

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
J.S.G.S.	
LAND OFFICE	
OPERATOR	

Form C-105  
Revised 1-1-65

# NEW MEXICO OIL CONSERVATION COMMISSION WELL COMPLETION OR RECOMPLETION REPORT AND LOG

5a. Indicate Type of Lease  
State ☐ ☒  
5. State ☐ & ☐

1. TYPE OF WELL OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> DRY <input checked="" type="checkbox"/> OTHER _____		7. Unit Agreement Name	
2. TYPE OF COMPLETION NEW WELL <input type="checkbox"/> WORK OVER <input type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input type="checkbox"/> DIFF. RESVR. <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> P&A		8. Farm or Lease Name State-21	
3. Name of Operator Jack F. Grimm		9. Well No. 1	
4. Address of Operator P. O. Box 35 Abilene, Texas 79604		10. Field and Pool, or Wildcat Vest Ranch Queen	
5. Location of Well UNIT LETTER <u>P</u> LOCATED <u>990</u> FEET FROM THE <u>East</u> LINE AND <u>660</u> FEET FROM _____		12. County Chaves	
6. T. & E. South LINE OF SEC. <u>21</u> TWP. <u>14</u> S. RGE. <u>30</u> E. NMPM			
11. Date Spudded 6/12/74	16. Date T.D. Reached 8/24/74	17. Date Compl. (Ready to Prod.)	18. Elevations (DF, RKB, RT, GR, etc.) 3861GR
19. Elev. Casinghead			
20. Total Depth 2145'	21. Plug Back T.D.	22. If Multiple Compl., How Many	23. Intervals Drilled By Rotary Tools Cable Tools <u>X</u>
24. Producing Interval(s), of this completion - Top, Bottom, Name DRY			25. Was Directional Survey Made
26. Type Electric and Other Logs Run -No logs run - see cable tool sample description on other side			27. Was Well Core No
28. CASING RECORD (Report all strings set in well)			
CASING SIZE 8 5/8"	WEIGHT LB./FT. 20#	DEPTH SET 490'	HOLE SIZE 11"
CEMENTING RECORD 150 sx		AMOUNT PULLED None	
29. LINER RECORD			
SIZE	TOP	BOTTOM	SACKS CEMENT
SCREEN		30. TUBING RECORD	
SIZE	DEPTH SET	PACKER SET	
31. Perforation Record (Interval, size and number)		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
DEPTH INTERVAL		AMOUNT AND KIND MATERIAL USED	
33. PRODUCTION			
Date First Production	Production Method (Flowing, gas lift, pumping - Size and type pump)		Well Status (Prod. or Shut-in)
Date of Test	Hours Tested	Choke Size	Prod'n. For Test Period
Oil - Bbl.	Gas - MCF	Water - Bbl.	Gas-Oil Ratio
Flow Tubing Press.	Casing Pressure	Calculated 24-Hour Rate	Oil Gravity - API (Corr.)
34. Disposition of Gas (Sold, used for fuel, vented, etc.)			Test Witnessed By
35. List of Attachments			
36. I hereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief.			
SIGNED <u>[Signature]</u>		TITLE <u>Operator</u>	DATE <u>2/26/75</u>