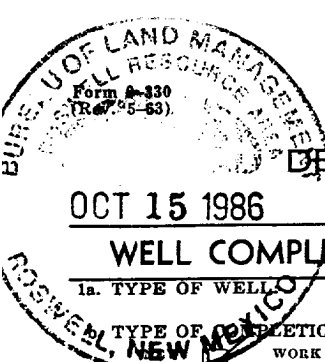




N. M. OIL COMMISSION

P. O. BOX 1900

HOBBS, NEW MEXICO 88240

SUBMIT IN DUPLICATE*

(See other instructions on reverse side)

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

OCT 15 1986

DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL: OIL WELL ☐ GAS WELL ☐ DRY ☒ Other _____TYPE OF COMPLETION: WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other _____

2. NAME OF OPERATOR

CONOCO INC.

3. ADDRESS OF OPERATOR

P. O. Box 460, Hobbs, N.M. 88240

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

At surface

Unit F
1980' FNL & 1986' FNL

At top prod. interval reported below

At total depth

14. PERMIT NO.

DATE ISSUED

30-005-21052

NA

5. LEASE DESIGNATION AND SERIAL NO.

NM-60052

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Mescalero Federal

9. WELL NO.

10. FIELD AND POOL, OR WILDCAT

Undesignated Devonian

11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA

Sec. 11 - 12S - 30E

12. COUNTY OR PARISH
Chaves13. STATE
NM

15. DATE SPUNDED 1/14/86 16. DATE T.D. REACHED 3/10/86 17. DATE COMPL. (Ready to prod.) Never completed 18. ELEVATIONS (DF, REB, RT, GR, ETC.)* 3998' GL 19. ELEV. CASINGHEAD -

20. TOTAL DEPTH, MD & TVD 10,554' 21. PLUG BACK T.D., MD & TVD Well was plugged 22. IF MULTIPLE COMPL., HOW MANY* - 23. INTERVALS DRILLED BY - ROTARY TOOLS All CABLE TOOLS -

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

No interval ever produced

25. WAS DIRECTIONAL SURVEY MADE

Yes

26. TYPE ELECTRIC AND OTHER LOGS RUN

GR-DLL-MSFL-CAL, NGT-LDG-CUL, GR-sonic, GR-Long Space Sonic

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
13 3/8"	48#	506'	17 1/2"	410 SXS Class "C" w/4% gel	100 SXS
9 5/8"	36#	4299'	12 1/4"	2113 SXS Class "C" w/2% Cal/2	425 SXS
			8 7/8"	hole drilled to TD but never cased.	

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
		NONE	RAN			NONE SET	

31. PERFORATION RECORD (Interval, size and number)

DST'D Atoka and Devonian Formation
NO zone ever perforated

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED

33.* PRODUCTION

DATE FIRST PRODUCTION	PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Well P & A'd on 3/22/86	WELL STATUS (Producing or shut in) ACCEPTED FOR RECORD PETERSON-CHESTER
DATE OF TEST	HOURS TESTED	CHOKE SIZE
PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE
OIL—BBL.	GAS—MCF.	WATER—BBL.
		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 determined from all available records

SIGNED

TITLE

Administrative Supervisor

DATE

10/14/86

*(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, 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				38. GEOLOGIC MARKERS		
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH	TRUE VERT. DEPTH
Devonian	10,220'	10,554'	DST #1 Rec. 8571' Mud	Yates	1556'	
"	10,227'	10,305'	DST #2 Rec. 644' oil, 5694 H ₂ O, 1500' water	Queen	2280'	
Atoka	9322'	9543'	DST #4 Rec. 406' gas & some H ₂ O; cmt, drill fluid.	San Andres	2840'	
				Glorieta	4098'	
				Yeso	4212'	
				Wolfcamp	7595'	
				Cisco	8188'	
				Canyon	8520'	
				Strawn	8922'	
				Atoka	9250'	
				Mississippi	9580'	
				Woodford	10235'	
				Devonian	10257'	

RECEIVED
NOV 13 1986
HOBBS