

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY
HOBBS, NEW MEXICO 88240

SUBMIT IN DUPLICATE*

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

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL:		OIL WELL <input type="checkbox"/>	GAS WELL <input type="checkbox"/>	DRY <input checked="" type="checkbox"/>	Other _____		
b. TYPE OF COMPLETION:		NEW WELL <input checked="" type="checkbox"/>	WORK OVER <input type="checkbox"/>	DEEP-EN <input type="checkbox"/>	PLUG BACK <input type="checkbox"/>	DIFF. RESVR. <input type="checkbox"/>	Other _____
2. NAME OF OPERATOR						ARCO Oil and Gas Company	
Division of Atlantic Richfield Company							
3. ADDRESS OF OPERATOR						Box 1710, Hobbs, New Mexico 88240	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)						At surface 2630' FSL & 1310' FEL	
At top prod. interval reported below as above							
At total depth as above							
14. PERMIT NO.				DATE ISSUED			
15. DATE SPUDDED				16. DATE T.D. REACHED		17. DATE COMPL. (Ready to prod.)	
12/6/81				12/19/81		9/13/82	
18. ELEVATIONS (DF, REB, RT, GR, ETC.)*				19. ELEV. CASINGHEAD			
4078.7' GR							
20. TOTAL DEPTH, MD & TVD		21. PLUG, BACK T.D., MD & TVD		22. IF MULTIPLE COMPL., HOW MANY*		23. INTERVALS DRILLED BY	
4380'		4239'				ROTARY TOOLS 0-4380'	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*						25. WAS DIRECTIONAL SURVEY MADE	
4163-4185' Grbg SA						No	
26. TYPE ELECTRIC AND OTHER LOGS RUN						27. WAS WELL CORED	
GR-CNL & CBL						No	
28. CASING RECORD (Report all strings set in well)							
CASING SIZE		WEIGHT, LB./FT.		DEPTH SET (MD)		HOLE SIZE	
16"		Cond Pipe		30'		23"	
8-5/8" OD		24# K-55		448'		12 1/4"	
4 1/2" OD		11.5# K-55		4375'		7-7/8"	
29. LINER RECORD							
SIZE		TOP (MD)		BOTTOM (MD)		SACKS CEMENT*	
30. TUBING RECORD							
SIZE		DEPTH SET (MD)		PACKER SET (MD)			
2-3/8" OD		4204'					
31. PERFORATION RECORD (Interval, size and number)							
4163, 69, 73, 78, 85' w/2 JSPF = .44" holes							
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.							
DEPTH INTERVAL (MD)				AMOUNT AND KIND OF MATERIAL USED			
3898-3900'				Sqzd w/100 sx Thix-set C1 H cmt & 1360 sx C1 C cmt w/.3% CFR-2, 5# salt/sk, 500 gals flocheck, 200 sx Thick-set cmt, 500 gals (cont'd)			
33. PRODUCTION							
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)					
1/12/82		Pumping 2" x 1 1/2" x 16' rod pump					
DATE OF TEST		HOURS TESTED		CHOKE SIZE		PROD'N. FOR TEST PERIOD	
11/15/82		24		-		OIL—BBL. 0 GAS—MCF. 0 WATER—BBL. 4 GAS-OIL RATIO -	
FLOW. TUBING PRESS.		CASING PRESSURE		CALCULATED 24-HOUR RATE		OIL—BBL. 0 GAS—MCF. 0 WATER—BBL. 4 OIL GRAVITY-API (CORR.) -	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)							
TSTM							
35. LIST OF ATTACHMENTS							
Logs as listed in Item 26 above & Inclination Report							
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records							
SIGNED <i>Philip P. Lawrence</i>				TITLE Dir. g. MINERALS MANAGEMENT SERVICE			
HOBBS, NEW MEXICO				DATE 12/14/82			

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

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 electrical, etc.), formations and pressure tests, and directional surveys, should be attached hereto, to the extent required by applicable Federal and/or State laws and regulations. *if attachments*

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.)

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.)

