

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 ☐		5. LEASE DESIGNATION AND SERIAL NO. LC-058514	
b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other ☐		6. IF INDIAN, ALLOTTEE OR TRIBES NAME	
2. NAME OF OPERATOR CONTINENTAL OIL COMPANY		7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR Box 460, Hobbs, N.M. 88240		8. FARM OR LEASE NAME PEARSALL BX	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 460' FNL E 860' FEL of Sec. 34 At top prod. interval reported below SAME At total depth SAME		9. WELL NO. 3	
14. PERMIT NO.		DATE ISSUED	
15. DATE SPUDDED 4-19-74		16. DATE T.D. REACHED 4-30-74	
17. DATE COMPL. (Ready to prod.) 5-29-74		18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 3954' GR.	
19. ELEV. CASINGHEAD		20. TOTAL DEPTH, MD & TVD 4475'	
21. PLUG BACK T.D., MD & TVD 4437'		22. IF MULTIPLE COMPL., HOW MANY*	
23. INTERVALS DRILLED BY		ROTARY TOOLS ☒ CABLE TOOLS ☐	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 4120' - 4437' Grayburg San Andres		25. WAS DIRECTIONAL SURVEY MADE Yes	
26. TYPE ELECTRIC AND OTHER LOGS RUN GR-SNP LL-9		27. WAS WELL CORED No	
28. CASING RECORD (Report all strings set-in well)			
CASING SIZE 11 3/4" 5 1/2"	WEIGHT, LB./FT. 42# 14#	DEPTH SET (MD) 1100' 4475'	HOLE SIZE 15" 7 7/8"
CEMENTING RECORD 600 Sks. Cl. "C" 200 Sks. Cl. "C"		AMOUNT PULLED	
29. LINER RECORD			
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*
SCREEN (MD)			
30. TUBING RECORD			
SIZE 2 3/8"	DEPTH SET (MD) 4400'		PACKER SET (MD)
31. PERFORATION RECORD (Interval, size and number) 4326'-48' w/4 JSPF; 4258'-68' & 4286'-4311' w/2 JSPF; 4121', 27', 33', 39', 45', 51', 54', 66', & 4172' w/1 JSPF			
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
DEPTH INTERVAL (MD) 4258'-4348' 4121'-4172'		AMOUNT AND KIND OF MATERIAL USED A/5500 gals 28% Acid F/20,000 gals wtr, 40,000# sd.	
33. PRODUCTION			
DATE FIRST PRODUCTION 6-27-74		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Pump	
DATE OF TEST 7-13-74		WELL STATUS (Producing or shut-in) Producing	
HOURS TESTED 24	CHOKE SIZE -	PROD'N. FOR TEST PERIOD 50	OIL—BBL. TSTM
FLOW. TUBING PRESS. -	CASING PRESSURE -	GAS—MCF. 68	WATER—BBL. -
CALCULATED 24-HOUR RATE 42.9		OIL GRAVITY-API (CORR.) 42.9	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) TSTM			
TEST WITNESSED BY			
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 [Signature]		TITLE SR. ANALYST	
DATE 7-16-74			

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

USGS(5) 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 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				38. GEOLOGIC MARKERS			
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH	TOP	TRUE VERT. DEPTH
Queen	3447			Queen	3447		
Grayburg	3818			Grayburg	3818		
6th Zone	4101			6th Zone	4101		
San Andres	4213			San Andres	4213		