

**UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY**

SUBMIT IN DUPLICATE*

Form approved, 10-1-88
Budget Bureau No. 42-2386.6

WELL COMPLETION OR RECOMPLETION REPORT

1. TYPE OF WELL: OIL WELL ☐ GAS WELL ☐ DRY ☒ Other ☐

2. TYPE OF COMPLETION:

NEW WELL ☐ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. DOWN ☐

3. NAME OF OPERATOR

Read & Stevens, Inc.

4. ADDRESS OF OPERATOR

P.O. Box 1518, Roswell, NM 88202

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

At surface

At top prod. interval reported below

At total depth

2310' FNL & 1980' FEL

14. PERMIT NO.

DATE ISSUED

6. LEASE DESIGNATION AND SERIAL NO.

NM-32408

7. IF INDIAN, ALLOTTEE OR TRIBE NAME

8. UNIT AGREEMENT NAME

FARM OR LEASE NAME

Cedar Point Federal

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Cedar Point Strawn

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

Sec 27-15S-30E

12. COUNTY OR PARISH

Chaves

13. STATE

NM

15. DATE SPUDDED

4-27-88

16. DATE T.D. REACHED

5-30-88

17. DATE COMPL. (Ready to prod.)

18. ELEVATIONS (DP, RMB, RT, OR, ETC.)*

4076' GL

19. ELEV. Casinghead

20. TOTAL DEPTH, MD & TVD

10730'

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)*

25. WAS DIRECTIONAL SURVEY MADE

NO

26. TYPE ELECTRIC AND OTHER LOGS RUN

GR-DU, GR-CNL-LDT

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	various	500'	17 1/2"	525 sx	Circ 125 sx to surf.
8 5/8	30/32#	3267'	11"	1150 sx tailed w/200 sx	Circ to surf.
	46/24#				

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	PACKER CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)

30. PERFORATION RECORD (Interval, size and number)

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED

Well PIA

32. PRODUCTION

DATE FIRST PRODUCTION PRODUCTION METHOD (Flowing, gas lift, pumping - size and type of pump) WELL STATUS (Producing or shut-in)

DATE OF TEST HOURS TESTED CHOKER SIZE PROD'N FOR TEST PERIOD OIL BBL GAS MCF WATER BBL GAN-OIL RATIO

FLOW, TUBING PRESS. CASING PRESSURE CALCULATED 24-HOUR RATE OIL BBL GAS MCF OIL GRAVITY-API (CORR.)

33. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)

TEST WITNESSED BY

34. LIST OF ATTACHMENTS

Deviation Survey

35. I hereby certify that the foregoing and attached information is complete and correct as shown on all available records

SIGNED

John C. Mapey

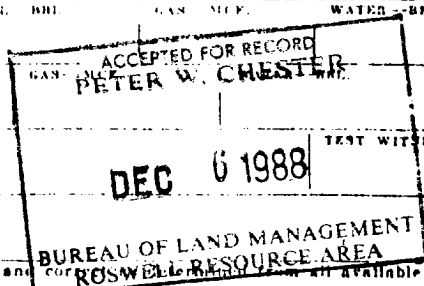
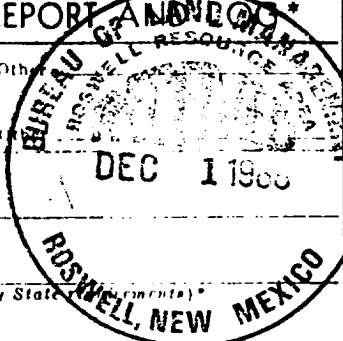
TITLE

Petroleum Engineer

DATE

11-30-88

*(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 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 33.

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: "Seals 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.)

27. SUMMARY OF PERFORATION ZONES			34. GEOLOGIC MARKERS	
SHOW ALL INTERVAL ZONES OF POROSITY AND CONTENTS THEREOF; CORED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTS, CUSHION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES				
FORMATION	TOP	BOTTOM	NAME	MEAS. DEPTH
Surf	50	0		
Glorietta	4730	4830		
Abo	6705	6855		
Bough C	9015	9165		
Atoka	10444	10644		

RECEIVED

DEC 8 1968

CCD
HOBBS OFFICE