Acid	
PRODUCTION			
DATE FIRST PRODUCTION December 1, 1963		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Flowing	
WELL STATUS (Producing or shut-in) Shut-in			
DATE OF TEST 12/5/63	HOURS TESTED 24	CHOKE SIZE 3/64	PROD. FOR TEST PERIOD
FLOW, TUBING PRESS. 350	CASING PRESSURE 0 (at 0)	CALCULATED 24-HOUR RATE	OIL—EBL. GAS—MCF. WATER—BBL. OIL GRAVITY-API (CORR.)
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Shut-in awaiting a gas line connection.			
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

Jack L. McClellan

TITLE

Operator

DATE

December 11, 1963

*(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			GEOLOGIC MARKERS		
SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF, CORED INTERVALS, AND ALL DRILL STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, OTHER TESTS, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES			US		
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH TRUE VERT. DEPTH
Oil Shale	4235	4234	Dolomite & anhydrite, bleeding core oil and gas - porous.	Yates	238
Oil Shale	4234	4233	Dolomite with good porosity - bleeding oil and gas.	Queen	233
Oil Shale	4233	4232	Dolomite & anhydrite. Excellent porosity. Some bleeding oil.		232
Oil Shale	4232	4231	Dolomite with excellent porosity, bleeding water.		231