| NO. OF COPIES RECEIV                  | E.D                              |   |   |                 |            |                                       |  | Form C-<br>Revised     |  |  |
|---------------------------------------|----------------------------------|---|---|-----------------|------------|---------------------------------------|--|------------------------|--|--|
| DISTRIBUTION                          |                                  |   |   |                 |            |                                       | (T   |                        |  |  |
| SANTA FE                              |                                  |   | MEXICO OIL                              |                 |            |                                       | Ī  | State                  | Type of Lease                                |  |
| FILE                                  |                                  | WELL COMPLE                                       | ETION OR R                              | ECOMPLE         | TION RE    | PORT AN                               | D LOG  |                        | Fee & Gas Lease No.                          |  |
| U.S.G.S.                              |                                  |   | ЭЕР                                     | 1 9 23          | #M 'ba     |                                       |  | K-39                   |  |  |
| LAND OFFICE                           |                                  |   |   |                 |            |                                       | 1  | (C=A                   |  |  |
| OPERATOR                              |                                  |   |   |                 |            |                                       |  |                        |  |  |
| la. TYPE OF WELL                      |                                  | <del>, , , , , , , , , , , , , , , , , , , </del> |   |                 |            |                                       |  | 7. Unit Agre           | eement Name                                  |  |
|                                       |                                  | GAS WELL  | DRY                                     | СТН             | ER         |                                       |  |                        |  |  |
| b. TYPE OF COMPLE                     | _                                | PLUG  | DIFF.                                   |                 |            |                                       | 1  |                        | _ease Name                                   |  |
| well over 2. Name of Operator         |                                  | EN BACK   | RESVR.                                  | стн             | ER         |                                       |  | Anderse<br>9. Well No. | n State                                      |  |
| Taylor 1                              | Pruitt                           |   |   |                 |            |                                       |  |                        | 2  |  |
| 3. Address of Operator                |                                  |   |   |                 |            |                                       | ] ;  | 0. Field on            | nd Pool, or Wildcat                          |  |
| <b>c/o 011</b><br>4. Location of Well | Reports &                        | Gas Service                                       | s, Box 7                                | 63, Hobbs       | , New      | Mexico                                |  | indes.                 | Chaveroo-SA                                  |  |
|                                       |                                  |   |   |                 |            |                                       |  |                        |  |  |
| UNIT LETTER                           | LOCATED                          | 1980 FEET P                                       | ROM THE                                 | outh LINE       | AND        | 980 FE                                | ET FROM  |                        |  |  |
|                                       |                                  |   |   |                 | 77777      | MILLE                                 |  | 12. County             |  |  |
| THE BASE LINE OF                      | sec. 36                          | TWP. 7 8 RG                                       | E. 32 E                                 | NMPM            |            | XIIII                                 |  | Rooseve                | ie (()()()()                                 |  |
| 15. Date Spudded                      | 16. Date T.D.                    | Reached 17. Date                                  | Compl. (Read)                           | to Prod.)       |            |                                       |  | , etc.) 19.            | Elev. Cashinghead                            |  |
| 7/23/67                               | 7/31/67                          | 8/4<br>ug Back T.D.                               | /67                                     |                 | -44        | 58 KB /                               | 11927  | e:                     |  |  |
| 20. Total Depth                       | 21. Pl                           | ug Back T.D.                                      | 22. If M                                | ultiple Compl., | How        | 23. Intervals<br>Drilled B            | Rotary   | Tools                  | Cable Tools                                  |  |
| 4306                                  |                                  | 296   |   | ·               |            |                                       |  | - TD                   |  |  |
| 24. Producing Interval                | s), of this comple               | etion - Top, Botton                               | ı, Name                                 |                 |            |                                       |  | 2                      | 25. Was Directional Survey<br>Made           |  |
| 4173 - 4280                           | San Andre                        | 18  |   |                 |            |                                       |  |                        | Yes  |  |
| 26. Type Electric and (               | ther Logs Run                    |   |   |                 |            |                                       |  | 27. W                  | as Well Cored                                |  |
| Gamma Ray,                            | Sonie, La                        | terolog, Mic                                      | rolateri                                | og, Densi       | ty, Po     | rosity                                |  |                        | No   |  |
| 28.                                   |                                  | CAS   | ING RECORD                              | (Report all str | ings set i | n well)                               |  |                        |  |  |
| CASING SIZE                           | WEIGHT LB                        | ./FT. DEPT  | SET                                     | HOLE SIZE       |            | CEMENT                                | ING RECO   | RD                     | AMOUNT PULLED                                |  |
| 8 5/8                                 | 5/8 24# 376 12 1/4 250           |   |   |                 |            |                                       | none   |                        |  |  |
| 4 1/2                                 | 9.5#                             | 4306  |   | 7 7/8           |            | 400                                   | <del></del>                                      |                        | none   |  |
| ·                                     |                                  |   |   |                 |            |                                       |  |                        |  |  |
|                                       | <u>l</u>                         | LINED DECORD                                      |   |                 |            |                                       |  | IDING DEG              | 000  |  |
| 29.                                   |                                  | LINER RECORD                                      | SACKS CEME                              | ENT SCRE        |            | 30.                                   | 1  | BING RECO              |  |  |
| SIZE                                  | TOP                              | воттом  | SACKS CEMI                              | ENT SCRE        | EN         | SIZE                                  | <del>                                     </del> | TH SET                 | PACKER SET                                   |  |
|                                       |                                  |   |   | <del></del>     |            | 2 3/8                                 |  | 269                    | No   |  |
| 31. Perforation Record                | (Interval, size a                | nd number)  |   | 32.             | ACID       | , SHOT, FRA                           | CTURE, C   | EMENT SQ               | UEEZE, ETC.                                  |  |
|                                       |                                  | ,   |   |                 | TH INTE    |                                       |  |                        | ND MATERIAL USED                             |  |
| 4173, 4183,                           | 4196. A214                       | 4. 4226. 425                                      | 3. 4264.                                | <del></del>     | 173-42     |                                       | 2500 -   | al 15%                 | WRA  |  |
| 4276, 4283,                           | -                                | , ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,           | , ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |                 |            |                                       |  |                        | led fresh water                              |  |
| ,,                                    |                                  |   |   |                 |            |                                       |  | 0 <b>#</b> ad          |  |  |
|                                       |                                  |   |   |                 |            |                                       |  |                        |  |  |
| 33.                                   |                                  |   |   | RODUCTION       |            |                                       |  |                        |  |  |
| Date First Production                 | Prod                             | luction Method (Flo                               | wing, gas lift,                         | pumping - Siz   | e and type | e pump)                               |  |                        | s (Prod. or Shut-in)                         |  |
| 8/4/67                                |                                  | Pump  |   |                 |            | <u> </u>                              |  |                        | ueing  |  |
| Date of Test                          | Hours Tested                     | Choke Size  | Prod'n. For<br>Test Period              | 3               | 1          | Gas — MCF                             |  | - Bbl.                 | Gas - Oil Ratio                              |  |
| 8/7-8/67                              | 24                               | ••  |   | <u>→   60</u>   |            | 41                                    |  | 96                     | 683  |  |
| Flow Tubing Press.                    | Casing Pressu                    | re Calculated 24<br>Hour Rate                     | 1                                       | Gas             | - MCF      | Wate                                  | r – Bbl.   | Oil                    | Gravity - API (Corr.)                        |  |
| 34. Disposition of Gas                | (Sold used for f                 | uel perted ata l                                  | 60                                      | L               | 41         |                                       | 96<br>Test V                                     | Witnessed E            | 25.2   |  |
| 04. Disposition of Gds                | toora, asea jor ji               | wee, venteu, etc.                                 |   |                 |            |                                       |  |                        |  |  |
| Vented 35. List of Attachments        |                                  |   |   |                 |            | · · · · · · · · · · · · · · · · · · · | <u> </u>   | lauda Y                | 1118011                                      |  |
|                                       |                                  | •   |   |                 |            |                                       |  |                        |  |  |
| 36. I hereby certify that             | ectric logs<br>t the information | shown on both side                                | es of this form                         | is true and cor | plete to   | the best of m                         | y knowledge                                      | e and belief           | <u>.                                    </u> |  |
|                                       | 0 1                              | 1   | je                                      |                 | '          | - ,                                   | 6  | - · · · · •            |  |  |
| Th.                                   | L'Ame                            | £   |   | A = ===         | <b>.</b>   |                                       |  | D                      | 8/31/67                                      |  |
| SIGNED                                | ما الحدار م                      |   | TITLE                                   | Ag en           | <u>*</u>   |                                       |  | DATE                   | V/ 44/ V/                                    |  |

