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Form C-105  
Revised 1-1-65

# NEW MEXICO OIL CONSERVATION COMMISSION WELL COMPLETION OR RECOMPLETION REPORT AND LOG

5a. Indicate Type of Lease	
State <input type="checkbox"/>	Fee <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.	

1a. TYPE OF WELL						7. Unit Agreement Name	
OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> DRY <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>						None	
b. TYPE OF COMPLETION						8. Farm or Lease Name	
NEW WELL <input checked="" type="checkbox"/> WORK OVER <input type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input type="checkbox"/> DIFF. RESVR. <input type="checkbox"/> OTHER <input type="checkbox"/>						Elizabeth M. Hensley	
2. Name of Operator						9. Well No.	
Southern Petroleum Exploration, Inc.						1	
3. Address of Operator						10. Field and Pool, or Wildcat	
P. O. Box 1434, Roswell, New Mexico 88201						Wildcat	
4. Location of Well							
UNIT LETTER <u>E</u> LOCATED <u>1980</u> FEET FROM THE <u>North</u> LINE AND <u>660</u> FEET FROM						12. County	
THE <u>West</u> LINE OF SEC. <u>17</u> TWP. <u>1-S</u> RGE. <u>31-E</u> NMPM						Roosevelt	
15. Date Spudded		16. Date T.D. Reached		17. Date Compl. (Ready to Prod.)		18. Elevations (DF, RKB, RT, GR, etc.)	
8/28/70		9/2/70				4445 GR	
20. Total Depth		21. Plug Back T.D.		22. If Multiple Compl., How Many		23. Intervals Drilled By	
3536'						Rotary Tools 0 - 3536	
24. Producing Interval(s), of this completion - Top, Bottom, Name						25. Was Directional Survey Made	
						Yes	
26. Type Electric and Other Logs Run						27. Was Well Cored	
Gamma Ray-Sonic, No. 9 Laterolog, Microlaterolog and Sidewall Neutron						No	
28. CASING RECORD (Report all strings set in well)							
CASING SIZE		WEIGHT LB./FT.		DEPTH SET		HOLE SIZE	
8-5/8"		20#		324'		12-1/4"	
29. LINER RECORD				30. TUBING RECORD			
SIZE		TOP		BOTTOM		SACKS CEMENT	
None							
31. Perforation Record (Interval, size and number)				32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
				DEPTH INTERVAL			
				AMOUNT AND KIND MATERIAL USED			
33. PRODUCTION							
Date First Production		Production Method (Flowing, gas lift, pumping - Size and type pump)				Well Status (Prod. or Shut-in)	
None						Plugged	
Date of Test		Hours Tested		Choke Size		Prod'n. For Test Period	
Flow Tubing Press.		Casing Pressure		Calculated 24-Hour Rate		Oil - Bbl.	
34. Disposition of Gas (Sold, used for fuel, vented, etc.)						Test Witnessed By	
35. List of Attachments							
Gamma Ray-Sonic, No. 9 Laterolog, Microlaterolog, Sidewall Neutron & Deviation							
36. I hereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief. Affidavit							
SIGNED <u>B.G. Smith</u>				TITLE <u>District Manager</u>		DATE <u>Sept. 11, 1970</u>	

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SEP 14 1970

ON CONSERVATION OF WMA.