COPY HABBS OFFICE C. C. C. 7 49 AN 265 Revised 1-1-65 NO. OF COPIES RECEIVED MAY 19 DISTRIBUTION 5a. Indicate Type of Lease SANTA FE NEW MEXICO OIL CONSERVATION COMMISSION State 🗶 Fee FILE WELL COMPLETION OR RECOMPLETION REPORT AND LOG 5. State Dil & Gas Lease No. U.S.G.S. 276 LAND OFFICE OPERATOR IG. TYPE OF WELL Unit Agreement Name GAS WELL DRY OTHER Farm or Lease Name h. TYPE OF COMPLETION 8. TATE X OTHER un ool, <u>or</u> Wildcat 10. Field and 88240 HAUELOO 80 FEET 1980 NORTH LINE AND FROM THE FEET FR 7-5 RGE. 33-E NMPM Z THE WESTLINE OF SEC. TWP. 18. Elevations (DF, RKB, RT, GR, etc.) 19. Elev. Cashinghead 15. Date Spudded 16. Date T.D. Reached 4-30-66 5.2.66 2 22. If Multiple Compl., How Many Back T.D. Intervals Drilled By Cable Tools **Rotary Tools** Depth 4385 4415 0· T Was Directional Survey Made 24. Producing Interval(s), of this completion Top, Bottom, Name 25. SAN 4182.4350 HNDRES 27. Was Well Cored Electric and Othe EUTRON 7 AMM CASING RECORD (Report all strings set in well) 28 DEPTH SET CEMENTING RECORD WEIGHT LB./FT. HOLE SIZE AMOUNT PULLED CASING SIZE 1 11 24 442 <u>250</u> 6 5 bòo 4415 G.SLINER RECORD 30. TUBING RECORD 29. DEPTH SET TOP BOTTOM SACKS CEMENT SCREEN SIZE PACKER SET SIZE 234 4354 ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC. 31. Perforation Record (Interval, size and number) 32. 4182-85, 4202.10, 17-19, 31-45, 52-54, DEPTH INTERVAL 65-67, 73-74, 86-36, 99.4301, 03-05, 4182-4350 35-50 W/2JSPF AMOUNT AND KIND MATERIAL USED 2000 9 2 acid Frac, 30000/05, 40,500 \* SAND 3000 \* BEADS 4335-60 000 gal acid PRODUCTION 33. Production Method (Flowing, gas lift, pumping - Size and type pump) Well Status (Prod. or Shut-in) Date First Production 5-12-66 OWING 20DUCING Gas-Oil Ratio Choke Size Prod'n. For Test Period Oil - Bbl. Gas -- MCF Water - Bbl. Hours Tested Date of Test 14/60 5-12.66 ĉ 6 1 Oil Gravity - API (Corr.) Calculated 24-Hour Rate MCF Water - Bbl. w Tubing Press. Casing Pressure Oil -- Bbl Gas 8 25.5 425 76 Csition of Gas (Sold, used for fuel, vented, etc., Test Witnessed By 34. Dispo CNT 35. List of hmients ONE 36. I hereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief. INA a - NEW 10 3-66 DATE TITLE 3 1 - il ilig ngg sa polisi 107

## INSTRUCTIONS

This form is to be filed with the appropriate District Office of the Commission not later than 20 days after the completion of any newly-drilled or deepened well. It shall be accompanied by one copy of all electrical and radio-activity logs run on the well and a summary of all special tests conducted, including drill stem tests. All depths reported shall be measured depths. In the case of directionally drilled wells, true vertical depths shall also be reported. For multiple completions, items 30 through 34 shall be reported for each zone. The form is to be filed in quintuplicate except on state land, where six copies are required. See Rule 1105.

