

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other instructions on reverse side)

Form approved
Budget Bureau No. 42-R3555

WELL COMPLETION OR RECOMPLETION REPORT AND LOG*

1. TYPE OF WELL: OIL WELL ☒ GAS WELL ☐ DRY ☐ Other _____

2. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other _____

3. NAME OF OPERATOR
Continental Oil Company

4. ADDRESS OF OPERATOR
Box 450, Hobbs, New Mexico 88240

5. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*
At surface 1100' FSL + 2600' FWL of Sec. 21, T-17S, R-32E,
At top prod. interval reported below Tea County, N. Mex.
At total depth same

6. LEASE DESIGNATION AND SERIAL NO.
LC-029509(2)

7. IF INDIAN, ALLOTTEE OR TRIBE NAME

8. UNIT AGREEMENT NAME
MCA

9. FARM OR LEASE NAME
MCA UNIT #41

10. WELL NO.
251

11. FIELD AND POOL, OR WILDCAT
Maj. G-5A

12. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA
Sec. 21, T-17S, R-32E

13. COUNTY OR PARISH
Tea

14. STATE
N. Mex.

15. DATE SPUDDED 1-19-70 16. DATE T.D. REACHED 1-28-69 17. DATE COMPL. (Ready to prod.) 2-27-70 18. ELEVATIONS (DF, RSB, RT, GR, ETC.)* 4036' DF 19. ELEV. CASINGHEAD

20. TOTAL DEPTH, MD & TVD 4250 21. PLUG, BACK T.D., MD & TVD 4110 22. IF MULTIPLE COMPL., HOW MANY* —> 23. INTERVALS DRILLED BY —> 24. ROTARY TOOLS —> 25. CABLE TOOLS.

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*
3880' - 4070 San Andres

25. WAS DIRECTIONAL SURVEY MADE
yes

26. TYPE ELECTRIC AND OTHER LOGS RUN
GR/N - SNP Log - Dual laterals

27. WAS WELL CORED
NO

28. CASING RECORD (Report all strings set in well)

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
8 7/8	24 #	825	12 1/4	575	ND/NE
5 1/2	14 #	4250	7 7/8	350	"

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)
2 7/8		4072		

30. TUBING RECORD

SIZE	DEPTH SET (MD)	PACKER SET (MD)
2 7/8	4072	

31. PERFORATION RECORD (Interval, size and number)
4050, 3934, 3932, 3930, 3928, 3926, 3829, 3824, 3814, 3806, 3803, 3798, 3782, + 3778 w/1 JS PF
4066' w/4 (.50") JS PF

32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
See attached	

33. PRODUCTION

DATE FIRST PRODUCTION 2-27-70 PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Pumping 320 D WELL STATUS (Producing or shut-in) Producing

DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
3-9-70	24	-	—>	191	TSTM	31	

FLOW, TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)
		—>	191	TSTM	31	38.2

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)
Sold

TEST WITNESSED BY
M. M. K. Chambliss

35. LIST OF ATTACHMENTS
32. Acid shot test.

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

SIGNED M. E. Gabley TITLE Staff Supervisor DATE 3-10-70

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

Each of. This form is designed for submitting a complete and correct well completion report and log on all types of wells 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: "acks General". 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.)

SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF; COHED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CUSHION USED, TIME FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES

[illegible]

NAME

<i>Quater</i> <i>Salado</i> <i>Queen</i> <i>Thompson</i> <i>San Andres</i> <i>Livingston</i>	798 910 3099 3474 3880 4007
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