

UNITED STATES N. M. OIL CONS. COMMISSION
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
HOBBS, NEW MEXICO 88240

Form approved.
Budget Bureau No. 1004-0137
Expires August 31, 1985

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL: OIL WELL ☐ GAS WELL ☐ DRY ☒ Other _____		5. LEASE DESIGNATION AND SERIAL NO. NM-60052	
b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other _____		6. IF INDIAN, ALLOTTEE OR TRIBE NAME Culp Ranch	
2. NAME OF OPERATOR Foy and Middlebrook		7. UNIT AGREEMENT NAME Culp Ranch	
3. ADDRESS OF OPERATOR 310 W. Texas, Suite 210, Midland, Texas 79701		8. FARM OR LEASE NAME Culp Ranch	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 330' FNL & 990' FWL At top prod. interval reported below At total depth		9. WELL NO. 2	
14. PERMIT NO. DATE ISSUED 1-18-88		10. FIELD AND POOL, OR WILDCAT Graham Springs	
15. DATE SPUDDED 6-12-88		11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA Section 11, T-12-S, R-30-E	
16. DATE T.D. REACHED 8-3-88		12. COUNTY OR PARISH Chaves	
17. DATE COMPL. (Ready to prod.)		13. STATE NM	
18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 4010 DF		19. ELEV. CASINGHEAD 4,011'	
20. TOTAL DEPTH, MD & TVD 10,424'		21. PLUG, BACK T.D., MD & TVD	
22. IF MULTIPLE COMPL., HOW MANY*		23. INTERVALS DRILLED BY ROTARY TOOLS CABLE TOOLS All	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* N/A		25. WAS DIRECTIONAL SURVEY MADE No	
26. TYPE ELECTRIC AND OTHER LOGS RUN Laterolog, Neutron Log, Dipmeter, Acoustic Log		27. WAS WELL CORED No	
33. PRODUCTION			
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)	
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—BBL.		OIL GRAVITY-API (CORR.)	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)		TEST WITNESSED BY	
35. LIST OF ATTACHMENTS		36. I hereby certify that the foregoing and attached information is complete and correct as determined from my available records	
SIGNED <u>[Signature]</u>		TITLE <u>Partner</u>	
DATE <u>6/22/89</u>			

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

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):

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	TOP	
					MEAS. DEPTH	TRUE VERT. DEPTH
ATOKA	9395	9450	SANDSTONE			
MORROW	9660	9700	SANDSTONE			
DEVONIAN	10,360	10,400	CARBONATE			
DST DEVONIAN			DST # 1 10,309 - 367 1FP 132-145 6 Min. 1SIP 3958 46 Min. FFP 145-145 41 Min. FSIP 3105 30 Min. FHP 5205 BHT 166° F REC 240' D MUD DST # 2 10,300 - 10,378 REC 330' D MUD 1FP 157-170 1SIP 4121 FFP 170-245 FSIP 4083 BHT 168° DST # 3 10,366 -393 1FP 395-470 5 Min. 1SIP 4171 65 Min. FFP 453-2340 150 Min. FSIP 4171 REC 372' D MUD 4464' WATER			

38. GEOLOGIC MARKERS

RECEIVED
JUL 18 1989
OCD
HOBBS OFFICE