

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYN. M. OIL & GAS COMMISSION
P. O. BOX 1990
HOBBS, NEW MEXICO 88240
(See other instructions on reverse side)Form approved.
Budget Bureau No. 42-R355.5.

5. LEASE DESIGNATION AND SERIAL NO.

IC 062178

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

Milnesand (SA) Unit

8. FARM OR LEASE NAME

9. WELL NO.

525

10. FIELD AND POOL, OR WILDCAT

Milnesand (San Andres)

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

Sec. 13, T-8-S, R-34-E

12. COUNTY OR PARISH

Roosevelt

13. STATE

N.M.

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

Union Texas Petroleum Corporation

3. ADDRESS OF OPERATOR

1300 Wilco Bldg. - Midland, Texas 79701

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

At surface 1260' FNL & 1300' FEC

At top prod. interval reported below

At total depth

SAME

14. PERMIT NO.

DATE ISSUED

4-7-82

15. DATE SPUDDED

5-23-82

16. DATE T.D. REACHED

6-1-82

17. DATE COMPL. (Ready to prod.)

6-23-82

18. ELEVATIONS (DF, RKB, RT, GR, ETC.)*

4244.5 GR

19. ELEV. CASINGHEAD

20. TOTAL DEPTH, MD & TVD

4750

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

4683

22. IF MULTIPLE COMPL., HOW MANY*

23. INTERVALS DRILLED BY

ROTARY TOOLS

CABLE TOOLS

X

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

4549 - 4622

25. WAS DIRECTIONAL SURVEY MADE

NO

26. TYPE ELECTRIC AND OTHER LOGS RUN

Compensated Neutron

27. 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#	408	12 1/4	220 SX	---
				Class "C"	
5 1/2	14#	4750	7 7/8	700 SX Class "H"	---

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)

30. TUBING RECORD

SIZE	DEPTH SET (MD)	PACKER SET (MD)
2 7/8	4626	4628

31. PERFORATION RECORD (Interval, size and number)

4549 - 4622

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
4549 - 4623	5100 gals 15% NEFE Acid
	Frac 20,000 gals + 50,000 lbs.
	20/40 sand

33.* PRODUCTION

DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)					WELL STATUS (Producing or shut-in)	
6-25-82		Pumping 2 1/2 X 1 1/2 X 16					Producing	
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO	
7-28-82	24 hrs.		→	25	35	59	1400	
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)		
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34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)

Sold to Warren

35. LIST OF ATTACHMENTS

C-104 - Inclination Survey - Compensated Neutron Log.

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

SIGNED

TITLE

Production Services

U.S. GEOLOGICAL SURVEY

ROSWELL, NEW MEXICO 8-9-82

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 38, below regarding separate reports for separate completions.

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

Item 18: Indicate which element 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 interval(s), 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 log.

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.)

DEPTH INTERVAL TESTED, CUSHION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES

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