

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY
SUBMIT IN DUPLICATE*
NEW MEXICO CONS. COM. Serial
Drawer DD
Artesia, NM 88210Form approved.
Budget Bureau No. 42-R355.5.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL: OIL WELL ☒ GAS WELL ☐ DRY ☐ Other _____		5. LEASE DESIGNATION AND SERIAL NO. N. M. - 15016	
b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other _____		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
2. NAME OF OPERATOR Exxon Corporation		7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR Box 1600, Midland, TX 79702		8. FARM OR LEASE NAME Wattam Federal	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements) At surface 660' FSL and 660' FEL of Section At top prod. interval reported below At total depth		9. WELL NO. 10	
14. PERMIT NO. _____ DATE ISSUED _____		10. FIELD AND POOL, OR WILDCAT Cato San Andres	
15. DATE SPUDDED 2-20-82		11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA Sec. 7, T 8 S, R 31 E	
16. DATE T.D. REACHED 3-1-82		12. COUNTY OR PARISH Chaves	
17. DATE COMPL. (Ready to prod.) Shut in 8-2-82 *		13. STATE N. M.	
18. ELEVATIONS (DF, REB, RT, GR, ETC.)* 4202 GR		19. ELEV. CASINGHEAD	
20. TOTAL DEPTH, MD & TVD 3925		21. PLUG, BACK T.D., MD & TVD 3685	
22. IF MULTIPLE COMPL., HOW MANY* -		23. INTERVALS DRILLED BY 0-	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 3700 - 3857 * Possible disposal well		25. WAS DIRECTIONAL SURVEY MADE NO	
26. TYPE ELECTRIC AND OTHER LOGS RUN SWN, DGF		27. WAS WELL CORED NO	
28. CASING RECORD (Report all strings set in well)			
CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE
8 5/8	24# K-55	1198	12 1/4
5 1/2	14#	3925	7 7/8
See reverse side for plug back			
29. LINER RECORD			
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*
30. TUBING RECORD			
SIZE	DEPTH SET (MD)	PACKER SET (MD)	
2 7/8	3698	none	
31. PERFORATION RECORD (Interval, size and number)			
3700 - 3857 97 shots			
3341 - 3669 63 shots			
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED	
3700-3857		acidiz w/9100 gals 20% NE HCL	
3341-3669		frac 60,000 gal KCL WTR plus **	
3341-3669		Spot 380 gal acid across perms	
3341-3669		acidized w/1880 gas 15% HCL	
33.* PRODUCTION**36,000# 20-40 sand, 42,000# 10-20 sand.			
DATE FIRST PRODUCTION NON PRODUCTIVE		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) WELL STATUS (Producing or shut-in)	
DATE OF TEST	HOURS TESTED	CHOKER SIZE	PROD'N. FOR TEST PERIOD
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)		TEST WITNESSED BY PETER W. CHESTER	
35. LIST OF ATTACHMENTS		JUN 1 1984	
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records			
SIGNED <u>L.H. Lowe</u>		TITLE <u>Sr. Administrator</u>	
		DATE <u>5-16-84</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.

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.
Yates	1756	1855	
Seven RVS Queen	1855	2262	
Queen Gray Burl	2262	2925	
San Andres	2925	3925	
			28 7-5-82 Set Cmt retainer at 3690'. Pumped 200 sx cl. c - Well took on vacuum.
			29 7-6-82 Pumped 300 sx cl. c cmt. - Well took on vacuum.
			30 7-7-82 Pumped 300 sx cl.c cmt. - Well squeezed - Reverse out 1 bbl.

38. GEOLOGIC MARKERS

NAME	TOP	
	MEAS. DEPTH	TRUE VERT. DEPTH
Yates	1756	1756
Seven RVS Queen	1855	1855
Queen Gray Burl	2262	2262
San Andres	2925	2925
		vacuum.

RECEIVED
JUN 11 1984
O.C.D.
ARTESIA OFFICE

RECEIVED BY
JUN 05 1984
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ARTESIA, OFFICE