

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. <u>LC-058698 (A)</u>	
b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other _____		6. IF INDIAN, ALLOTTEE OR TRIBE NAME _____	
2. NAME OF OPERATOR <u>CONOCO INC.</u>		7. UNIT AGREEMENT NAME <u>MCA</u>	
3. ADDRESS OF OPERATOR <u>P.O. Box 460, Hobbs, N.M. 88240</u>		8. FARM OR LEASE NAME <u>MCA Unit</u>	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements). At surface <u>Unit 5, 1335' FSL & 420' FSL</u> At top prod. interval reported below At total depth		9. WELL NO. <u>375</u>	
14. PERMIT NO. <u>30-025-30114</u>		10. FIELD AND POOL, OR WILDCAT <u>MAJAMAR G/SA</u>	
DATE ISSUED _____		11. SEC. T., R., M., OR BLOCK AND SURVEY OR AREA <u>Sec. 23-175-32E</u>	
15. DATE SPUDDED <u>10-15-87</u>	16. DATE T.D. REACHED <u>10-23-87</u>	17. DATE COMPL. (Ready to prod.) <u>11-12-87</u>	18. ELEVATIONS (OF ENR. RT. GR. ETC.) * <u>4012'</u>
19. ELEV. CASINGHEAD -	20. TOTAL DEPTH, MD & TVD <u>4350'</u>		
21. PLUG, BACK T.D., MD & TVD <u>4305'</u>	22. IF MULTIPLE COMPL. HOW MANY* -	23. INTERVALS DRILLED BY <u>ALL</u>	24. ROTARY TOOLS -
25. PRODUCING INTERVAL(S). OF THIS COMPLETION—TOP BOTTOM NAME (MD AND T.D.)* <u>3829' - 4234' MAJAMAR G/SA</u>			26. WAS DIRECTIONAL SURVEY MADE <u>YES</u>
27. TYPE ELECTRIC AND OTHER LOGS RUN <u>GR-BLB-MSEL-CAL, GR-CNB-LST-CAL</u>			28. WAS WELL CORED <u>NO</u>
29. CASING RECORD (Report all strings set in well)			
CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE
<u>13 3/8"</u>	<u>61 #</u>	<u>645'</u>	<u>17 1/2"</u>
<u>8 5/8"</u>	<u>32 #</u>	<u>2190'</u>	<u>12 1/4"</u>
<u>5 1/2"</u>	<u>17 #</u>	<u>4350'</u>	<u>7 1/4"</u>
CEMENTING RECORD		AMOUNT PULLED	
<u>500 SXS CLASS C</u>		<u>200 bbls</u>	
<u>730 SXS CLASS C</u>		<u>145 SXS</u>	
<u>1375 SXS CLASS C</u>		<u>25 SXS</u>	
30. LINER RECORD			
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*
31. TUBING RECORD			
SIZE	DEPTH SET (MD)	PACKER SET (MD)	
<u>2 7/8"</u>	<u>4222'</u>		
32. PERFORATION RECORD (Interval, size and number)			
<u>3829', 30, 31, 67, 78, 82, 3917, 64, 65, 4024, 25, 26, 27, 64, 65, 66, 4118, 86, 89, 4202, 06, 07, 33, 34 w/2 SSPF</u>			
33. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED	
<u>3829' - 4234'</u>		<u>29 bbls 15% HCL-NE-FE</u>	
		<u>Sand from 3221 cross link pad,</u>	
		<u>12000 gals HP6 & 16-30 alumina</u>	
		<u>and, flush w/122 bbls 2% HCL</u>	
34. PRODUCTION			
DATE FIRST PRODUCTION <u>11-24-87</u>	PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) <u>Pumping</u>		WELL STATUS (Producing or shut-in) <u>Producing</u>
DATE OF TEST <u>12-18-87</u>	HOURS TESTED <u>24</u>	CHOKE SIZE <u>25</u>	GAS—MCF. <u>12</u>
FLOW, TUBING PRESS.	CASING PRESSURE	WATER—BBL. <u>88</u>	GAS-OIL RATIO <u>480</u>
ACCEPTED FOR RECORD		OIL GRAVITY-API (CORR.)	
35. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) <u>SJS</u>		TEST WITNESSED BY <u>John Butterfield</u>	
36. LIST OF ATTACHMENTS <u>CARLSBAD, NEW MEX!</u>			
37. I hereby certify that the foregoing information is complete and correct as determined from all available records			
SIGNED <u>D.F. Finney</u>		TITLE <u>Administrative Supervisor</u>	
		DATE <u>12-29-87</u>	

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

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; CORDED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CUSHION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES				GEOLOGIC MARKERS		
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAN. DEPTH	TRUE VENT. DEPTH
				7 River	2697	+ 1331
				Am...	3305	+ 723
				Shufung	3488	+ 540
				San Andres	4066	+ 38

