

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other instructions on reverse side)

Form approved,
Budget Bureau No. 42-1

WELL COMPLETION OR RECOMPLETION REPORT AND LOG*

1a. TYPE OF WELL: OIL WELL ☒ GAS WELL ☐ DRY ☐ Other _____		5. LEASE DESIGNATION AND SERIAL NO. LC 029509-1	
b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEPEN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other _____		6. IF INDIAN, ALLOTTEE OR TRIBE _____	
2. NAME OF OPERATOR Continental Oil Company		7. UNIT AGREEMENT NAME MCA	
3. ADDRESS OF OPERATOR Box 460, Hobbs, New Mexico 88240		8. FARM OR LEASE NAME MCA Unit B	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 660' FNL Y 500' FEL, sec. 21, T-17S, R-32E, Lea County, N. Mex. At top prod. interval reported below same At total depth same		9. WELL NO. 245	
14. PERMIT NO. _____ DATE ISSUED _____		10. FIELD AND POOL, OR WILDCAT Maljama Express (GSA) Pool	
15. DATE STUDDERED 7-20-68		11. SEC., T., R., N., OR BLOCK AND SURVEY OR AREA Sec. 21, T-17S, R-32E	
16. DATE T.D. REACHED 7-28-68		12. COUNTY OR PARISH Lea	
17. DATE COMPL. (Ready to prod.) 8-28-68		13. STATE N. Mex.	
18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 4022 DF		19. ELEV. CASINGHEAD _____	
20. TOTAL DEPTH, MD & TVD 4130'		21. PLUG, BACK T.D., MD & TVD 4120'	
22. IF MULTIPLE COMPL., HOW MANY* _____		23. INTERVALS DRILLED BY _____	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* San Andres 3892' - 4114'		25. WAS DIRECT SURVEY MADE _____	
26. TYPE ELECTRIC AND OTHER LOGS RUN GAMMA RAY NEUTRON		27. WAS WELL CORED _____	
28. CASING RECORD (Report all strings set in well)			
CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE
8 5/8	24#	891'	12 1/4
5 1/2	14#	4,130'	7 7/8
CEMENTING RECORD		AMOUNT PULLED	
500 sacks		none	
475 sacks		none	
29. LINER RECORD			
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*
30. TUBING RECORD		PACKER SET (MD)	
SIZE	DEPTH SET (MD)		
2 3/8	3779'		
31. PERFORATION RECORD (Interval, size and number)			
3892, 3894, 3896, 3898, 3963, 3964, 4048, 4059, 4077, 4113, & 4114.			
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED	
3,756-3891		300 sacks Cement	
3,892-4114		2,000 Gals. LSTNE 20.	
		20,000 Gals. 1st water	
		20,000 # SAND	
33.* PRODUCTION			
DATE FIRST PRODUCTION 8-31-68		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Pumping	
WELL STATUS (Producing or shut-in) Producing			
DATE OF TEST 9-3-68	HOURS TESTED 24	CHOKE SIZE open	PROD'N. FOR TEST PERIOD 76
OIL—BBL. 27.4	GAS—MCF. 112	WATER—BBL. 361	GAS-OIL RATIO 361
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE 76	OIL GRAVITY-API (COR)
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Sold		TEST WITNESSED BY M. K. Chambliss	
35. LIST OF ATTACHMENTS			

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

SIGNED M. E. H. H. H. TITLE Adm. Section Chief DATE 9-12-68

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

121148 5, Partners 13, 2 file

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 53, below regarding separate reports for separate completions. If not filed prior to the time this summary record is submitted, copies of all necessary instructions will be furnished to the submitter.

tion 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 87.

well as: 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.

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 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:				38. GEOLOGIC MARKERS		
FORMATION	TOP.	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	TOP	
					MEAS. DEPTH	TRUE VERT. DEPTH
				Weather	814	
				Salado	926	
				Yates	2,132	
				Seven Rivers	2,485	
				Queen	3,088	
				Grayburg	3,480	
				6 ft zone	3,776	
				San Andres	3,849	
				8 ft zone	3,973	
				9 ft zone	4,032	