

AMOCG COPY

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE

(See other in-  
structions on  
reverse side)Form approved.  
Budget Bureau No. 42-R355.5.

5. LEASE DESIGNATION AND SERIAL NO.

NM 8255

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Federal Occidental

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Wildcat

11. SEC., T., R., M., OR BLOCK AND SURVEY  
OR AREANE/4 NE/4, Sec. 22,  
T14S, R30E12. COUNTY OR  
PARISH

Chaves

13. STATE

New Mexico

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

Cockrell Corporation

3. ADDRESS OF OPERATOR

Suite 999, The Main Building, Houston, TX 77002

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)\*

At surface 660' FEL, 660' FNL of Sec. 22, T14S, R30E

At top prod. interval reported below

At total depth -

14. PERMIT NO.

Letter

DATE ISSUED

8/2/77

15. DATE SPUDDED

7-30-72

16. DATE T.D. REACHED

10-12-72

17. DATE COMPL. (Ready to prod.)

11-1-77

18. ELEVATIONS (DF, RKB, RT, GR, ETC.)\*

3,891.2 GR

19. ELEV. CASINGHEAD

3,891.2 GR

20. TOTAL DEPTH, MD &amp; TVD

11,962'

21. PLUG, BACK T.D., MD &amp; TVD

10,729'

22. IF MULTIPLE COMPL.,  
HOW MANY\*23. INTERVALS  
DRILLED BY

ROTARY TOOLS

CABLE TOOLS

X

24. PRODUCING INTERVAL(S). OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)\*

10,668 - 10,680' Morrow Formation

25. WAS DIRECTIONAL  
SURVEY MADE

Yes

26. TYPE ELECTRIC AND OTHER LOGS RUN

Density, Caliper, Laterolog, Neutron, Sonic, Gamma Ray

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 |
|-------------|-----------------|----------------|-----------|------------------|---------------|
| 12-3/4"     | 34              | 500            | 15-1/2"   | 200 sacks        | -             |
| 8-5/8"      | 32              | 2,990          | 11        | 200 sacks        | -             |
| 5-1/2"      | 17, 20          | 11,512         | 7-5/8"    | 1,285 sacks      | -             |

29. LINER RECORD

| SIZE | TOP (MD) | BOTTOM (MD) | SACKS CEMENT* | SCREEN (MD) | SIZE  | DEPTH SET (MD) | PACKER SET (MD) |
|------|----------|-------------|---------------|-------------|-------|----------------|-----------------|
|      |          |             |               |             | 2-7/8 | 10,411         | 10,411          |

31. PERFORATION RECORD (Interval, size and number)

10,668' - 10,680', 4 hpf

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

| DEPTH INTERVAL (MD) | AMOUNT AND KIND OF MATERIAL USED |
|---------------------|----------------------------------|
|                     |                                  |
|                     |                                  |
|                     |                                  |
|                     |                                  |

33.\* PRODUCTION

| DATE FIRST PRODUCTION |                 | PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) |                         |          |            |                         | WELL STATUS (Producing or shut-in) |  |
|-----------------------|-----------------|----------------------------------------------------------------------|-------------------------|----------|------------|-------------------------|------------------------------------|--|
| 11-1-77               |                 | Flowing                                                              |                         |          |            |                         | Shut-in                            |  |
| DATE OF TEST          | HOURS TESTED    | CHOKE SIZE                                                           | PROD'N. FOR TEST PERIOD | OIL—BBL. | GAS—MCF.   | WATER—BBL.              | GAS-OIL RATIO                      |  |
| 11-4-77               | 24              | 20/64                                                                | →                       | 8        | 1,025      | 0                       | 128,125                            |  |
| FLOW. TUBING PRESS.   | CASING PRESSURE | CALCULATED 24-HOUR RATE                                              | OIL—BBL.                | GAS—MCF. | WATER—BBL. | OIL GRAVITY-API (CORR.) |                                    |  |
| 1,180                 | 0               | →                                                                    | 8                       | 1,025    | 0          | 56.0                    |                                    |  |

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

Flared

TEST WITNESSED BY

West Engineering Co.

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

TITLE

Engineer

DATE

11/7/77

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

**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.

For depth measurements given in other places on this form and in any attachments, (where not otherwise shown) use reference item 18: Indicate which elevation is used as reference (e.g., this would be 24 for items 22 and 24; it this would be 24 for item 23).

**Items 22 and 24:** If this well is completed for separate production from more than one interval zone (multiple completion), so state in item 24 show the producing interval, or intervals, top(s), bottom(s) and name(s) (if any) for 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.)

[illegible]