

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 ☐		5. LEASE DESIGNATION AND SERIAL NO. LC-029405(2)	
b. TYPE OF COMPLETION: NHW ☐ 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 MCA Bty 1	
3. ADDRESS OF OPERATOR Box 460, Hobbs, New Mexico 88240		8. FARM OR LEASE NAME MCA Unit	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 990' FNL + 990' FEL of Sec. 20. At top prod. interval reported below Same At total depth Same		9. WELL NO. 258 (formerly Mitchell) A No. 5	
14. PERMIT NO.		10. FIELD AND POOL, OR WILDCAT Mali G-SA	
DATE ISSUED		11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA Sec. 20, T-17S, R32E	
12. COUNTY OR PARISH Lea		13. STATE N. Mex.	
15. DATE BEGUN Work started 5-18-70	16. DATE T.D. REACHED	17. DATE COMPL. (Ready to prod.) 5-19-70	18. ELEVATIONS (DF, REB, RT, GR, ETC.)* 4037' DF
19. ELEV. CASINGHEAD	20. TOTAL DEPTH, MD & TVD 5445'	21. PLUG, BACK T.D., MD & TVD 4200'	22. IF MULTIPLE COMPL., HOW MANY*
23. INTERVALS DRILLED BY	24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 4018-4118 San Andres		25. WAS DIRECTIONAL SURVEY MADE
26. TYPE ELECTRIC AND OTHER LOGS RUN			27. WAS WELL CORED
28. CASING RECORD (Report all strings set in well)			
CASING SIZE 7 7/8 4 1/2	WEIGHT, LB./FT. 24 9.5	DEPTH SET (MD) 825' 5445'	HOLE SIZE 9 7/8
CEMENTING RECORD 400 Circulated 400		AMOUNT PULLED none none	
29. LINER RECORD			
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*
30. TUBING RECORD			
SIZE 2 7/8	DEPTH SET (MD) 4121	PACKER SET (MD) 3940	
31. PERFORATION RECORD (Interval, size and number) 4118, 4106, 4101, 4091, 4084, 4072, 4032, 4018 With one JSPF		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
DEPTH INTERVAL (MD) 4018-4118		AMOUNT AND KIND OF MATERIAL USED 6,000 gals 15% LSTNE	
33. PRODUCTION			
DATE FIRST PRODUCTION 5-19-70	PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Flowing		WELL STATUS (Producing or shut-in) Producing
DATE OF TEST 5-25-70	HOURS TESTED 24	CHOKE SIZE 2 1/2	PROD'N. FOR TEST PERIOD 389
FLOW, TUBING PRESS. 240	CASING PRESSURE	CALCULATED 24-HOUR RATE 389	OIL—BBL. 152
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Sold		GAS—MCF. 115	
35. LIST OF ATTACHMENTS		WATER—BBL. 390.7	
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records		OIL GRAVITY-API (CORR.) 38	
SIGNED [Signature]		TEST WITNESSED BY M. M. K. Chambless	
TITLE Staff Supervisor		DATE 6-5-70	

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

USGS-4
MCA Partners 7-10

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 23 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 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: "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.)

FORMATION		TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH	TRUE VERT. DEPTH	
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				
					Rustley Salado Zansell Yates Seven Rivers Queen Grayburg San Andres	762 882 1940 2102 2465 3072 3463 3958		