

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 dry holeb. TYPE OF COMPLETION:
NEW WELL ☐ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other _____2. NAME OF OPERATOR
FRANKLIN, ASTON & FAIR, INC.3. ADDRESS OF OPERATOR
P. O. Box 1090, Roswell, New Mexico 882014. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*
At surface **1980' FWL & 660' FNL Section 29-7S-36E**

At top prod. interval reported below

At total depth

14. PERMIT NO. _____ DATE ISSUED _____

5. LEASE DESIGNATION AND SERIAL NO.
NM 05319

6. IF INDIAN, ALLOTTEE OR TRIBE NAME _____

7. UNIT AGREEMENT NAME _____

8. FARM OR LEASE NAME
Featherstone Federal9. WELL NO.
110. FIELD AND POOL, OR WILDCAT
Undesignated11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA
Sec. 29-7S-36E, N.M.P.M.12. COUNTY OR PARISH
Roosevelt13. STATE
New Mexico15. DATE SPUDDED **4-12-67** 16. DATE T.D. REACHED **4-22-67** 17. DATE COMPL. (Ready to prod.) _____ 18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* **4140.6' GR** 19. ELEV. CASINGHEAD _____20. TOTAL DEPTH, MD & TVD **4320'** 21. PLUG, BACK T.D., MD & TVD _____ 22. IF MULTIPLE COMPL., HOW MANY* _____ 23. INTERVALS DRILLED BY **Surface - TD** 24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* _____25. WAS DIRECTIONAL SURVEY MADE
No (Totco Only)

26. TYPE ELECTRIC AND OTHER LOGS RUN

Gamma Ray Sonic, Lateral and MicroLateral27. WAS WELL CORED
No

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#	295' KB	12 1/4"	250 sx circ. to surface	None
5 1/2"	14#	4320' KB	7 7/8"	250 sx	1240'

LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					2"	Pulled	None

31. PERFORATION RECORD (Interval, size and number)

One shot per foot at: 4272', 4273', 4276', 4278', 4283', 4285', 4289', 4291', 4296', and 4300'

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
4272'-4300'	Treated w/3500 gallons acid.
4272'-4300'	Sand/oil fraced with 30,000 gal. oil and 30,000# sand.

PRODUCTION

33.* DATE FIRST PRODUCTION _____		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) _____				WELL STATUS (Producing or shut-in) PSA 9-30-67	
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) _____							TEST WITNESSED BY _____

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

Grant M. SmithTITLE **Geologist**DATE **10-4-67**

*(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.), formations 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: "Stacks 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
San Andres (Slaughter A) Anhydrite (Slaughter B) TD	3490' 4144' 4244' 4256' 4320'	4244' 4256' 4300'	Oil & Water	Rustler Yates Queen San Andres TD	2080' 2370' 3045' 3490' 4320'