

NM OIL CONS. COMMISSION  
 Drawer DD  
 Artesia, NM 88210

UNITED STATES

SUBMIT IN DUPLICATE

(See oil  
 instructions on  
 reverse side)

Form Approved

Budget Bureau No. 42-R355.5.

DEPARTMENT OF THE INTERIOR

GEOLOGICAL SURVEY

## WELL COMPLETION OR RECOMPLETION REPORT AND LOG \*

RECEIVED

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 \_\_\_\_\_ FEB 28 1983

2. NAME OF OPERATOR

Mineral Development, Inc.

O. C. D.

3. ADDRESS OF OPERATOR

Two Midland National Center Suite 905

Midland, Texas 79701

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)\*

At surface 660 FSL &amp; 1980' FEL Of Sec 15.

At top prod. interval reported below

At total depth

14. PERMIT NO.

DATE ISSUED

11-17-82

12. COUNTY OR

Chaves

13. STATE

NM

15. DATE SPUNDED

12-15-82

16. DATE T.D. REACHED

12-26-82

17. DATE COMPL. (Ready to prod.)

18. ELEVATIONS (DF, REB, RT, GR, ETC.)\*

19. ELEV. CASINGHEAD

20. TOTAL DEPTH, MD &amp; TVD

21. PLUG, BACK T.D., MD &amp; TVD

22. IF MULTIPLE COMPL., HOW MANY\*

23. INTERVALS DRILLED BY

ROTARY TOOLS

CABLE TOOLS

10 - 4000'

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)\*

25. WAS DIRECTIONAL SURVEY MADE

No

26. TYPE ELECTRIC AND OTHER LOGS RUN

Dual Laterlog &amp; Comp. Density &amp; Comp. Neutron.

27. WAS WELL CORED

No

28. 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	1359	12 1/4"	550 sks Lite & 200 sks C	C none

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)

31. PERFORATION RECORD (List size and number)

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED

FEB 23 1983

OIL & GAS  
 MINERALS MANAGEMENT SERVICE

ROSWELL, NEW MEXICO

PRODUCTION

33.\*

DATE FIRST PRODUCTION

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.)

35. LIST OF ATTACHMENTS

36. I hereby certify that the foregoing and attached information is complete and correct as furnished from all available records

SIGNED

W. J. Motley

TITLE

V. P. Production

DATE

2-21-83

\*(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 for each interval identified, for each additional interval to be separately produced, showing the additional data pertinent to such interval.

**Item 29:** "Stuck Cement": Attach 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 FORMS ZONES:

SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF; CONDU 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.
San Andres (P-1)	3836	3909	DST #1 3832 - 3889' (57'). Open 15 mins pre-flow & 30 mins final flow. Recvrd 10' drilling mud. HYP in 2097 15" PF 74-76 45" ISIP 74 - 237 30" FF 87 - 87 60" FSIP 87 - 147 HYP out 2092 Sample chamber - no recovery
San Andres (P-2)	3924	3938	Electric logs indicate this zone is water

## 38. GEOLOGIC MARKERS

NAME	TOP	
	MEAS. DEPTH	TRUE VERT. DEPTH
Rustler	1428	(+2852)
Yates	1953	(+2327)
San Andres	3138	(+1142)
TD	3999	(+281)