

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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 Amoco Production Company						5. LEASE DESIGNATION AND SERIAL NO. NM-0415685	
3. ADDRESS OF OPERATOR P. O. Box 68, Hobbs, NM 88240						6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any state requirements) At surface 2280' FSL X 865' FEL At top prod. interval reported below (Unit I, NE/4, SE/4) At total depth						7. UNIT AGREEMENT NAME	
14. PERMIT NO.						DATE ISSUED	
15. DATE SPUDDED 12-15-83						16. DATE T.D. REACHED 12-22-83	
17. DATE COMPL. (Ready to prod.) 1-30-84						18. ELEVATIONS (OF, RKB, RT, GR, ETC.)* 4211.8' GL	
20. TOTAL DEPTH, MD & TVD 4800'						21. PLUG BACK T.D., MD & TVD 4775'	
22. IF MULTIPLE COMPL., HOW MANY* --						23. INTERVALS DRILLED BY ROTARY TOOLS 0-TD	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 4670'-4748' Milnesand San Andres						25. WAS DIRECTIONAL SURVEY MADE No	
26. TYPE ELECTRIC AND OTHER LOGS RUN Dual Laterolog; Comp. Density Comp. Neutron Log; Cement Bond Log						27. WAS WELL CORED No	
28. CASING RECORD (Report all strings set in well)							
CASING SIZE		WEIGHT, LB./FT.		DEPTH SET (MD)		HOLE SIZE	
8-5/8"		24		400'		12-1/4"	
5-1/2"		15.5		4800'		7-7/8"	
						250 sx C1 C w/2% CaCl2	
						1350 sx C1 C w/add.&	
						475 sx C1 C neat	
						AMOUNT PULLED 25 sx	
						12 sx	
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"		4751'					
31. PERFORATION RECORD (Interval, size and number)							
4670'-4706' and 4720-4748' w/4 JSFP							
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.							
DEPTH INTERVAL (MD)				AMOUNT AND KIND OF MATERIAL USED			
4670'-4748'				2800 gal 15% LSTNE HCL acid			
33.* PRODUCTION							
DATE FIRST PRODUCTION 1-13-84		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) pumping				WELL STATUS (Producing or shut-in): producing	
DATE OF TEST 1-30-84		HOURS TESTED 24		CHOKE SIZE		PROD'N. FOR TEST PERIOD	
FLOW. TUBING PRESS.		CASING PRESSURE		CALCULATED 24-HOUR RATE		OIL—BBL.	
		28 psi				62	
						GAS—MCF.	
						15	
						WATER—BBL.	
						475	
						GAS-OIL RATIO	
						242	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) to be sold							
35. LIST OF ATTACHMENTS Logs mailed on 1-19-84 and 1-23-84							
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records							
SIGNED <i>Cathy L. Jorman</i>				TITLE <i>Assist. Adm. Analyst</i>		DATE <i>2-8-84</i>	

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

0+6-BLM, R 1-R. E. Ogden, HOU 1-F. J. Nash, HOU 1-CLF

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.

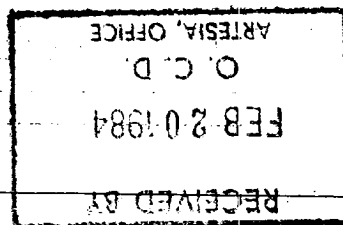
Item 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

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 POROSITY 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	MEAS. DEPTH TOP TRUE VERT. DEPTH
San Andres	4670'	4748'	Producing zone	Anhydrite San Andres	2284' 3930'



RECEIVED
FEB 27 1984
O.C.D.
HOBBS OFFICE