SUBMIT IN DUPLIC. UN ED STATES DEPARTMENT OF THE INTERIOR

(See other in-structions on

Form approved. Budget Bureau No. 42-R355.5.

			GEOL				HEAL Z) PK		ructions verse sid		ESIGNA	TION AND SERIAL NO
											NM	551:	29
WELL CO		по		ECOM						OG*			OTTEE OR TRIBE NAM
b. TYPE OF COL		N:	N. D	Y11	5.49	F.	Other				7. CNIT AG	REEME	NT NAME
NEW WELL W		LT EN	 	BACK	RES		Other				S. FARM OF	LEASI	E NAME
			Υ .								Woo	odmai	n Federal
Fred Pool 3. ADDRESS OF OP	DELLI	ing,	11.C ·			decrees the state of the company					9. WELL NO.).	
P. O. Box 4. LOCATION OF W	1393,	Rosw	11. N.	M	8820]						10. FIELD A	ND PO	OL, OR WILDCAT
At surface 1	.485 '	mt 19001: FNL	on clearly 1155' 9	ana in 60 EL	cordanc.	e with a	iy State requ	uire me	nts)*			, R., M.,	SA OR BLOCK AND SURVE
At top prod. In	iterval re	ported ba	elow								OR ARE	A	
At total depth											Sec. 20	, 10	BS, R30E
						RMIT NO		DATE	SUSUED		12. COUNTY PARISH Chaves	OR	13. STATE
15. DATE SPUDDED			EVCTED			(Ready 1	o prad.)	lS. ELI	EVATIONS	(DF, REI	3, KT, GR, ETC)*	19.	ELEV. CASINGHEAD
10-13-84 20. TOTAL DEPTH, MD	1	-20-8			5-84				4148 (1	4149
3590			3548			HOM. V				TERVALS		OLS	CABLE TOOLS
24. PRODUCING INTE					воттом,	NAME (MD ASD TVD) *				2	5. WAS DIRECTIONAL SURVEY MADE
		,											Yes
26. TYPE ELECTRIC												27. v	AS WELL CORED
Sidewall N	eutror	1 & Ga	imina-Ka	<u> </u>		Translation a gas as							No
CASING SIZE	WEIG	HT. LB.,	FT. , 1.1.	CASING Přá scr			ort all strin	gs		EMENTIN	G RECORD	· ·	ı
8 _5/8''	24 1	b & 3	12 15	1071	· · · · · · · · · · · · · · · · · · ·	ļ	j²	-					AMOUNT PULLED
41,11	:	[0.5]	1	3590			78 ¹¹	-	<u> 1084</u> 300	sks.			
										DICES .			
23.	· · · · · · · · · · · · · · · · · · ·					<u> </u>							
SIZE	TOP (A		IINER RE						30.		TUBING REC	ORD	
				3197 57	ACKS CE	MENT.	SCREEN (MD)	SIZ		DEPTH SET (M	(D)	PACKER SET (MD)
									2 3/	8"-	3428		None
31. PERFORATION RE			e and nun	her)			0.6	Αί	ID. SHO	T FRAC	TURE, CEMEN	m gott	EFZE POO
3458-64	12 ho						DEPTH IN				MOUNT AND KIN		
3470-82 3518-24	24 ho						3458-3	524			00 gal. 20		
3310-24	12 ho	016:8					3458-3						L 48 shots
33.*		•				****				-			
DATE FIRST PRODUCT	TON	PROL	CTIGN N. 641	GCL (Flo)	icing, ga	s lift, pr	UCTION mping-size	and t	une of m	(m,n)	1 37 97 7	SIZE A TOLEY	n / Ono.Incian
11-5-84		!	umping						*** ", p.	·p)	Phu	t-in) t-in	S (Producing or
ATE OF TEST	HOURS	TUSTED	CHOF1.	SIZE	PROB'N TEST I		OHBBL.		GAN3	CP.	WATER-BBL		GAS-OIL RATIO
11-5-84 TLOW. TUBING PRESS.	2+	PUSSUR				—≫	1/2		TS	TM	1, 1,	-	
			24-710.	R RATE	01F—8	_	GAS-	-мск. ГЅТМ	ĺ	WATER	BBL,	oil Gi	RAVITY-API (CORR.)
34. DISPOSITION OF G.	AS (Sold,	used for	fuel, cented	!, etc.)			/: <u></u>				TEST WITNES		
None 5. list of attach:	MENTS										Fred Po	01,	Jr.
2 Sidewall 36. I hereby certify	l Neut	ron &	Camma.	-Ray	mation	ig carrel	eta und ace	000	المستعددة والم	n vi e	(N. p 2) 11	- 1	
SIGNED	<u>}_</u>		July (1		LE	Pres:			ned 110m			_7_05
		4		17	* 1 7	****			<u></u>		DATE		-7-85

NSTRUCTIONS

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 hoch, pursuant to applicable Federal and/or State laws and regulations. Any necessary special instructions concerning the use of this form and the number of course 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.

tion and pressure tests, and directional surveys, should be attached bereto, to the extent required by applicable Federal and/or State laws and regulation should be listed on this form, see item 35. 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 formaments

or Federal office for specific instructions. Item 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirement

t local State

Hems 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 33 showthere 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, 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 a attauments.

for each additional interval to be separately produced, showing the additional data pertinent to such interval.

Hem 29: "Sacks Coment": 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.)

RECEIVED BY FEB 8 1955 O. C. D. ARTESIA, OFFICE RAMS. DEPTIG	FORMATION TOP BOTTOM DESCRIPTION, CONTENTS, ETC.	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.		40J.
Yates 7 Rivers Queen San Andres Pi P1 P2					NAME	MEAS. DEPTH
Yates 7 Rivers Queen San Andres Pi P1 P2						
7 Rivers Queen San Andres Pi P1 P2					 Yates	1569
Queen San Andres Pi P1 P2					 7 Rivers	1652
San Andres Pi P1 P2					 Queen	2215
Pi P1 P2					 San Andres	2736
P2					Pi	3282
P2				DECEIVED BY		3447
O. C. D. ARTESIA, OFFICE				NT Cristo de	₽1	3508
O. C. D. ARTESIA, OFFICE					P1 P2	
ARTESIA, OFFICE				FEB 8 1985	P1 P2	
				FEB 8 1985 O. C. D.	P1 P2	
				FEB 8 1985 O. C. D. ARTESIA, OFFICE	P1 P2	
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