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Form O-125  
Revised 11-1-78

# NEW MEXICO OIL CONSERVATION COMMISSION WELL COMPLETION OR RECOMPLETION REPORT AND LOG

|                              |                                |                                         |
|------------------------------|--------------------------------|-----------------------------------------|
| 1. Indicate Type of Lease    | State <input type="checkbox"/> | Fee <input checked="" type="checkbox"/> |
| 2. State Oil & Gas Lease No. |                                |                                         |

|                                                                                                                                                                                                                         |  |  |  |  |  |  |  |  |  |                                                                        |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|--|--|--|--|--|--|------------------------------------------------------------------------|--|
| 1a. TYPE OF WELL                                                                                                                                                                                                        |  |  |  |  |  |  |  |  |  | 3. Indicate Type of Lease                                              |  |
| OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> DRY <input type="checkbox"/> OTHER <input type="checkbox"/>                                                                              |  |  |  |  |  |  |  |  |  | State <input type="checkbox"/> Fee <input checked="" type="checkbox"/> |  |
| b. TYPE OF COMPLETION                                                                                                                                                                                                   |  |  |  |  |  |  |  |  |  | 4. State Oil & Gas Lease No.                                           |  |
| NEW WELL <input checked="" type="checkbox"/> WORK OVER <input type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input type="checkbox"/> DIFF. RESVR. <input type="checkbox"/> OTHER <input type="checkbox"/> |  |  |  |  |  |  |  |  |  |                                                                        |  |
| 2. Name of Operator                                                                                                                                                                                                     |  |  |  |  |  |  |  |  |  | 5. Well No.                                                            |  |
| Amoco Production Company                                                                                                                                                                                                |  |  |  |  |  |  |  |  |  | 1                                                                      |  |
| 3. Address of Operator                                                                                                                                                                                                  |  |  |  |  |  |  |  |  |  | 6. Field and Pool, or Wildcat                                          |  |
| P. O. Box 68, Hobbs, NM 88240                                                                                                                                                                                           |  |  |  |  |  |  |  |  |  | Und. Anderson Ranch Morrow                                             |  |
| 4. Location of Well                                                                                                                                                                                                     |  |  |  |  |  |  |  |  |  | 7. Unit Agreement Name                                                 |  |
| UNIT LETTER <u>R</u> LOCATED <u>1830</u> FEET FROM THE <u>South</u> LINE AND <u>1980</u> FEET FROM                                                                                                                      |  |  |  |  |  |  |  |  |  |                                                                        |  |
| THE <u>East</u> LINE OF SEC. <u>3</u> TWP. <u>16-S</u> RGE. <u>32-E</u> NMPM                                                                                                                                            |  |  |  |  |  |  |  |  |  | 8. Name of Lease Name                                                  |  |
|                                                                                                                                                                                                                         |  |  |  |  |  |  |  |  |  | Anderson 3 Com.                                                        |  |
| 15. Date Spudded                                                                                                                                                                                                        |  |  |  |  |  |  |  |  |  | 9. Well No.                                                            |  |
| 5-20-79                                                                                                                                                                                                                 |  |  |  |  |  |  |  |  |  | 1                                                                      |  |
| 16. Date T.D. Reached                                                                                                                                                                                                   |  |  |  |  |  |  |  |  |  | 10. Field and Pool, or Wildcat                                         |  |
| 7-25-79                                                                                                                                                                                                                 |  |  |  |  |  |  |  |  |  | Und. Anderson Ranch Morrow                                             |  |
| 17. Date Compl. (Ready to Prod.)                                                                                                                                                                                        |  |  |  |  |  |  |  |  |  | 11. County                                                             |  |
| 8-13-79                                                                                                                                                                                                                 |  |  |  |  |  |  |  |  |  | Lea                                                                    |  |
| 18. Elevations (DF, RKB, RT, GR, etc.)                                                                                                                                                                                  |  |  |  |  |  |  |  |  |  | 12. County                                                             |  |
| 4329 GR                                                                                                                                                                                                                 |  |  |  |  |  |  |  |  |  | Lea                                                                    |  |
| 19. Elev. Casinghead                                                                                                                                                                                                    |  |  |  |  |  |  |  |  |  |                                                                        |  |
