

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE

(See other instructions 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 _____
b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other _____

2. NAME OF OPERATOR
Eugene E. Nearburg

3. ADDRESS OF OPERATOR
3303 Lee Parkway Dallas, Texas 75219

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*
At surface
1980 FNL & 660 FWL
At top prod. interval reported below

At total depth

14. PERMIT NO. _____ DATE ISSUED _____

15. DATE SPUDDED **7-2-69** 16. DATE T.D. REACHED **7-11-69** 17. DATE COMPL. (Ready to prod.) **7-16-69**

18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* **4006 Gr.** 19. ELEV. CASINGHEAD **4006**

20. TOTAL DEPTH, MD & TVD **4740 KB** 21. PLUG, BACK T.D., MD & TVD **4687** 22. IF MULTIPLE COMPL., HOW MANY* **→** 23. INTERVALS DRILLED BY **Rotary**

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*
San Andres P2, Top 4606 Bottom 4640 KB

25. WAS DIRECTIONAL SURVEY MADE
No

26. TYPE ELECTRIC AND OTHER LOGS RUN
SNP, MLL & LL

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
8 5/8	28	307 KB	12 1/4	150	None
5 1/2	14 & 15.5	4730 KB	7 7/8	200	None

29. LINER RECORD					30. TUBING RECORD		
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					2 3/8	4560	4470

31. PERFORATION RECORD (Interval, size and number)		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
9 Holes—Size .41		DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
4608, 4609, 4613, 4618, 4623, 4627, 4630, 4635 & 4636		4608 TO 4636	6,000 gal. 15% NE Acid with ball sealers

33.* PRODUCTION							
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)				WELL STATUS (Producing or shut-in)	
7-16-69		Flowing				Producing	
DATE OF TEST	HOURS TESTED	CHORE SIZE	ROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
7-17-69	24	26/64	→	240	175,200	0	730
FLOW TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	IL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY API (CORR.)	
125	0	→	240	175,200	0	27.1	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)				TEST WITNESSED BY			
				Gelwick			

35. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records
SIGNED **Eddie J. Gelwick** TITLE **Production Supt.** DATE **7-18-69**

*(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

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	GEOLOGIC MARKERS		
				NAME	MEAN DEPTH	TRUE VERT. DEPTH
San Andres S.A. P1 S.A. P2 S.A. P3	3809 4452 4604 4680		Fair Porosity, generally tight Good Porosity, good oil saturation Good Porosity, high water saturation	P1 Marker	4328	

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(Other instructions
verse side)

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Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

NM 044216

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

KGS Bacty Fed. Unit

8. FARM OR LEASE NAME

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

E. Bluit San Andres

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

Sec. 13, T8s, R37e

12. COUNTY OR PARISH

Roosevelt

13. STATE

N.M.

1.

OIL ☒ GAS ☐
WELL WELL OTHER

2. NAME OF OPERATOR

Eugene E. Nearburg

3. ADDRESS OF OPERATOR

3303 Lee Parkway Dallas, Texas 75219

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)

At surface

1980' FWL & 660' FWL

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

4006' Gr.

16.

Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐

FRACTURE TREAT ☐

SHOOT OR ACIDIZE ☒

REPAIR WELL ☐

(Other) ☐

PULL OR ALTER CASING ☐

MULTIPLE COMPLETE ☐

ABANDON* ☐

CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐

FRACTURE TREATMENT ☐

SECOTING OR ACIDIZING ☐

(Other) ☐

REPAIRING WELL ☐

ALTERING CASING ☐

ABANDONMENT* ☐

(NOTE: Report results of multiple completion on Well
Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Drilled 7 7/8" hole to 4740' KB.

Ran the following logs: Sidewall Neutron Porosity with Gamma Ray, Laterolog and Microlaterolog.

Ran 4732' of 5 1/2" casing.

Cemented with 200 sacks of 50-50 Incor Pozmix, 2% Gel. 6% salt/sack, and 10# sand/sack, plug down at 1:10 PM 7-11-69.

We plan to perforate 9 holes as follows: 4608, 4609, 4613, 4618, 4623, 4627, 4630, 4635, 4636.

Treat with 6,000 gal. 15% acid.

18. I hereby certify that the foregoing is true and correct

SIGNED

Eugene E. Nearburg

TITLE

Production Supt.

DATE

7-14-69

(This space for Federal or State office use)

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:

APPROVED

JUL 22 1969

ARTHUR R. BROWN
DISTRICT ENGINEER

*See Instructions on Reverse Side

Instructions

General: This form is designed for submitting proposals to perform certain well operations, and reports of such operations when completed, as indicated, on Federal and Indian lands pursuant to applicable Federal law and regulations, and, if approved or accepted by any State, on all lands in such State, pursuant to applicable State law 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.

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 17: Proposals to abandon a well and subsequent reports of abandonment should include such special information as is required by local Federal and/or State offices. In addition, such proposals and reports should include reasons for the abandonment; data on any former or present productive zones, or other zones with present significant fluid contents not sealed off by cement or otherwise; depths (top and bottom) and method of placement of cement plugs; mud or other material placed below, between and above plugs; amount, size, method of parting of any casing, liner or tubing pulled and the depth to top of any left in the hole; method of closing top of well; and date well site conditioned for final inspection looking to approval of the abandonment.

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13. STATE

Roosevelt N.M.

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TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

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WATER SHUT-OFF

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(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

(NOTE: Report results of multiple completion on Well
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Drilled 7 7/8" hole to 4740' KB.

Ran the following logs: SNP, LL, and MLL.

Ran 4732' of 5 1/2" casing.

Cemented with 200 sacks of 50-50 Incor Posmix, 2% Gel., 6# salt/sack, and 10# sand/sack.

Perforated 9 holes as follows: 4608, 4609, 4613, 4618, 4623, 4627, 4630, 4635 and 4636.

Treated with 6,000 gal. of 15% NE acid;

18. I hereby certify that the foregoing is true and correct

SIGNED Arthur R. Brown

TITLE Production Supt.

DATE 7-17-69

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

APPROVED

JUL 22 1969

ARTHUR R. BROWN
DISTRICT ENGINEER

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