

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

(See other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R355.5.

5. LEASE DESIGNATION AND SERIAL NO.

LC-029405(a)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

MCA

8. FARM OR LEASE NAME

MCA Unit

9. WELL NO.

364

10. FIELD AND POOL, OR WILDCAT

Mahamar G/SA

11. SEC. T., R., M., OR BLOCK AND SURVEY OR AREA

Sec. 20, T-17S R-32E

12. COUNTY OR PARISH

Lea

13. STATE

NM

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL: OIL WELL ☐ GAS WELL ☐ DRY ☐ Other Observation well for CO₂ Pilot Project

b. TYPE OF COMPLETION:

NEW WELL ☒WORK OVER ☐DEEP-EN ☐PLUG BACK ☐DIFF. RESVR. ☐Other ☐

2. NAME OF OPERATOR

CONOCO INC.

3. ADDRESS OF OPERATOR

P. O. Box 460, Hobbs, N.M. 88240

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*

At surface 2494' FNL & 554' FELAt top prod. interval reported below ☒At total depth ☒

14. PERMIT NO.

DATE ISSUED

15. DATE SPUDDED 6-16-81 16. DATE T.D. REACHED 7-5-81 17. DATE COMPL. (Ready to prod.) 7-17-81 18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 4013.7 GR 19. ELEV. CASINGHEAD

20. TOTAL DEPTH, MD & TVD 4325' 21. PLUG, BACK T.D., MD & TVD 4286' 22. IF MULTIPLE COMPL., HOW MANY* — 23. INTERVALS DRILLED BY — 24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*

NONE

25. WAS DIRECTIONAL SURVEY MADE

Yes

26. TYPE ELECTRIC AND OTHER LOGS RUN

CBL, GR & CCL

27. WAS WELL CORED

Yes

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

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
8 5/8"	28#	760'	12 1/4"	450.5	125.5 (Circ)
5 1/2"	14#	4325'	7 7/8"	1325.5 in two stages DV tool at 200'	50.5 (Circ)

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
		NONE				NONE	

31. PERFORATION RECORD (Interval, size and number)

NONE

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
	NONE

33.* PRODUCTION

DATE FIRST PRODUCTION	PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)	WELL STATUS (Producing or shut-in)
DATE OF TEST	ACCEPTED FOR RECORD HOURS TESTED CHOKED SIZE PROD'N. FOR TEST PERIOD OIL—BBL. GAS—MCF. WATER—BBL. GAS-OIL RATIO	
FLOW. TUBING PRESS.	(ORIG. SGD.) DAVID R. GLASS FEB 24 1983 CASP. PRESSURE CALCULATED 4-HOUR RATE OIL—BBL. GAS—MCF. WATER—BBL. OIL GRAVITY-API (CORR.)	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)	MINERALS MANAGEMENT SERVICE ROSWELL, NEW MEXICO	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

Wm. A. Butler

TITLE

Administrative Supervisor

DATE

2/18/83

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

MINERALS MANAGEMENT SERVICE
ROSWELL, NEW MEXICO

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	3040	3696	oil	Rustler	745	
GRAYBURG	3696	3792	oil	SALADO	861	
SAN ANDRES	3772	4140	oil	TANSHILL	1917	
				YATES	2074	
				SEVEN RIVERS	2445	
				Queen	3040	
				GRAYBURG	3696	
				SAN ANDRES	3792	
				LOVINGTON SAND	3891	
				mem.		

RECEIVED
FEB 28 1983
O.C.D.
HOBBS OFFICE