| 20. Total Depth                                                                                                                                                                                                         |  |  |  |  |  |  |  |  |  | 23. Intervals Drilled By                                               |  |
| 12,635'                                                                                                                                                                                                                 |  |  |  |  |  |  |  |  |  | Rotary Tools                                                           |  |
| 21. Plug Back T.D.                                                                                                                                                                                                      |  |  |  |  |  |  |  |  |  | Cable Tools                                                            |  |
| 12,585'                                                                                                                                                                                                                 |  |  |  |  |  |  |  |  |  | 0-TD                                                                   |  |
| 22. If Multiple Compl., How Many                                                                                                                                                                                        |  |  |  |  |  |  |  |  |  | 24. Producing Interval(s), of this completion - Top, Bottom, Name      |  |
|                                                                                                                                                                                                                         |  |  |  |  |  |  |  |  |  | 12,456'-12,463' Morrow                                                 |  |
| 23. Intervals Drilled By                                                                                                                                                                                                |  |  |  |  |  |  |  |  |  | 25. Was Directional Survey Made                                        |  |
|                                                                                                                                                                                                                         |  |  |  |  |  |  |  |  |  | No                                                                     |  |
| 24. Producing Interval(s), of this completion - Top, Bottom, Name                                                                                                                                                       |  |  |  |  |  |  |  |  |  | 26. Type Electric and Other Logs Run                                   |  |
|                                                                                                                                                                                                                         |  |  |  |  |  |  |  |  |  | Comp Neutron Form Density; Dual Laterolog Micro SFL                    |  |
| 25. Was Directional Survey Made                                                                                                                                                                                         |  |  |  |  |  |  |  |  |  | 27. Was Well Cored                                                     |  |
|                                                                                                                                                                                                                         |  |  |  |  |  |  |  |  |  | No                                                                     |  |
| 26. Type Electric and Other Logs Run                                                                                                                                                                                    |  |  |  |  |  |  |  |  |  | 28. CASING RECORD (Report all strings set in well)                     |  |
| Comp Neutron Form Density; Dual Laterolog Micro SFL                                                                                                                                                                     |  |  |  |  |  |  |  |  |  |                                                                        |  |
| 27. Was Well Cored                                                                                                                                                                                                      |  |  |  |  |  |  |  |  |  | 29. LINER RECORD                                                       |  |
| No                                                                                                                                                                                                                      |  |  |  |  |  |  |  |  |  |                                                                        |  |
| 28. CASING RECORD (Report all strings set in well)                                                                                                                                                                      |  |  |  |  |  |  |  |  |  | 30. TUBING RECORD                                                      |  |
|                                                                                                                                                                                                                         |  |  |  |  |  |  |  |  |  |                                                                        |  |
| 31. Perforation Record (Interval, size and number)                                                                                                                                                                      |  |  |  |  |  |  |  |  |  | 32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.                         |  |
| 12,456'-12,463' w/4 JSPF                                                                                                                                                                                                |  |  |  |  |  |  |  |  |  |                                                                        |  |
|                                                                                                                                                                                                                         |  |  |  |  |  |  |  |  |  | DEPTH INTERVAL                                                         |  |
|                                                                                                                                                                                                                         |  |  |  |  |  |  |  |  |  | 12,463'                                                                |  |
|                                                                                                                                                                                                                         |  |  |  |  |  |  |  |  |  | AMOUNT AND KIND MATERIAL USED                                          |  |
|                                                                                                                                                                                                                         |  |  |  |  |  |  |  |  |  | 150 gal. 10% Acetic acid                                               |  |
| 33. PRODUCTION                                                                                                                                                                                                          |  |  |  |  |  |  |  |  |  |                                                                        |  |
