rm 9-330
ev. 5-63)

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE* (Other instructions on reverse side)

N. M. OIL CONS. COMMISSION
P. O. BOX 1980
HOBBS, NEW MEXICO 88240

Form approved.
Budget Bureau No. 42-R355.5.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG*

5. LEASE DESIGNATION AND SERIAL NO.: NM 0145685

6. IF INDIAN, ALLOTTEE OR TRIBE NAME:

7. UNIT AGREEMENT NAME:

8. FARM OR LEASE NAME: Horton Federal

9. WELL NO.: 36

10. FIELD AND POOL, OR WILDCAT: Milnesand-San Andres

11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA: 30, T-8-S, R-35-E NMPM

12. COUNTY OR PARISH: Roosevelt

13. STATE: New Mexico

1a. TYPE OF WELL: OIL WELL [X] GAS WELL [ ] DRY [ ] Other

b. TYPE OF COMPLETION: NEW WELL [X] WORK OVER [ ] DEEP-EN [ ] PLUG BACK [ ] DIFF. RESVR. [ ] Other

2. NAME OF OPERATOR: American Petrofina Co. of Texas

3. ADDRESS OF OPERATOR: P.O. Box 2990 Midland, Texas 79702

4. LOCATION OF WELL (*Report location clearly and in accordance with any State requirements*)*
At surface 990 FNL, 1581 FEL
At top prod. interval reported below
At total depth

DEC 2 4

14. PERMIT NO.: -

DATE ISSUED: 9/26/84

15. DATE SPUDDED: 10/24/84

16. DATE T.D. REACHED: 11-2-84

17. DATE COMPL. (*Ready to prod.*): 11-20-84

18. ELEVATIONS (DF, RKB, RT, GR, ETC.)*: 4229 DF 4230 KDB

19. ELEV. CASINGHEAD:

20. TOTAL DEPTH, MD & TVD: ~~4806~~ 4970

21. PLUG, BACK T.D., MD & TVD: 4754

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 (MD AND TVD)*: 4655-4688, 4712-4732 San Andres

25. WAS DIRECTIONAL SURVEY MADE: NO

26. TYPE ELECTRIC AND OTHER LOGS RUN: GR DEN.-CNL Sonic

27. WAS WELL CORED: NO

28. 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	442	12 1/4	275 sx Cl "C"	-
5 1/2	15.5	4806	7 7/8	1175 sx HLC & 200 SX Cl H	-

29. LINER RECORD None

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

30. TUBING RECORD

SIZE	DEPTH SET (MD)	PACKER SET (MD)
2 7/8	4745	-

31. PERFORATION RECORD (*Interval, size and number*)

4655-4688 .36 20 shots
4712-4732 .36 10 shots

ACCEPTED FOR RECORD
PETER W. CHESTER
JAN 18 1985

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
4655-4688	3000 gals. 15% NEFE acid
4712-4732	2080 gals. 15% NEFE acid

33.* PRODUCTION

DATE FIRST PRODUCTION	PRODUCTION METHOD (*Flowing, gas lift, pumping—size and type of pump*)	WELL STATUS (*Producing or shut-in*)
11-20-84	Pump 2" Insert	Production

DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD →	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
12-20-84	24	2"			TSTM	244	-

FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE →	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)
-	-		27.5	TSTM	244	26.4

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

TEST WITNESSED BY: Curtis Allen

35. LIST OF ATTACHMENTS: Density-Neutron Logs, Inclination Survey

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

SIGNED _____ TITLE _____ DATE 12-21-84

*(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

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.
San Andres	4655	4688	Anhydritic dolomite with pp. & vug porosity with staining.
	4712	4732	Anydritic dolomite with pp. & vug porosity with staining.

38. GEOLOGIC MARKERS

NAME	TOP MEAS. DEPTH	TOP TRUE VERT. DEPTH
San Andres	3896	
Pi Marker	4505	

~~RAILROAD COMMISSION OF TEXAS~~
~~OIL AND GAS DIVISION~~

Form W-12
(1-1-71)

INCLINATION REPORT

(One Copy Must Be Filed With Each Completion Report.)

6. RRC District: 8-A
7. RRC Lease Number. (Oil completions only):
8. Well Number: 36
9. RRC Identification Number (Gas completions only):
10. County: ROOSEVELT, NEW MEXICO

1. FIELD NAME (as per RRC Records or Wildcat): Milnesand San Andres
2. LEASE NAME: HORTON FEDERAL
3. OPERATOR: AMERICAN PETROFINA CO. OF TEXAS
4. ADDRESS: P.O. BOX 2990, MIDLAND, TEXAS 79702
5. LOCATION (Section, Block, and Survey): 30, T-8-S, R-35-E

RECORD OF INCLINATION

*11. Measured Depth (feet)	12. Course Length (Hundreds of feet)	*13. Angle of Inclination (Degrees)	14. Displacement per Hundred Feet (Sine of Angle X100)	15. Course Displacement (feet)	16. Accumulative Displacement (feet)
446	4.46	.75	1.31	5.84	5.84
915	4.69	1.00	1.75	8.21	14.05
1403	4.88	.75	1.31	6.39	20.44
1901	4.98	1.00	1.75	8.72	29.16
2383	4.82	1.00	1.75	8.44	37.60
2875	4.92	.75	1.31	6.45	44.05
3358	4.83	1.00	1.75	8.45	52.50
3850	4.92	1.00	1.75	8.61	61.11
4348	4.98	1.00	1.75	8.72	69.83
4739	3.91	.50	.88	3.44	73.27
4790	.51	1.00	1.75	.89	74.16

If additional space is needed, use the reverse side of this form.

17. Is any information shown on the reverse side of this form? ☐ yes ☒ no
18. Accumulative total displacement of well bore at total depth of 4,790 feet = 74.16 feet.
*19. Inclination measurements were made in – ☐ Tubing ☐ Casing ☐ Open hole ☒ Drill Pipe
20. Distance from surface location of well to the nearest lease line _____ feet.
21. Minimum distance to lease line as prescribed by field rules _____ feet.
22. Was the subject well at any time intentionally deviated from the vertical in any manner whatsoever? NO
(If the answer to the above question is "yes", attach written explanation of the circumstances.)

INCLINATION DATA CERTIFICATION

I declare under penalties prescribed in Sec. 91.143, Texas Natural Resources Code, that I am authorized to make this certification, that I have personal knowledge of the inclination data and facts placed on both sides of this form and that such data and facts are true, correct, and complete to the best of my knowledge. This certification covers all data as indicated by asterisks (*) by the item numbers on this form.

Signature of Authorized Representative
DON ROBERTS, PRESIDENT
Name of Person and Title (type or print)
LYNCO DRILLING COMPANY
Name of Company
Telephone: 806 (Area Code) 894-7386

OPERATOR CERTIFICATION

I declare under penalties prescribed in Sec. 91.143, Texas Natural Resources Code, that I am authorized to make this certification, that I have personal knowledge of all information presented in this report, and that all data presented on both sides of this form are true, correct, and complete to the best of my knowledge. This certification covers all data and information presented herein except inclination data as indicated by asterisks (*) by the item numbers on this form.

Signature of Authorized Representative
J.C. Chapman Asst. Dist. Mgr. of Prod.
Name of Person and Title (type or print)
American Petrofina Co. of Texas
Operator
Telephone: 915 (Area Code) 687-0575

Railroad Commission Use Only:

Approved By: _____ Title: _____ Date: _____

* Designates items certified by company that conducted the inclination surveys.