

UNITED STATES

SUBMIT IN DUPLICATE

Form approved,
Budget Bureau No. 42-R355.5.NMOCC - ARTESIA
NMOCC - HOBBS
BLM - SANTA FEDEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY(See other in-
structions on
reverse side)

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL: OIL WELL ☒ GAS WELL ☐ DRY ☐ Other _____		5. LEASE DESIGNATION AND SERIAL NO. NM 0155494 A	
b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other _____		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
2. NAME OF OPERATOR SINCLAIR OIL & GAS COMPANY		7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR P. O. BOX 1920, Hobbs, New Mexico 88240		8. FARM OR LEASE NAME Winkler Federal	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 1980' fr the North and West lines Section 32-T8S-R30E At top prod. interval reported below as above At total depth as above		9. WELL NO. 11	
14. PERMIT NO.		DATE ISSUED	
15. DATE SPUDDED 12-1-67		16. DATE T.D. REACHED 12-5-67	
17. DATE COMPL. (Ready to prod.) 1-1-68		18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 4127' GR	
19. ELEV. CASINGHEAD		20. TOTAL DEPTH, MD & TVD 3500'	
21. PLUG BACK T.D., MD & TVD 3432'		22. IF MULTIPLE COMPL., HOW MANY*	
23. INTERVALS DRILLED BY		ROTARY TOOLS 0-3500'	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 3333-3428' San Andres		25. WAS DIRECTIONAL SURVEY MADE No	
26. TYPE ELECTRIC AND OTHER LOGS RUN Gamma Ray Density, Micro Laterolog and Laterolog.		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"OD	20#	274'	12-1/4"
4-1/2"OD	9.5#	3500'	7-7/8"
CEMENTING RECORD			
200 sks.			
300 sks.			
AMOUNT PULLED			
-			
-			
29. LINER RECORD			
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*
30. TUBING RECORD			
SIZE	DEPTH SET (MD)	PACKER SET (MD)	
2-3/8"OD	3144'		
31. PERFORATION RECORD (Interval, size and number)			
3333-42-50-51-55-60-69-75-77-3406-12-20-23-26-28' w/30 - 3/8" holes.			
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED	
3333-3428'		12,000 gals. 28% N.E. acid	
33.* PRODUCTION			
DATE FIRST PRODUCTION 1-1-68		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Pumping (2 x 1 1/2 x 12' Travel Barrel-Single Carbide)	
DATE OF TEST 1-9-68		WELL STATUS (Producing or shut-in) Producing	
HOURS TESTED 24	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL. 8
			GAS—MCF. 2
			WATER—BBL. 26
			GAS-OIL RATIO 300:1
FLOW. TUBING PRESS. 0	CASING PRESSURE 0	CALCULATED 24-HOUR RATE	OIL—BBL. 8
			GAS—MCF. 2
			WATER—BBL. 26
			OIL GRAVITY-API (CORR.) 24.0
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) vented			
35. LIST OF ATTACHMENTS			
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records			
SIGNED <i>[Signature]</i>		TITLE Superintendent	

ACCEPTED FOR RECORD

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

Orig&4cc: USGS. Roswell. N.M. cc: Regional Office. cc: file

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.

This summary record is submitted, copies of all currently available logs (drillers, geologists, sample and core analysis, all types electric, etc.), formations 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.

Section 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. (where not otherwise shown)

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.)

38. GEOLOGIC MARKERS	NAME	TOP	
		MEAS. DEPTH	TRUE VERT. DEPTH
	Rustler	1023'	1023'
	Tates	1472'	1472'
	San Andres	2642'	2642'