RECEIVED
JAN 13 1964
C.C.D.
HOBBS OFFICE

ARCO Oil and Gas Company

Johns "B" DE #4

2630' FSL & 1310' FEL

24-17S-32E

Form 9-330 (cont'd)

Item 32 Acid Shot, Fracture, Cement Squeeze, etc.

<u>Depth Interval</u>	<u>Amount and Kind Material Used</u>
3898-3900' (cont'd)	flocheck, 400 sx Cl H cmt w/3% CaCl ₂
4257-74'	Cmt squeezed w/150 sx Cl H cmt cont'g 3% CaCl ₂
4333-46'	Acidized w/2300 gals 15% NE-HCL
4333-46'	Cmt squeezed w/150 sx Cl H cmt cont'g 2% CaCl ₂
4163-85'	Acidized w/1500 gals HCL SA-4 w/3 gals C-15 & 6 gals J-4A. Frac'd w/6000 gals gelled 2% KCL wtr w/3400# sand. Acidized w/3000 gals 15% HCL acid.

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUNDRY NOTICES AND REPORTS COMPLETION

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use Form 9-331-C for such proposals.)

1. oil well ☒ gas well ☐ other ☐
2. NAME OF OPERATOR ARCO Oil and Gas Company
Division of Atlantic Richfield Company
3. ADDRESS OF OPERATOR
Box 1710, Hobbs, New Mexico 88240
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 2630' FSL & 1310' FEL
AT TOP PROD. INTERVAL: as above
AT TOTAL DEPTH: as above
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:	SUBSEQUENT REPORT OF:
TEST WATER SHUT-OFF	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input checked="" type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>
MULTIPLE COMPLETE	<input type="checkbox"/>
CHANGE ZONES	<input type="checkbox"/>
ABANDON*	<input type="checkbox"/>
(other)	Test & Complete

5. LEASE
LC-059152-b
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME
Johns "B" DE
9. WELL NO.
14
10. FIELD OR WILDCAT NAME
Maljamar Grayburg SA
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
24-17S-32E
12. COUNTY OR PARISH
Lea
13. STATE
New Mexico
14. API NO.
30-025-27654
15. ELEVATIONS (SHOW DF, KDB, AND WD)
4078.7' GR

RECEIVED
(NOTE: Report results of multiple completion or zone change on Form 9-330.)

OCT 17 1982

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

On 8/25/82 POH w/compl assy. Set pkr @ 4060'. Frac'd perms 4163-4185' w/4000 gals gelled 2% KCL wtr pad & 2000 gals gelled 2% KCL wtr w/3400# sd. In 10 hrs swbd 0 BO & 74 BLW. POH w/pkr. RIH w/RBP & pkr, set BP @ 4216', set pkr @ 4060'. Acidized perms 4163-85' w/3000 gals 15% HCL acid. In 3 hrs swbd 29 BLW. On 6 hr swab test 9/8/82 rec 1/2 BO, 7 1/2 BLW. Relsd pkr & retrieved BP, POH w/pkr & BP. RIH w/CA. Set SN @ 4173'. Ran rod & pump. On 24 hr potential test 11/15/82 pmpd 0 BO, 4 BW on 9.5 -74" SPM. Completed in Grayburg SA fm.

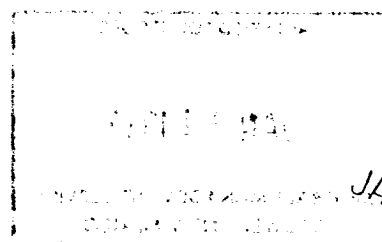
FINAL REPORT

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

18. I hereby certify that the foregoing is true and correct

SIGNED Roland W. Lawrence TITLE Drlg. Engr. DATE 12/14/82

ACCEPTED FOR RECORD (This space for Federal or State office use)
(ORIG. SGD.) DAVID R. GLASS
APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY
JAN 11 1983
MINERALS MANAGEMENT SERVICE
ROSWELL, NEW MEXICO *See Instructions on Reverse Side



RECEIVED

JAN 13 1983

C.C.D.
HOBBS OFFICE