NEW MEXICO OIL CONSERVATION COMMISSION
W LOCATION AND ACREAGE DEDICATION PLAT

Form C-122
Supersedes C-128
Effective 1-1-65

All distances must be from the outer boundaries of the Section

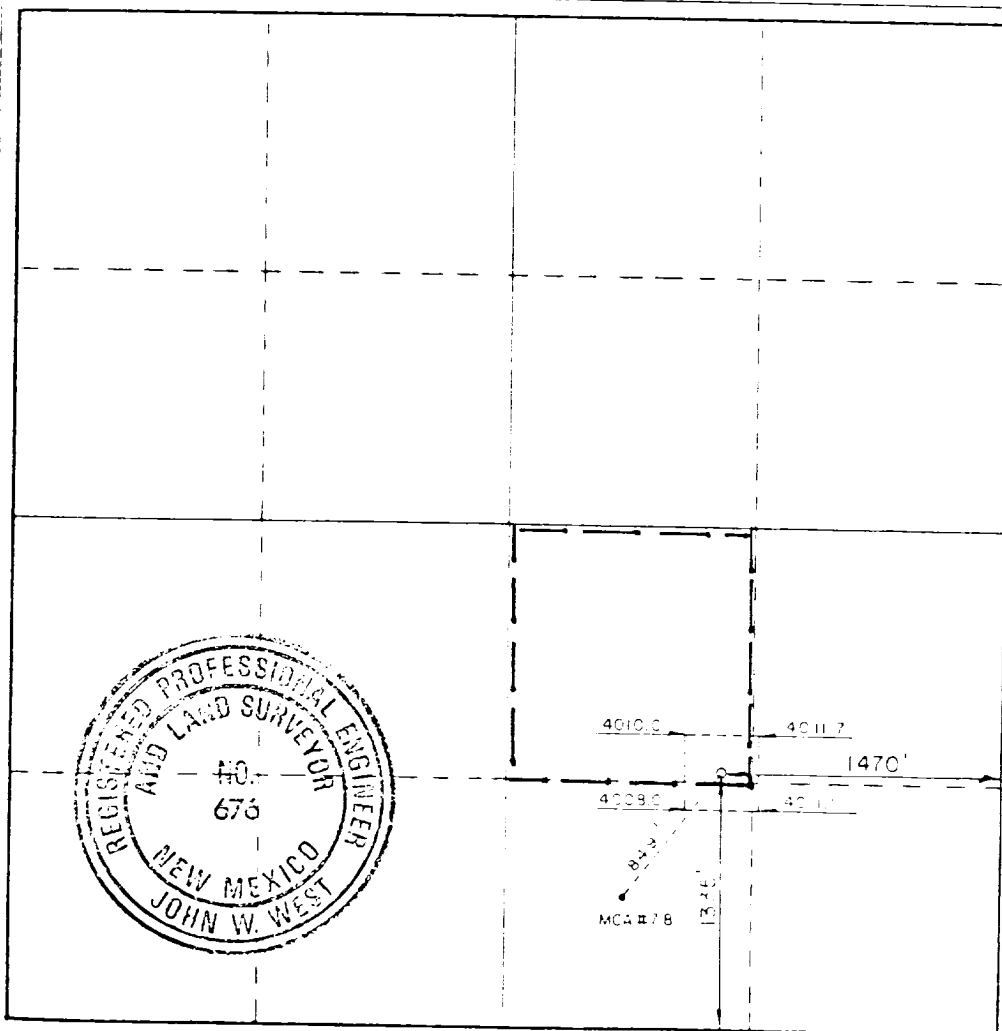
Lessor Conoco, Inc.		Lessee MCA		Well No. 375
Section 23	Township 17 South	Range 32 East	County Lea	
Actual Surface Location of Well: 1335 feet from the South line and 1470 feet from the East line.				
Ground Level Elev. 4012.9	Producing Formation Grayburg / San Andres	Pool Maljamar Grayburg / San Andres	Dedicated Acreage 40 Acres	

1. Outline the acreage dedicated to the subject well by colored pencil or hatchure marks on the plat below.
2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).
3. If more than one lease of different ownership is dedicated to the well, have the interests of all owners been consolidated by communitization, unitization, for e-pooling, etc?

☒ Yes ☐ No If answer is "yes" type of consolidation unitization

If answer is "no" list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if necessary.)

No allowable will be assigned to the well until all interests have been consolidated (by communitization, unitization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interests, has been approved by the Commission.



CERTIFICATION

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief

John W. West
Position
Administrative Supervisor

Company
Conoco Inc.

Date
SEP 30 1987

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my knowledge and belief

Date surveyed
September 2, 1987

Registered Professional Engineer and Land Surveyor

John W. West

Certificate No. JOHN W. WEST, 676
RONALD J. EDSON, 3239

67676