

UNITED STATES DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICAT.

(See other instructions on reverse side)

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

WELL COMPLETION OR RECOMPLETION REPORT AND LOG*

1a. TYPE OF WELL: OIL WELL ☐ GAS WELL ☐ DRY ☒ Other _____		7. UNIT AGREEMENT NAME _____	
b. TYPE OF COMPLETION: NEW WELL ☐ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other <u>Temporarily Abandoned</u>		8. FARM OR LEASE NAME <u>Link</u>	
2. NAME OF OPERATOR <u>HANAGAN PETROLEUM CORPORATION</u>		9. WELL NO. <u>1</u>	
3. ADDRESS OF OPERATOR <u>P. O. Box 1737, Roswell, New Mexico 88201</u>		10. FIELD AND POOL, OR WILDCAT <u>Wildcat</u>	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface <u>2010' FNL & 660' FEL</u> At top prod. interval reported below _____ At total depth <u>Same</u>		11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA <u>20-13S-30E</u>	
14. PERMIT NO. _____ DATE ISSUED _____		12. COUNTY OR PARISH <u>Chaves</u>	
15. DATE SPUDDED <u>7-25-74</u>		13. STATE <u>N. M.</u>	
16. DATE T.D. REACHED <u>10-11-74</u>		19. ELEV. CASINGHEAD <u>3887</u>	
17. DATE COMPL. (Ready to prod.) <u>Temp. Aban. 10-11-74</u>		18. ELEVATIONS (DF, RSB, RT, GR, ETC.)* <u>3887 GR</u>	
20. TOTAL DEPTH, MD & TVD <u>2138</u>		21. PLUG, BACK T.D., MD & TVD _____	
22. IF MULTIPLE COMPL., HOW MANY* _____		23. INTERVALS DRILLED BY _____	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* <u>None</u>		25. WAS DIRECTIONAL SURVEY MADE <u>No</u>	
26. TYPE ELECTRIC AND OTHER LOGS RUN <u>None</u>		27. WAS WELL CORED <u>No</u>	
28. CASING RECORD (Report all strings set in well)			
CASING SIZE <u>8 5/8'</u>	WEIGHT, LB./FT. <u>24#</u>	DEPTH SET (MD) <u>507</u>	HOLE SIZE <u>10"</u>
CEMENTING RECORD <u>60 SX</u>			AMOUNT PULLED <u>None</u>
29. LINER RECORD			
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*
SCREEN (MD)			
30. TUBING RECORD			
SIZE	DEPTH SET (MD)		PACKER SET (MD)
31. PERFORATION RECORD (Interval, size and number) <u>None</u>			
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) _____	
DATE OF TEST _____		WELL STATUS (Producing or shut-in) <u>Temp. Aban.</u>	
HOURS TESTED _____	CHOKE SIZE _____	PROD'N. FOR TEST PERIOD _____	OIL—BBL. _____
FLOW. TUBING PRESS. _____		GAS—MCF _____	
CASING PRESSURE _____	CALCULATED 24-HOUR RATE _____	WATER—BBL. _____	
DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) _____		OIL GRAVITY-API (CORR.) _____	
34. LIST OF ATTACHMENTS <u>Sample Log - 2 copies - 5 Form 9-331</u>			
35. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records			
SIGNED <u>G. E. Harrington</u>		TITLE <u>Agent</u>	
DATE <u>10-22-74</u>			

*** (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 PRESSURE, AND RECOVERIES

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	38. GEOLOGIC MARKERS	
				NAME	MEAS. DEPTH
Dewey Lake	280	490	Sand - water @ 295'	Dewey Lake	280
Rustler	490	610	Anhy., Sh., & Salt	Rustler	490
Salado	610	1240	Salt, Anhy., Sh., & Sd.	Salado	610
Yates	1240	1937	Sh., Anhy., Sd. & Salt	Yates	1240
Queen	1937	2025	Sd., Anhy., & Sh.	Queen	1937
Penrose	2025	2138	Sd., Anhy., & Sh.	Penrose	2025
			Dry @ Total Depth		

RECEIVED

OCT 24 1974

O. C. C.
ARTEBIA, OFFICE