## INDICATE FORMATION TOPS IN CONFORMANCE WITH GEOGRAPHICAL SECTION OF STATE

## Southeastern New Mexico Northwestern New Mexico T. Anhy T. Canyon \_\_\_\_\_T. Ojo Alamo\_ \_\_\_\_\_\_. T. Penn\_ "B" \_\_\_\_\_ T. Kirtland-Fruitland \_\_\_\_ Т. Salt \_ T. Strawn \_ \_\_\_\_ T. Penn. "C" T. Pictured Cliffs ..... R Salt т Atoka \_ T. Penn, "D" 0 T. Cliff House T. Т. Miss Yates \_ T. Leadville. \_\_\_\_\_ T. Menefee\_ Т. 7 Rivers Τ, Devonian T. Madison 0 T. Point Lookout T. . Т. Silurian . Oueen \_ T. Elbert ----- T. Mencos T. T. Grayburg Montoya \_ T. McCracken 24 20 \_\_\_\_\_ T. Gallup\_ Т. \_ Т. San Andres Simpson . \_ T. Ignacio Qtzte т. Glorieta \_ т. McKee\_ \_\_\_ Base Greenhorn \_ \_\_\_ T. Granite \_\_ T. Paddock. Т. Blinebry \_\_\_\_ \_\_\_\_\_ T. Gr. Wash \_\_\_\_ \_\_\_\_\_ T. Morrison \_\_\_ \_\_\_\_\_ T. Todalto\_ T. \_\_\_\_\_T. Granite \_\_ \_\_\_\_\_ T. . Tubb. T. Delaware Sand \_\_\_\_\_ T. Entrada \_ Т. Drinkard \_ \_\_\_\_\_ T. . Т. Abo. - T. T. Wolfcamp\_ \_\_\_\_\_ T. Chinle\_ . т. . \_\_\_\_\_ T. Permian\_ \_ T. \_ **-** T. T. Penn .... T Cisco (Bough C) \_\_\_\_ --- T. . \_\_\_\_ T. Penn "A"\_\_\_ \_ Т. .

## FORMATION RECORD (Attach additional sheets if necessary)

From	To	Thickness in Feet	Formation	From	То	Thickness in Feet	Formation
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Change in Ownership	Casinghead Gas Condens	ate	
change of ownership give name ad address of previous owner.			
in anniess of bleatons owner.			
ESCRIPTION OF WELL A	ND LEASE		
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Unit Letter;			
Line of Section 25	, Township 7.5 Range	33.E, NMPM, KOOS	COUNTY County
ESIGNATION OF TRANSP	ORTER OF OIL AND NATURAL GAS	8	Learning of all in forms in an to another
Name of Authorized Transporter o	f Oil 🛃 or Condensate 🗌	Address (Give address to which up)	proved copy of this form is to be sent)
THE FEDMIDAN ( DR	P (TRUCKS)	Boy 3119, Miala	ud Pras
Name of Authorized Transporter o	f Casinghead Gas 📋 or Dry Gas 📋	Address (Give address to which ap	proved copy of this form is to be sent)
	Unit Sec. Twp. Rge,	Is gas actually connected?	When
if well produces oil or liquids, give location of tanks.	7 25 7 33	No	
	d with that from any other lease or pool, g		
COMPLETION DATA			
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Designate Type of Comp Date Spudded 4-21-66 Perfortion: 4/82-85, 4/ 9-4301, 03-05 HOLE SIZE 11" 7/8° CEST DATA AND REQUES DIL WELL Date First New OII Run To Tank 5-12-66 Length of Test Actual Prod. During Test 54 GAS WELL Actual Prod. Test-MCF/D Testing Method (pitot, back pr.) CERTIFICATE OF COMPL hereby certify that the rules Commission have been complete to 043-NMOCC-4 1-013P 1-289 1-289	letion - (X) Date Compl. Ready to Prod. 5-2-66 Mame of Adducting Formation AMANDRES 207-10, 17-19, 31-45, 52-54, 35-50 TUBING, CASING, AND CASING & TUBING SIZE 85/8 4/2 ST FOR ALLOWABLE (Test must be af able for this der s Date of Test 5-12-66 Tubing Pressure 250 Oil-Bbis. Oil-Bbis. Length of Test Tubing Pressure Length of Test Tubing Pressure Length of Test Tubing Pressure Length of Test Tubing Pressure JANCE and regulations of the Oil Conservation tied with and that the information given to the best of my knowledge and belief.	Total Depth A415 Top Oil/Gas Pay A182 GS-G7, 73-74, 86-9 CEMENTING RECORD DEPTH SET A42 A415 Center recovery of total volume of load per recovery of total volume of load per full 24 hours) Producing Method (Flow, pump, ga FLOW Casing Pressure A25 Water-Bbls. DIL CONSEF APPROVED B TITLE This form is to be filed if this is a request for a well, this form must be accord tests taken on the well in ad All sections of this form able on new and recompleted Fill out Sections I, II,	P.B.T.D. 4385 Tubing Depth 4354 ', Depth Casing Shoe 4415 SACKS CEMENT 250 800 oil and must be equal to or exceed top allow is lift, etc.) Choke Size 14/64" Gas-MCF 51 (Arso Goe 25.** cgn Gravity of Condensate Choke Size Choke Size Choke Size RVATION COMMISSION , 19 , 19 in compliance with RULE 1104. Howable for a newly drifted or deepene mpanied by a tabulation of the deviation cordance with RULE 111. must be filled out completely for allow

The above are true to the best of my knowledge.

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COP

Area Superintendent.

Swork to this date, the 13th day of Mary, 1966. <u>Blublic Lue Alunter</u> Norman Poncie 10+ FOR LEA CO. N.M.

My Commission Expirel 2.5.70

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