

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-105
Revised 10-1-78

30-041 - 20659

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DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

5a. Indicate Type of Lease
State ☐ Fee ☒
5. State Oil & Gas Lease No.
N/A

1a. TYPE OF WELL OIL WELL ☒ GAS WELL ☐ DRY ☐ OTHER Re-entry										7. Unit Agreement Name N/A	
b. TYPE OF COMPLETION NEW WELL ☐ WORK OVER ☐ DEEPEN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ OTHER Re-entry										8. Farm or Lease Name Elkans 24	
2. Name of Operator Edwin S. Nichols Explorations, Inc.										9. Well No. 1	
3. Address of Operator P.O. Box 326, Meridian, Texas 76665										10. Field and Pool, or Wildcat Wildcat	
4. Location of Well UNIT LETTER K LOCATED 1980 FEET FROM THE South LINE AND 1980 FEET FROM THE West LINE OF SEC. 24 TWP. 7S RGE. 34E NMPM										12. County Roosevelt	
15. Date Spudded 12-10-87		16. Date T.D. Reached 12-21-87		17. Date Compl. (Ready to Prod.) N/A		18. Elevations (DF, RKB, RT, GR, etc.) 4256 GR		19. Elev. Casinghead			
20. Total Depth 4469		21. Plug Back T.D. 4470		22. If Multiple Compl., How Many		23. Intervals Drilled By Rotary Tools X		Cable Tools			
24. Producing Interval(s), of this completion - Top, Bottom, Name San Andres										25. Was Directional Survey Made No	
26. Type Electric and Other Logs Run Perforating Record Log										27. Was Well Cored No	
28. CASING RECORD (Report all strings set in well)											
CASING SIZE		WEIGHT LB./FT.		DEPTH SET		HOLE SIZE		CEMENTING RECORD		AMOUNT PULLED	
8 5/8		24 & 32#		4262		Re-entry		Re-entry		None	
29. LINER RECORD											
SIZE		TOP		BOTTOM		SACKS CEMENT		SCREEN		30. TUBING RECORD	
N/A										SIZE DEPTH SET PACKER SET	
										2 7/8 3299 4447	
31. Perforation Record (Interval, size and number) 4364, 4365, 4380, 4388, 4391, 4394, 4401, 4406, 4410, 4421						32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.					
						DEPTH INTERVAL		AMOUNT AND KIND MATERIAL USED			
						4364 - 4421		300 Gals 15% NEFE HCL Acid			
33. PRODUCTION											
Date First Production None		Production Method (Flowing, gas lift, pumping - Size and type pump)						Well Status (Prod. or Shut-in)			
Date of Test		Hours Tested		Choke Size		Prod'n. For Test Period		Oil - Bbl.		Gas - MCF	
										Water - Bbl.	
										Gas - Oil Ratio	
Flow Tubing Press.		Casing Pressure		Calculated 24-Hour Rate		Oil - Bbl.		Gas - MCF		Water - Bbl.	
										Oil Gravity - API (Corr.)	
34. Disposition of Gas (Sold, used for fuel, vented, etc.)										Test Witnessed By	
35. List of Attachments											

36. I hereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief.

SIGNED Susan Godwin

TITLE Secretary

DATE 06-18-90

RECEIVED

JUN 22 1990

CCD
HOBBS OFFICE