

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other instructions on reverse side)

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

5. LEASE DESIGNATION AND SERIAL NO.

NM-2842-A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Federal "20"

9. WELL NO.

4

10. FIELD AND POOL, OR WILDCAT

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

Sec 20, T-13-S, R-33-E

12. COUNTY OR PARISH

Lea

13. STATE

New Mexico

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

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

b. TYPE OF COMPLETION:

NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other ☐

2. NAME OF OPERATOR

Coastal States Gas Producing Company

3. ADDRESS OF OPERATOR

Box 235, Midland, Texas 79701

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

At surface Unit Letter G, 2080' FNL & 2080' FEL, Sec 20,

At top prod. interval reported below, Lea County, New Mexico
same as above

At total depth

same as above

14. PERMIT NO.

DATE ISSUED

15. DATE SPUNDED 12-28-68 16. DATE T.D. REACHED 1-23-69 17. DATE COMPL. (Ready to prod.) 1-26-69 18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 4259.5' GL 19. ELEV. CASINGHEAD 4269.5'

20. TOTAL DEPTH, MD & TVD 9852' 21. PLUG, BACK T.D., MD & TVD 9852' 22. IF MULTIPLE COMPL., HOW MANY* - - - 23. INTERVALS DRILLED BY - - - ROTARY TOOLS Yes CABLE TOOLS

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 9713-15' Penn 9721-32' Penn 25. WAS DIRECTIONAL SURVEY MADE Yes

26. TYPE ELECTRIC AND OTHER LOGS RUN

Dual Induction-Laterolog, Microlog, Sidewall Neutron Porosity

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#	375'	17-1/2"	400 sacks Class "H" 2% CaCl	None
8-5/8"	24# & 32#	4075'	11"	300 sacks Class "C" 2% CaCl	None
5-1/2"	15.5# & 17#	9854'	7-7/8"	200 sacks Class "C"	None

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
- - -	- - -	- - -	- - -	- - -	2-3/8"	9630'	9566'

31. PERFORATION RECORD (Interval, size and number)

9713-15' (1/2" - 1 JSPF)
9721-32' (1/2" - 1 JSPF)

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
9713-15' & 9721-32'	1000 gals of 15% & 1000 gals of 3%

33.* PRODUCTION

DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)				WELL STATUS (Producing or shut-in)	
1-26-69		Flowing				Producing	
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
1-26-69	24 hrs.	24/64"	→	335	245	50	733:1
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)	
420#	- -	→	335	245	50	42.7°	

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

Vented

TEST WITNESSED BY

35. LIST OF ATTACHMENTS

Form C-104, 9-331, C-123, Deviation Survey, Dual Induction Laterolog

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records

SIGNED

TITLE

Div. Prod. Supt.

DATE January 27, 1969

*(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 11: 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 intervals, 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

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH	TRUE VERT. DEPTH
Wolfcamp Penn "C"	8974 9710	8998 9732	Limestone - oil & water Limestone - oil & water DST 9700-9730 (Penn) Open 2 hrs and 15 min. GTS in 3 min. Oil in 14 min. Flowed 75 bbls oil and no water in 2 hrs. Reversed out 36 bbls of oil. IFP - 1373; FFP - 2263; 60 min ISIP - 2543; 90 min FSIP - 2543.	Anhydrite Yates San Andres Tubb Abo Bough "B" Bough "C"	1670 2552 3966 6850 7613 9598 9710	+2600 +1718 + 304 -2580 -3343 -5328 -5440