

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 _____				5. LEASE DESIGNATION AND SERIAL NO. NM 9033	
b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other _____				6. IF INDIAN, ALLOTTEE OR TRIBE NAME 	
2. NAME OF OPERATOR ROGER C. HANKS				7. UNIT AGREEMENT NAME None	
3. ADDRESS OF OPERATOR 606 Wall Towers West, Midland, Texas 79701				8. FARM OR LEASE NAME BRAJ-Federal	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 1830' FNL & 660' FWL At top prod. interval reported below Same At total depth Same				9. WELL NO. 1-Y	
4. PERMIT NO. _____ DATE ISSUED App.9-29-69				12. COUNTY OR PARISH Roosevelt	13. STATE New Mexico
15. DATE SPUDDED 9-25-69	16. DATE T.D. REACHED 10-28-69	17. DATE COMPL. (Ready to prod.) 11-4-69	18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 4020 GR.		19. ELEV. CASINGHEAD
20. TOTAL DEPTH, MD & TVD 10,002'	21. PLUG BACK T.D., MD & TVD 10,002'	22. IF MULTIPLE COMPL., HOW MANY* Single	23. INTERVALS DRILLED BY Tom Brown Drilgg	ROTARY TOOLS 	
24. PRODUCING INTERVAL(S). OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 9704' to 9724' Bough "C"				25. WAS DIRECTIONAL SURVEY MADE Yes	
26. TYPE ELECTRIC AND OTHER LOGS RUN Gamma Ray - Neutron				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
12 3/4"	34#	417'	17 "	425 Sacks	-
8 5/8"	24# - 32#	4086'	11 "	350 Sacks	-
5 1/2"	17#	10002'	7 7/8"	400 Sacks	-
29. LINER RECORD				30. TUBING RECORD	
SIZE	TOP (MD)	BOTTOM (MD)	SAKS CEMENT*	SCREEN (MD)	SIZE
					2 3/8"
					9640'
					9640'
31. PERFORATION RECORD (Interval, size and number) 9704' to 9724' - 4 shots per foot			32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.		
			DEPTH INTERVAL (MD) 9704'-9724'	AMOUNT AND KIND OF MATERIAL USED 1000 gallons 15% NE double inhibited acid	
33.* PRODUCTION					
DATE FIRST PRODUCTION 11-5-69		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Flowing			WELL STATUS (Producing or shut-in) Producing
DATE OF TEST 11-5-69	HOURS TESTED 24	CHOKE SIZE 1/2"	PROD'N. FOR TEST PERIOD 712	GAS—MCF. Est. 500,000	WATER—BBL. 308
FLOW. TUBING PRESS. 250#	CASING PRESSURE 	CALCULATED 24-HOUR RATE 	OIL—BBL. 712	GAS—MCF. 500	WATER—BBL. 308
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Vented			TEST WITNESSED BY Bobby Cone		
35. LIST OF ATTACHMENTS Log, Deviation Survey					
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records					
SIGNED <i>Roger C. Hanks</i>		TITLE Owner		DATE 11-8-69	

*(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.

of or State name. See instructions on items 22 and 23, and 26, 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, 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. Consult local State

repeated for specimen instructions.

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 the interval reported in item 33. Submit a separate report (page) on this form, adequately identified, for each additional top(s) 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:		38. GEOLOGIC MARKERS				
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.	NAME	TOP	
					MEAS. DEPTH	TRUE VERT. DEPTH
San Andres	4800	5000	Vuggy, fractured dolomite	Yates	2800	1316
	5415	5470	" limestone	Glorietta	5495	- 1379
	9704	9722	" "	Tubb	6930	- 2814
	9878	9892	" "	Wolfcamp	9119	- 5002
Bough "C"						
Cisco						