| Date First Production                                                                                                                                                                                                   |  |  |  |  |  |  |  |  |  | Well Status (Prod. or Shut-in)                                         |  |
| 8-12-79                                                                                                                                                                                                                 |  |  |  |  |  |  |  |  |  | Shut-in                                                                |  |
| Production Method (Flowing, gas lift, pumping - Size and type pump)                                                                                                                                                     |  |  |  |  |  |  |  |  |  |                                                                        |  |
| Flowing                                                                                                                                                                                                                 |  |  |  |  |  |  |  |  |  |                                                                        |  |
| Date of Test                                                                                                                                                                                                            |  |  |  |  |  |  |  |  |  | Gas - Oil Ratio                                                        |  |
| 8-13-79                                                                                                                                                                                                                 |  |  |  |  |  |  |  |  |  | 633                                                                    |  |
| Hours Tested                                                                                                                                                                                                            |  |  |  |  |  |  |  |  |  | Oil Gravity - API (Corr.)                                              |  |
| 4                                                                                                                                                                                                                       |  |  |  |  |  |  |  |  |  |                                                                        |  |
| Choke Size                                                                                                                                                                                                              |  |  |  |  |  |  |  |  |  |                                                                        |  |
| 20/64                                                                                                                                                                                                                   |  |  |  |  |  |  |  |  |  |                                                                        |  |
| Profil. Per Test Period                                                                                                                                                                                                 |  |  |  |  |  |  |  |  |  |                                                                        |  |
|                                                                                                                                                                                                                         |  |  |  |  |  |  |  |  |  |                                                                        |  |
| Flow Tubing Press.                                                                                                                                                                                                      |  |  |  |  |  |  |  |  |  |                                                                        |  |
|                                                                                                                                                                                                                         |  |  |  |  |  |  |  |  |  |                                                                        |  |
| Casing Pressure                                                                                                                                                                                                         |  |  |  |  |  |  |  |  |  |                                                                        |  |
|                                                                                                                                                                                                                         |  |  |  |  |  |  |  |  |  |                                                                        |  |
| Calculated 24-Hour Rate                                                                                                                                                                                                 |  |  |  |  |  |  |  |  |  |                                                                        |  |
|                                                                                                                                                                                                                         |  |  |  |  |  |  |  |  |  |                                                                        |  |
| 34. Disposition of Gas (Sold, used for fuel, vented, etc.)                                                                                                                                                              |  |  |  |  |  |  |  |  |  | Test Witnessed By                                                      |  |
| Sold                                                                                                                                                                                                                    |  |  |  |  |  |  |  |  |  |                                                                        |  |
| 35. List of Attachments                                                                                                                                                                                                 |  |  |  |  |  |  |  |  |  |                                                                        |  |
| Logs mailed 7-16-79                                                                                                                                                                                                     |  |  |  |  |  |  |  |  |  |                                                                        |  |
| 36. I hereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief.                                                                                 |  |  |  |  |  |  |  |  |  |                                                                        |  |
| SIGNED <u>Bob Davis</u>                                                                                                                                                                                                 |  |  |  |  |  |  |  |  |  | TITLE <u>Asst. Admin. Analyst</u>                                      |  |
|                                                                                                                                                                                                                         |  |  |  |  |  |  |  |  |  | DATE <u>8-16-79</u>                                                    |  |

