

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.

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 J. M. HUBER CORPORATION						5. LEASE DESIGNATION AND SERIAL NO. NM 015072	
3. ADDRESS OF OPERATOR Suite 922 Vaughn Building, Midland, Texas						7. UNIT AGREEMENT NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 1980' FE & 2130' FS Lines At top prod. interval reported below At total depth						8. FARM OR LEASE NAME Stoltz Federal	
14. PERMIT NO.						9. WELL NO. 1	
DATE ISSUED						10. FIELD AND POOL, OR WILDCAT Morton Lower Wolfcamp	
15. DATE SPUDDED 12-13-65						11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA Section 12, T-15-S, R-34E	
16. DATE T.D. REACHED 1-19-66						12. COUNTY OR PARISH Lea	
17. DATE COMPL. (Ready to prod.) 2-4-66						13. STATE New Mexico	
18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 4068 RKB						19. ELEV. CASINGHEAD 4057	
20. TOTAL DEPTH, MD & TVD 10,400		21. PLUG, BACK T.D., MD & TVD 10,397		22. IF MULTIPLE COMPL., HOW MANY*		23. INTERVALS DRILLED BY 0-10,400	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* Lower Wolfcamp 10,388 - 10,242						25. WAS DIRECTIONAL SURVEY MADE No	
26. TYPE ELECTRIC AND OTHER LOGS RUN Dual Induction, Microlog, Sonic-Gamma Ray logs						27. WAS WELL CORED No	
28. CASING RECORD (Report all strings set in well)							
CASING SIZE		WEIGHT, LB./FT.		DEPTH SET (MD)		HOLE SIZE	
13-3/8		48# & 54#		370'		17-1/2"	
8-5/8		24# & 32#		4,330'		11"	
4-1/2		10.5# & 11.6		10,400'		7-7/8"	
CEMENTING RECORD		AMOUNT PULLED					
275/sx Incor (Circ.)		None					
200/sx " (Top-3614)		"					
240/sx " (Top-9750)		"					
29. LINER RECORD							
SIZE		TOP (MD)		BOTTOM (MD)		SACKS CEMENT*	
None							
SCREEN (MD)		30. TUBING RECORD					
		SIZE		DEPTH SET (MD)		PACKER SET (MD)	
		2-3/8		10,350		10,350	
31. PERFORATION RECORD (Interval, size and number) 10,388/2 holes, 10,363-368 w/5 holes, 10,334-339 w/10 holes. All following w/1 hole: 10,328-325-318-315-309-301-298-292-271-252-245-242-285-371-382 - all 1/2" holes							
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.							
DEPTH INTERVAL (MD)				AMOUNT AND KIND OF MATERIAL USED			
All above Perf.				3000 gals. 15% acid w/48 ball sealers.			
33. PRODUCTION							
DATE FIRST PRODUCTION 1-30-66		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Flowing				WELL STATUS (Producing or shut-in) Producing	
DATE OF TEST 2-13-66		HOURS TESTED 24 hrs.		CHOKE SIZE 16/64"		PROD'N. FOR TEST PERIOD 283	
FLOW. TUBING PRESS. 400		CASING PRESSURE 700		CALCULATED 24-HOUR RATE 283		OIL—BBL. 288	
DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Vented		OIL—BBL. 288		GAS—MCF. None		WATER—BBL. None	
LIST OF ATTACHMENTS		OIL GRAVITY-API (CORR.)		GAS-OIL RATIO 1018		TEST WITNESSED BY	

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

SIGNED

TITLE District Prod. Supt.

DATE 2-17-66

*(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 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.)

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	TOP TRUMPET DEPTH
Wolfcamp						
Lower Wolfcamp	10,240	Not penetrated	Tan Fxln ls w/porosity DST #1 - 10,295 - 380' (Wolfcamp). O/2 hrs. GTS in 1 minute. Increased to 750 MCF @ 30 min., and decreased in 1 hr. TSTM. Reversed out 140 bbls. oil plus 180' O&GCM. Rec. 90' O&GCM below circulating sub. IHP-4725#. ISIP-4025#(1-1/2 hrs), IFP 1060#, FPP-3660#, PSIP-4025#(2hrs), FWP-4725#.	T Rustler T Yates T San Andres T Tubb T Abo T "XX" T LWC Pay	1831 2981 4235 7304 8020 9794 10,240	+2237 +1082 - 167 -3235 -3952 -5726 -6172