

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYN. M. OIL CONS. COM. 17
P. O. BOX 1980
HOBBS, NEW MEXICO 88240Form approved.
Budget Bureau No. 42-R355.6.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL: OIL WELL ☐ GAS WELL ☒ DRY ☐ Other _____		3. LEASE DESIGNATION AND SERIAL NO. NM 14012	
b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other _____		4. IF INDIAN, ALLOTTEE OR TRIBE NAME	
2. NAME OF OPERATOR Tom L. Ingram		7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR P. O. Box 1757, Roswell, NM 88201		8. FARM OR LEASE NAME Federal "N"	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 660' FNL & FEL At top prod. interval reported below At total depth		9. WELL NO. 1	
14. PERMIT NO.		DATE ISSUED JUN 13 1985	
15. DATE SPUDDED 2-9-85		16. DATE T.D. REACHED 2-21-85	
17. DATE COMPL. (Ready to prod.)		18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 4012 KB	
19. ELEV. CASINGHEAD		20. TOTAL DEPTH, MD & TVD 4880	
21. PLUG, BACK T.D., MD & TVD 4830		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)* 4684-4768, San Andres		25. WAS DIRECTIONAL SURVEY MADE No	
26. TYPE ELECTRIC AND OTHER LOGS RUN CNL-GR		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	20	371	12 1/4
5 1/2	15.5	4880	7 7/8
CEMENTING RECORD		AMOUNT PULLED	
210		Circ	
825		Circ	
29. LINER RECORD			
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*
30. TUBING RECORD			
SIZE	DEPTH SET (MD)	PACKER SET (MD)	
2 3/8	4702	--	
31. PERFORATION RECORD (Interval, size and number)			
4684, 94, 96, 98 4708, 10, 16, 23, 38, 40, 48, 53, 56, 62, 64, 66, 68			
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED	
4684-4768		A/2000, F/10,000 + 23000# SD	
33.* PRODUCTION			
DATE FIRST PRODUCTION 3-19-85		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Flowing	
WELL STATUS (Producing or shut-in) Shut in			
DATE OF TEST 4-16-85	HOURS TESTED 2	CHOKED SIZE 19/64	PROD'N. FOR TEST PERIOD →
OIL—BBL. .83	GAS—MCF. 134.33	WATER—BBL. .10	GAS-OIL RATIO 161200
FLOW. TUBING PRESS. 975	CASING PRESSURE 1100	CALCULATED 24-HOUR RATE →	OIL—BBL. 10
GAS—MCF. 1612	WATER—BBL. 2	OIL GRAVITY-API (CORR.) 32	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Vented			
35. LIST OF ATTACHMENTS CNL-GR, Deviation Survey			
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records			
SIGNED Joseph L. Ingram		TITLE ENGINEER	
DATE 4/22/85		BUREAU OF LAND MANAGEMENT ROSWELL RESOURCE AREA	

*(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.

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	MEAS. DEPTH	TRUE VERT. DEPTH
	0	30	Surface Sd			
	30	2322	Red Beds		2322	--
	2322	2384	Anhydrite	Rustler Anh	2384	--
	2384	2765	Salt & Anhydrite	Salt	2765	--
	2765	4072	Sand & Anhydrite	Yates	4072	--
	4072	TD	Dolomite	San Andres		--