

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY
JAN 17 11 08 AM '67

SUBMIT IN DUPLICATE.

(See other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R355.5.

5. LEASE DESIGNATION AND SERIAL NO.

NMI 0115592

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Alcorn

9. WELL NO.

2

10. FIELD AND POOL, OR WILDCAT

Milnesand-San Andres

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

Sec. 21-85-35E, N.M.P.M.

12. COUNTY OR PARISH
Roosevelt13. STATE
New Mexico1a. 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

Tom L. Ingram

3. ADDRESS OF OPERATOR

P. O. Box 1757 - Roswell, New Mexico

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

At surface 660' FSL 7 990' FUL, Sec. 21-85-35E, N.M.P.M.

At top prod interval reported below Same

At total depth Same

14. PERMIT NO.

DATE ISSUED

15. DATE SPOOLED

16. DATE T.D. REACHED

17. DATE COMPL. (Ready to prod.)

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

19. ELEV. CASINGHEAD

11-21-66

11-30-66

1-9-67

4197 GR

20. TOTAL DEPTH, MD & TVD

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

22. IF MULTIPLE COMPL., HOW MANY*

23. INTERVALS DRILLED BY

ROTARY TOOLS

CABLE TOOLS

4730

4720

0 to TD

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

4671-4697 - San Andres

25. WAS DIRECTIONAL SURVEY MADE

No

26. TYPE ELECTRIC AND OTHER LOGS RUN

Guard, Forxo, Acoustic Velocity

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	400	11"	250 sacks - circ.	
4-1/2"	11.6 & 9.50	4730	7-7/8" & 6-3/4"	250 sacks	

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					2-3/8"	4611	

31. PERFORATION RECORD (Interval, size and number)

2 shots per foot: 4671, 4676, 4681, 4685, 4689, 4697

.41" diameter

Total 12

32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
4671-4697	1000 gals Spearhead
	500 gals DS-30
	20,000 gals lease crude + 20,000 sand + 500# Adomite

33.* PRODUCTION

DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)					WELL STATUS (Producing or shut-in)	
1-9-67		Pumping - 1-1/2" Travelling Barrel					Producing	
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO	
1-9-67	24	-	→	35	18	81	514 to 1	
FLOW, TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)		
-	-	→	35	18	81	25		

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

Vented

TEST WITNESSED BY

Tom L. Ingram

35. LIST OF ATTACHMENTS

Hole Deviation Survey, 2 copies of all logs

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

SIGNED

TITLE

Operator

DATE 1-10-67

*(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: 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				38. GEOLOGIC MARKERS		
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH	TOP TRUE VERT. DEPTH
San Andres	4671	4697	Dolomite	Rustler Yates San Andres Pl Zone	2230 2713 3932 4518	

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HOOBS OFFICE O. C. C.

JAN 17 11 08 AM '67

HOLE DEVIATION SURVEY
TOM L. INGRAM NO. 2 ALCORN
ROOSEVELT COUNTY, NEW MEXICO

900 - $1/4^{\circ}$
1396 - $1/2^{\circ}$
1892 - $3/4^{\circ}$
2269 - $3/4^{\circ}$
2751 - $3/4^{\circ}$
3279 - $1-1/2^{\circ}$
3777 - $1-1/4^{\circ}$
4087 - $1-1/4^{\circ}$
4397 - 1°
4649 - $3/4^{\circ}$
4711 - $1/2^{\circ}$

STATE OF NEW MEXICO)
COUNTY OF CHAVES) SS.

I certify that this is a true and correct statement of the Hole Deviation for
the No. 2 Alcorn, Section 21, T-8-S, R-35-E, Roosevelt County, New Mexico.

By: Tom L. Ingram

Title: Operator

Sworn and subscribed to before me the undersigned authority on this 19th day
of December, 1966.

Joan Hayes
Notary Public

My Commission Expires: March 4, 1969