# INSTRUCTIONS

This form is to be filed with the appropriate District Office of the Commission not later than 10 days after the completion of any newly-drilled or reopened well. It shall be accompanied by one copy of all electrical and radioactivity logs run on the well and a summary of all special tests conducted, including drill stem tests. All depths reported shall be measured by this. In the case of directionally drilled wells, true vertical depths shall also be reported. For multiple completions, Items 30 through 34 shall be reported for each zone. The form is to be filed in quintuplicate except on state land, where six copies are required. See Rule 1105.

## INDICATE FORMATION TOPS IN CONFORMANCE WITH GEOGRAPHICAL SECTION OF STATE

### Southeastern New Mexico

### Northwestern New Mexico

|                    |                  |         |                       |                   |
|--------------------|------------------|---------|-----------------------|-------------------|
| T. Anhy            | T. Canyon        | 10,655' | T. Ojo Alamo          | T. Penn. "B"      |
| T. Salt            | T. Strawn        | 11,070' | T. Kittland-Fruitland | T. Penn. "C"      |
| B. Salt            | T. Atoka         | 11,705' | T. Pictured Cliffs    | T. Penn. "D"      |
| T. Yates           | T. Miss          |         | T. Cliff House        | T. Leadville      |
| T. 7 Rivers        | T. Devonian      |         | T. Menefee            | T. Madison        |
| T. Queen           | T. Silurian      |         | T. Point Lookout      | T. Elbert         |
| T. Grayburg        | T. Montoya       |         | T. Mancos             | T. McCracken      |
| T. San Andres      | T. Simpson       |         | T. Gallup             | T. Ignacio Qtzite |
| T. Glorieta        | T. McKee         |         | Pase Greenhorn        | T. Granite        |
| T. Paddock         | T. Ellenburger   |         | T. Dakota             | T.                |
| T. Blinberry       | T. Gr. Wash      |         | T. Morrison           | T.                |
| T. Tubb            | T. Granite       |         | T. Todilto            | T.                |
| T. Drinkard        | T. Delaware Sand |         | T. Entrada            | T.                |
| T. Abo             | T. Bone Springs  |         | T. Wingate            | T.                |
| T. Wolfcamp        | T. Morrow        | 12,300' | T. Chinle             | T.                |
| T. Penn.           | T.               |         | T. Permian            | T.                |
| T. Cisco (Bough C) | T.               |         | T. Penn. "A"          | T.                |

### OIL OR GAS SANDS OR ZONES

|                         |                         |
|-------------------------|-------------------------|
| No. 1, from.....to..... | No. 4, from.....to..... |
| No. 2, from.....to..... | No. 5, from.....to..... |
| No. 3, from.....to..... | No. 6, from.....to..... |

### IMPORTANT WATER SANDS

Include data on rate of water inflow and elevation to which water rose in hole.

|                                  |       |
|----------------------------------|-------|
| No. 1, from.....None.....to..... | feet. |
| No. 2, from.....to.....          | feet. |
| No. 3, from.....to.....          | feet. |
| No. 4, from.....to.....          | feet. |

### FORMATION RECORD (Attach additional sheets if necessary)

| From  | To     | Thickness in Feet | Formation                | From   | To     | Thickness in Feet | Formation          |
|-------|--------|-------------------|--------------------------|--------|--------|-------------------|--------------------|
| 0     | 1415'  | 1415'             | Red Bed                  | 10854' | 11703' | 849'              | Lime, Shale        |
| 1415' | 1535'  | 120'              | Red Bed, Anhydrite       | 11703' | 11761' | 58'               | Lime, Shale, Chert |
| 1535' | 1960'  | 425'              | Red Bed, Salt, Anhydrite | 11761' | 12603' | 842'              | Lime, Shale        |
| 1960' | 2249'  | 289'              | Salt, Anhydrite          | 12603' | 12635' | 32'               | Lime, Chert        |
| 2249' | 3089'  | 840'              | Anhydrite                |        |        |                   |                    |
| 3089' | 3257'  | 168'              | Anhydrite, Shale, sand   |        |        |                   |                    |
| 3257' | 3390'  | 133'              | Anhydrite, Sand          |        |        |                   |                    |
| 3390' | 3658'  | 268'              | Anhydrite, Lime          |        |        |                   |                    |
| 3658' | 5170'  | 1512'             | Lime                     |        |        |                   |                    |
| 5170' | 5957'  | 787'              | Lime, Dolomite           |        |        |                   |                    |
| 5957' | 6376'  | 419'              | Lime, Dolomite, Shale    |        |        |                   |                    |
| 6376' | 7168'  | 792'              | Lime, Shale              |        |        |                   |                    |
| 7168' | 7563'  | 395'              | Dolomite, Sand           |        |        |                   |                    |
| 7563' | 7905'  | 342'              | Dolomite, Sand, Shale    |        |        |                   |                    |
| 7905' | 8253'  | 348'              | Lime, Shale              |        |        |                   |                    |
| 8253' | 9326'  | 1073'             | Lime, Dolomite, Shale    |        |        |                   |                    |
| 9326' | 10854' | 1528'             | Lime, Dolomite           |        |        |                   |                    |

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O.C.D. HOBBS, OFFICE