

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See 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 ☐		ACCEPTED FOR RECORD Other _____	
b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐		Other _____	
2. NAME OF OPERATOR Exxon Corporation		U.S. GEOLOGICAL SURVEY ROSWELL, NEW MEXICO	
3. ADDRESS OF OPERATOR Box 1600 Midland, TX 79702		NOV 26 1980	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 2100' FSL and 1980' FEL At top prod. interval reported below At total depth			
14. PERMIT NO.		DATE ISSUED	
15. DATE SPUDDED 6/17/80		16. DATE T.D. REACHED 6/30/80	
17. DATE COMPL. (Ready to prod.) 11-5-80		18. ELEVATIONS (DF, REB, RT, GR, ETC.)* KB 4408	
19. ELEV. CASINGHEAD ---		20. TOTAL DEPTH, MD & TVD 4300	
21. PLUG, BACK T.D., MD & TVD 4280		22. IF MULTIPLE COMPL., HOW MANY* ---	
23. INTERVALS RECEIVED		24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 3851 - 4114	
25. WAS DIRECTIONAL SURVEY MADE No		26. TYPE ELECTRIC AND OTHER LOGS RUN GR-CAL-SNP, GR-BHC, Sonic, GR-CAL-DLL-MLL	
27. WAS WELL CORED No		28. CASING RECORD (Report all strings set in well)	
Casing Size		Weight, lb./ft.	
8 5/8		24	
5 1/2		14	
Depth Set (MD)		Hole Size	
1650		12 1/4	
4288		1 7/8	
Cementing Record		Amount Pulled	
850 sx.		---	
1650 sx.		---	
29. LINER RECORD		30. TUBING RECORD	
Size		Size	
Top (MD)		Depth Set (MD)	
Bottom (MD)		Packer Set (MD)	
Sacks Cement*		Screen (MD)	
2 7/8		4100	
None		None	
31. PERFORATION RECORD (Interval, size and number) 3851 - 4114 56 shots		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
Depth Interval (MD)		Amount and Kind of Material Used	
3851 - 4114		Acidize w/12,000 gal. HCl acid. Acid frac. w/22,500 gal. KCl wtr. and 12,000 gal. acid.	
33.* PRODUCTION		34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)	
Date First Production 8-26-80		Production Method (Flowing, gas lift, pumping—size and type of pump) Pump	
Well Status (Producing or shut-in) PROD		35. LIST OF ATTACHMENTS	
Date of Test 11-5-80		Hours Tested 24	
Choke Size Pump		Prod'n. for Test Period Pump	
Oil—BBL. 1		Gas—MCF. TSTM	
Water—BBL. 28		Gas—Oil Ratio ---	
Flow. Tubing Press. ---		Casing Pressure ---	
Calculated 24-Hour Rate ---		Oil Gravity-API (Corr.) ---	
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records		SIGNED <u>D.P. Lowe</u> TITLE <u>Sr. Administrator</u> DATE <u>11-19-80</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 PRESSURES, AND RECOVERIES

FORMATION	TOP		BOTTOM	DESCRIPTION, CONTENTS, ETC.
	MEAS. DEPTH	TRUE VERT. DEPTH		
RUSTLER	1647	1647	2106	
YATES	2106	2106	2222	
SEVEN RIVERS	2222	2222	3251	
SAN ANDRES	3251	3251	4300	

38. GEOLOGIC MARKERS

NAME	TOP	
	MEAS. DEPTH	TRUE VERT. DEPTH
RUSTLER	1647	1647
YATES	2106	2106
SEVEN RIVERS	2222	2222
SAN ANDRES	3251	3251

RECEIVED
DEC 8 1980
OIL CONSERVATION DIV