### **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         | Т. | Ojo Alamo          | T. | Penn. "B"     |
|----|-----------------|----|----------------|----|--------------------|----|---------------|
| T. | Salt1935        | T. | Strawn         | т. | Kirtland-Fruitland | T. | Penn. "C"     |
| B. | Salt            | T. | Atoka          | T. | Pictured Cliffs    | T. | Penn. "D"     |
| T. | Yates 2310      | T. | Miss           | T. | Cliff House        | T. | Leadville     |
| T. | 7 Rivers        | T, | Devonian       | T. | Menefee            | T. | Madison       |
| T. | Queen           | T. | Silurian       | T. | Point Lookout      | T. | Elbert        |
| T. | Grayburg        | T. | Montoya        | Т. | Mancos             | T. | McCracken     |
| T. | San Andres 3550 | T. | Simpson        | т. | Gallup             | T. | Ignacio Qtzte |
|    |                 |    |                |    | se Greenhorn       |    |               |
| T. | Paddock         | T. | Ellenburger    | T. | Dakota             | T. |               |
| T. | Blinebry        | т. | Gr. Wash       | T. | Morrison           | T. |               |
| T. | Tubb            | T. | Granite        | T. | Todilto            | T. |               |
| T. | Drinkard        | T. | Delaware Sand  | T. | Entrada            | T. |               |
| T. | Abo             | T. | Bone Springs   | Τ. | Wingate            | T. |               |
| T. | Wolfcamp        | T. | Pi Marker 4025 | т. | Chinle             | T. |               |
| T. | Penn.           | T. |                | Τ. | Permian            | т. |               |
| T  | Cisco (Bough C) | T. |                | Т. | Penn. "A"          | T. |               |

# FORMATION RECORD (Attach additional sheets if necessary)

| From                                     | То  | Thickness<br>in Feet                     | Formation  | From | То | Thickness<br>in Feet | Formation |
|--|---|--|--|------|----|----------------------|-----------|
| 0<br>285<br>1750<br>2310<br>2415<br>3550 | 285<br>1750<br>2310<br>2415<br>3550<br>4306 | 285<br>1465<br>560<br>105<br>1135<br>756 | Surface Rock Red Bed Anhydrite & Salt Lime & Sand Anhydrite, Salt & Shale Bolomite & Anhydrite |      |    | ,                    |           |
|  |   |  |  |      |    |                      |           |
|  |   |  |  |      |    |                      |           |
|  |   |  |  |      |    |                      |           |