

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

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-029509 (A)	
b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other _____		6. INDIAN, ALLOTTEE OR TRIBE NAME MAJAMAR (G-SA)	
2. NAME OF OPERATOR CONOCO INC.		7. UNIT AGREEMENT NAME MCA	
3. ADDRESS OF OPERATOR P.O. Box 460, Hobbs, N.M. 88240		8. FARM OR LEASE NAME MCA Unit	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface Unit G, 1435' FNL + 2375' FEL At top prod. interval reported below At total depth		9. WELL NO. 379	
14. PERMIT NO. 30-025-30347		12. COUNTY OR PARISH LEA	
DATE ISSUED		13. STATE NM	
15. DATE SPUNDED 5-20-88	16. DATE T.D. REACHED 5-28-88	17. DATE COMPL. (Ready to prod.) 7-12-88	18. ELEVATIONS (DF, RKB, RT, GB, ETC.)* 4056'
19. ELEV. CASINGHEAD	20. TOTAL DEPTH, MD & TVD 4220'		
21. PLUG, BACK T.D., MD & TVD 4172'		22. IF MULTIPLE COMPL., HOW MANY*	23. INTERVALS DRILLED BY ALL
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 3648'-4153' Majamar Grayburg San Andres			25. WAS DIRECTIONAL SURVEY MADE Yes
26. TYPE ELECTRIC AND OTHER LOGS RUN GR-CNL-LAT-CAL, GR-NLL-MSFL-CAL			27. WAS WELL CORED NO
28. CASING RECORD (Report all strings set in well)			
CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE
13 3/8"	61 #	850'	17 1/2"
5 1/2"	17 #	4220'	7 7/8"
CEMENTING RECORD		AMOUNT PULLED	
700 SKS CLASS C		160 SKS	
1800 SKS CLASS C + H		180 SKS	
29. LINER RECORD			
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*
		None	
SCREEN (MD)		30. TUBING RECORD	
		SIZE	DEPTH SET (MD)
		2 7/8"	3588'
PACKER SET (MD)			
31. PERFORATION RECORD (Interval, size and number)			
4061 - 4153, reperf 4061-4115, 3888 - 3970 3648 - 3851			
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED	
3648 - 4153		Acidized w/90 lbs 27,000 gals 30# HPG 61,500 # sand	
33.* PRODUCTION			
DATE FIRST PRODUCTION 6-30-88		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Pumping	
WELL STATUS (Producing or shut-in) Producing			
DATE OF TEST 8-4-88	HOURS TESTED 24	CHOKE SIZE	PROD'N. FOR TEST PERIOD
			29
OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
		495	
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL GRAVITY-API (CORR.)
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) SOLD			
TEST WITNESSED BY Pete Bowers			
35. LIST OF ATTACHMENTS SJS			
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records SEP 2 7 1988			
SIGNED Mark Simpson		TITLE Adm. Supervisor	
DATE 9-20-88			

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

CARLSBAD, NEW MEXICO

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 POREOUS ZONES: SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF; CORED INTERVALS; AND ALL DEPTH-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CUSHION (SED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES)			38. GEOLOGIC MARKERS		
FORMATION	TOP	BOTTOM	NAME	MEAS. DEPTH	TRUE VERT. DEPTH
Grayburg 5 th 6 ^m	3643'	3704'			
SAU ANDROS 7 th 9 th	3803'	4052'			
9 th Massive	4092'				

RECEIVED
SEP 29 1968
OCD
HOBBS OFFICE