Rev. 5-63) UN'	ED STATES	submit in dupli M_OHL_COMS, dej	CATE*	Form approved. Budget Bureau No. 42-R355.5.
DEPARTMEN	OF THE INT	ERLOR SI		ASE DESIGNATION AND SERIAL NO.
GEOLOG	ICAL SURVEY	Artesia, WM 88	37.0	™-015807
	<del></del>		6 00	INDIAN, ALLOTTEE OR TRIBE NAME
WELL COMPLETION OR REC				
1a. TYPE OF WELL: OII. X GA	S. DRY DRY	ther RECEIVED B	<u>Y</u>   17.703	NIT AGREEMENT NAME
b. TYPE OF COMPLETION:	rg 🗂 piff 🗔	Nous		$-\frac{q_2}{2}$
	CK DIFF  RESVR D	ther NOV 27	8. FA	RM OR LEASE SAMB
2. NAME OF OPERATOR			کے ہے۔ ا	Garner Federal
Yates Drilling Company				ELL SO.
3 ADDRESS OF OPERATOR		the same water and the same in	10.	TELD AND POOL OR WILL CAT
207 South 4th Street, Art 4. LOCATION OF WELL (Report location clearly an	esia, N.M. 882	State requirements)*		E. Charle E.
At surface 2310' FNL & 660' FWI			11.	SEC. T., R., M., OR BLOCK AND BURVEY
_		2	1	DR AREA CELLE
At top prod. interval reported below			Se	c. 3-T13S-R31E
At total depth				
	14, PERMIT NO.	DATE ISSUED		COUNTY OR 13. STATE PARISH
				aves N.M.
5. DATE SPUDDED   16. DATE T.D. REACHED   17	, DATE COMPL. (Ready to		(DF, RKB, RT, GR,	ETC.) • 19. ELEV. CASINGHEAD
10-6-84 10-10-84 20. TOTAL DEPTH, MD & TVD 21. PLUG, BACK T.D.,	10-31-84 MD 4 TVD   22. IF MULT		GL ROTERVALS ROT	ARY TOOLS CABLE TOOLS
	HOW MA		RILLED BY	ŧ.
2850 2830 2830 2830 2830 2830 2830 2830 283	TOP, BOTTOM, NAME (MI	AND TVD)*	> <u>R</u>	otary   25, WAS DIRECTIONAL
		1		SURVEY MADE
2691-'2703', Queen				No
26. TYPE ELECTRIC AND OTHER LOGS RUN		<del></del>		27. WAS WELL CORED
Compensated Neutron-Litho D	ensity, Dual La	terolog Micro S	FL	No
28.	CASING RECORD (Repo	rt all ätrings set in well)		
			EMENTING RECOR	AMOUNT PULLED
		1/4" 250 s		
<u>5 1/2" 14#</u> 2	848.77' 7	7/8" 250 s	exs.	
			AND IN LINE	
LINER REC	1()PT)	1 30.	TURIN	IG RECORD
29. LINER REC		arran da aan Talaa		SET (MD) PACKER SET (MD)
5126 107 (20)			3/8" 264	
			70	
31. PERFORATION RECORD (Interval, size and num	ber)	32. ACID, SH	OT, FRACTURE,	CEMENT SQUEEZE, ETC.
2691'-2703', 16 holes, .50"	. 2 SPF.	DEPTH INTERVAL (MD)	AMOUNT	AND KIND OF MATERIAL USED
as follows:	,,	2691'-2703'	750 gals	. 15% CL acid, 20000
2691', 92', 93', 94', 2700'	, 01', 02°		gals. WI	7-30 (25% CO2) and
20,12,12,12				(13300# 20/40 and 9000
			10/20) s	sand.
33.*	PRG1) HOD (Flowing, gas lift, pu	UCTION	n(mn)	WELL STATUS (Producing or
DATE FIRST PRODUCTION PRODUCTION MET		mining size and type of	<i>pup</i> ,	shut-in) Producing
10-20-84  DATE OF TEST   HOURS TESTED   CHOKE	Flowing size PROD'N FOR	OIL BBL. GAS	MCF, WA	TERBBL GAS-OIL RATIO
	TEST PERIOD	1	04	5241/1
10/31/84 24 hrs. 1/	ATED OIL—BBL.	GASMCF.	WATER BEL.	OIL GRAVITY-API (CORR.)
24-Rot	E RATE   58	304	, l	_
100# 175# 34. DISPOSITION OF GAS (Sold, used for fuel, vented			TES	I WITNESSED BY
vented		ACCEPTED FO	R RECORD _ B:	ill Davis
vented 35. LIST OF ATTACHMENTS		PETER W. C	HESTER	
		NOV-10	1004	
36. I hereby certify that the foregoing and atta	ched information is comp.	lete and cortect as deta	mi SO Trom all'a	vilable records
SIGNED Kasen J. Leidm	0- p-	roduction Clerk	4	DATE 11/5/84
signed	TITLE I	Jude Cross Office		DATE

## 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 attachment

should be listed on this form, see item 35.

Hem 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.

Hem 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. 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 24 show the production from 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 identifies 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.)

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37. SUMMARY OF POROUS ZONES:	TANT ZONES OF PO	ROSITY AND CONTEX	MARY OF POROUS ZONES: SHOW ALL IMPORTANT ZONES OF FOROSITY AND CONTENTS THERROY; CORED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING	38. G <b>EOL</b> OG	GEOLOGIC MARKERS	
POPMATION NIERVAL	TOP	BOTTOM	PRINTING TOP BOTTOM DESCRIPTION, CONTENTS, STC.		101	-
					MEAS, DEPTH	TRUE VENT. DEFT
				Anhydrite Salt	1130 <b>'</b> 1210 <b>'</b>	
				Base of Salt	1810'	
				Yates Seven Rivers	2066	
				Queen	2687'	
		,				
		,				
					<del></del>	
		,				