

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE

(See other in-
structions on
reverse side)Form approved.
Budget Bureau No. 42-R355.5.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL: OIL WELL ☐ GAS WELL ☒ DRY ☐ Other <i>Recomplete</i>		5. LEASE DESIGNATION AND SERIAL NO. <i>LC-029509 (6)</i>	
b. TYPE OF COMPLETION: NEW WELL ☐ WORK OVER ☒ DEEP EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other ☐		6. IF INDIAN ALLOTTEE OR TRIBE NAME	
2. NAME OF OPERATOR/ CONTINENTAL OIL COMPANY		7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR P. O. Box 460, Hobbs, N.M. 88240		8. FARM OR LEASE NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface <i>1980' FSL & 860' FWL BY SEC. 22</i> At top prod. interval reported below At total depth <i>Same</i>		9. WELL NO. <i>5</i>	
14. PERMIT NO.		10. FIELD AND POOL, OR WILDCAT	
DATE ISSUED		11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA	
15. DATE <i>Started</i> <i>9-15-73</i>		12. COUNTY OR PARISH	
16. DATE T.D. REACHED		13. STATE	
17. DATE COMPL. (Ready to prod.) <i>11-12-73</i>		14. ELEV. CASING HEAD	
18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* <i>4,022' DF</i>		15. WAS DIRECTIONAL SURVEY MADE	
20. TOTAL DEPTH, MD & TVD <i>13,939'</i>		16. ROTARY TOOLS	
21. PLUG, BACK T.D., MD & TVD <i>12,489'</i>		17. CABLE TOOLS	
22. IF MULTIPLE COMPL., HOW MANY*		18. WAS WELL CORRED	
23. INTERVALS DRILLED BY		19. WAS WELL CEMENTED	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* <i>2nd - 11,995</i> <i>Bottom - 12,454</i> <i>Mittum bar</i>		20. AMOUNT PULLED	
26. TYPE ELECTRIC AND OTHER LOGS RUN <i>GR-N & Cont. Bond Log</i>		21. WAS WELL CEMENTED	
27. CASING RECORD (Report all strings set in well)		22. WAS WELL CEMENTED	
28. LINER RECORD		23. TUBING RECORD	
29. PERFORATION RECORD (Interval, size and number) <i>12,418', 422', 425', 430', 434', 438', 442', 446', 450', & 454' w/155PF</i>		30. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC. DEPTH INTERVAL (MD) <i>12,418'-12,454'</i> AMOUNT AND KIND OF MATERIAL USED <i>2500 gals. 7 1/2 90 fluid</i> <i>W/80000 SEF W/155PF</i>	
31. PRODUCTION		32. PRODUCTION	
33. DATE FIRST PRODUCTION		34. PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)	
35. DATE OF TEST		36. HOURS TESTED	
37. CHOKER SIZE		38. PROD'N. FOR TEST PERIOD	
39. OIL—BBL.		40. GAS—MCF.	
41. WATER—BBL.		42. OIL GRAVITY—API (CORR.)	
43. FLOW. TUBING PRESS.		44. CASING PRESSURE	
45. CALCULATED 24-HOUR RATE		46. OIL—BBL.	
47. GAS—MCF.		48. WATER—BBL.	
49. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)		50. TEST WITNESSED BY	
51. LIST OF ATTACHMENTS		52. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records	
53. SIGNED <i>Robert Paul</i>		54. TITLE <i>Division Office Manager</i>	
55. DATE <i>2-7-74</i>		56. DATE	

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

USGS-4, File

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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, localities 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.)

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		39. WELL COMPLETION OR RECOMPLETION REPORT	
FORMATION	TOP	BOTTOM	NAME	MEAS. DEPTH	TRUE VERT. DEPTH
			Ruston	820	
			Salado	928	
			Tensillo	1480	
			Yates	2140	
			Queen	3090	
			Grayburg	3460	
			San Andres	3875	
			Glorieta	5375	
			Tubb	6910	
			Abbo	7528	
			Wolfcamp	9090	
			Cisno	10410	
			Strawn	11395	
			Emery	17945	
			Miss	12454	
			De	13540	

39. WELL COMPLETION OR RECOMPLETION REPORT

40. COATING

41. LOCATION OF WELL (Nearest town, road, or landmark)

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