

UNITED STATES DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY
HOBBS, NEW MEXICO 88240Form approved,
Budget Bureau No. 42-R355.5.

5. LEASE DESIGNATION AND SERIAL NO.

NM 18846

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Chicken

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Chaveroo (SA)

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

Sec. 33, T-7S, R 32E

12. COUNTY OR PARISH

Roosevelt

13. STATE

New Mexico

19. ELEV. CASINGHEAD

4485.4

23. INTERVALS UNILLED BY

0 - 4400

25. WAS DIRECTIONAL SURVEY MADE

NO

27. WAS WELL CORED

NO

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

El Ran, Inc.

3. ADDRESS OF OPERATOR

P. O. Box 911, Lubbock, Texas 79408

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

At surface 660' FNL and 1980' FWL

At top prod. interval reported below

At total depth

14. PERMIT NO.

N/A

DATE ISSUED

N/A

15. DATE SPUDDED 16. DATE T.D. REACHED 17. DATE COMPL. (Ready to prod.)

11/25/81

12/ 4/81

12/22/81

4495.4 KB

20. TOTAL DEPTH, MD & TVD

4400

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

4397

22. IF MULTIPLE COMPLETIONS, HOW MANY?

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

4248' to 4302' San Andres

26. TYPE ELECTRIC AND OTHER LOGS RUN

SWN & OSN

28. CASING RECORD (Report all strings set in well)

CASINO SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
8 5/8	24#	1760	12 3/4	550	Surface
4 1/2	10.5#	4400	7 7/8	175 50/50 POZ	3400

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					2 3/8	4390	4225'

31. PERFORATION RECORD (Interval, size and number)

4156, 58, 65, 68, 72, 86, 88, 90, 97, 4248, 50, 52,
4276, 80, 94, 96, 4302 2 shot per foot

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
4156 - 4197	15% HCL 4000 gals.
4248 - 4302	15% HCL 3000 gals.

33.* PRODUCTION

DATE FIRST PRODUCTION 12/20/81 PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Swabbing WELL STATUS (Producing or shut-in) Shut-in TA

DATE OF TEST 12/20/81 HOURS TESTED 10 hrs. CHOKE SIZE 2" PROD'N. FOR TEST PERIOD Trace OIL—BBL. TSTM GAS—MCF. 90 WATER—BBL. N/A GAS-OIL RATIO

FLOW. TUBING PRESS. N/A CASING PRESSURE N/A CALCULATED 24-HOUR RATE Trace OIL—BBL. TSTM GAS—MCF. 216 WATER—BBL. N/A OIL GRAVITY-API (CORR.)

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

Vented

TEST WITNESSED BY

Robert R. Ranck

35. LIST OF ATTACHMENTS

Deviations Survey and DSN

ACCEPTED FOR RECORD
ROGER A. CHAPMAN

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

SIGNED

TITLE Vice President

DATE 1/ 5/82

*(See Instructions and Spaces for Additional Data on Reverse Side)

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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	TOP MEAS. DEPTH TRUE VERT. DEPTH
San Andres	4154	4400	Dolomite	Yates PI San Andres	2,270 3,998 4,154