

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.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

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

Blair & Metclafe-Blair Exploration, Inc. & Tom Metcalfe

3. ADDRESS OF OPERATOR

P. O. Box 7764 Midland, Texas 79701

4. LOCATION OF WELL (Report location clearly and in accordance with _____)

At surface 660' FSL & 660' FEL

At top prod. interval reported below same

At total depth same

14. PERMIT U.S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO

15. DATE SPUNDED 5-11-77	16. DATE T.D. REACHED 6-2-77	17. DATE COMPL. (Ready to prod.) dry	18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 4322' G.L.	19. ELEV. CASINGHEAD
20. TOTAL DEPTH, MD & TVD 3870'	21. PLUG, BACK T.D., MD & TVD 3841	22. IF MULTIPLE COMPL., HOW MANY*	23. INTERVALS DRILLED BY →	24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 3734-3785

26. TYPE ELECTRIC AND OTHER LOGS RUN

Gamma Ray - Neutron

23.

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#	431	11"	400 SX.	None
4-1/2"	10.5#	3870	7-7/8"	300 SX.	1700

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
None					None		

31. PERFORATION RECORD (Interval, size and number)

3734-3785 0.41" 22 holes

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
3734-3785	A W/500 g
3734-3785	F W/40000 R.O. + 50,000#

33.*

PRODUCTION

DATE FIRST PRODUCTION None		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)				WELL STATUS (Producing 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—BBL.	GAS—MCF.	WATER—BBL.	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 foregoing and attached information is complete and correct as determined from all available records

SIGNED  TITLE Engineer

DATE 7-13-79

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

Location is ready for inspection.

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 33.

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 POROSITY ZONES:

SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF: CORRELATION INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL, TESTED, CEMENTION, SED. TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.
San Andres	3734	3785	Recovered wtr thru pfs.

38.

GEOLOGIC MARKERS

NAME	MEAS. DEPTH	TRUE VERT. DEPTH
Yates San Andres	1765 2875	

JUL 26 1973

O.C.D. MORRIS OFFICE