

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE

(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 <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> DRY <input type="checkbox"/> Other _____		5. LEASE DESIGNATION AND SERIAL NO. NM256521 & B	
b. TYPE OF COMPLETION: NEW WELL <input checked="" type="checkbox"/> WORK OVER <input type="checkbox"/> DEEP-EN <input type="checkbox"/> PLUG BACK <input type="checkbox"/> DIFF. RESRV. <input type="checkbox"/> Other _____		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
2. NAME OF OPERATOR Yates Drilling Company		7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR 207 South 4th Street - Artesia, NM 88210		8. FARM OR LEASE NAME Federal "AA"	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 1980' FNL & 990' FEL Sec. 4-13S-31E At top prod. interval reported below At total depth		9. WELL NO. 1	
14. PERMIT NO.		DATE ISSUED	
15. DATE SPUDDED 4-26-72		16. DATE T.D. REACHED 5-1-72	
17. DATE COMPL. (Ready to prod.) 5-19-72		18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 4112' GR	
19. ELEV. CASINGHEAD		10. FIELD AND POOL, OR WILDCAT Wildcat	
20. TOTAL DEPTH, MD & TVD 2822'		11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA Sec. 4-13S-31E Unit H NMPM	
21. PLUG, BACK T.D., MD & TVD 2783'		12. COUNTY OR PARISH Chaves	
22. IF MULTIPLE COMPL., HOW MANY*		13. STATE NM	
23. INTERVALS DRILLED BY 0-2822'		24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 2638-2650' Queen	
25. WAS DIRECTIONAL SURVEY MADE No		26. TYPE ELECTRIC AND OTHER LOGS RUN Laterolog, BHC Acoustilog	
27. WAS WELL CORED no		28. CASING RECORD (Report all strings set in well)	
29. LINER RECORD		30. TUBING RECORD	
31. PERFORATION RECORD (Interval, size and number) 2638-2650' 2-shots/ft.		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC. DEPTH INTERVAL (MD) 2638-2650' AMOUNT AND KIND OF MATERIAL USED 250 gals mud acid and 750 gals 15% HCL	
33. PRODUCTION DATE FIRST PRODUCTION 5-13-72 PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Flowing WELL STATUS (Producing or shut-in) Shut in		34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) XXXXXXXXXX	
35. LIST OF ATTACHMENTS Deviation Survey		36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records	
SIGNED <u>Ray J. J.</u>		TITLE <u>Engineer</u>	
DATE <u>6-1-72</u>			

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