

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE

(See instructions on
reverse side)Form approved.
Budget Bureau No. 12 R355.5.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG*

1a. TYPE OF WELL: OIL WELL ☒ GAS WELL ☐ DRY ☐ Other ☐b. TYPE OF COMPLETION: NEW WELL ☐ WORK OVER ☐ DEEP EN ☒ PLUG BACK ☐ DIFF. RESVR. ☐ Other ☐

2. NAME OF OPERATOR

Humble Oil & Refg Co.

3. ADDRESS OF OPERATOR

Box 1600 - Midland Texas 79701

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

At surface 660' FTL, 660 FEL

At top prod. interval reported below

At total depth

198' -

14. PERMIT NO.

DATE ISSUED

12. COUNTY OR
PARISH

13. STATE

Lea

N. Mex

15. DATE SPUDDED

16. DATE T.D. REACHED

17. DATE COMPL. (Ready to prod.)

18. ELEVATIONS (DF, RKB, RT, GR, ETC.)*

19. ELEV. CASINGHEAD

4-18-69

4-25-69

5-1-69

3657' DF

20. TOTAL DEPTH, MD & TVD

21. PLUG. BACK T.D., MD & TVD

22. IF MULTIPLE COMPL.
HOW MANY*23. INTERVALS
DRILLED BY

ROTARY TOOLS

CABLE TOOLS

6000'

1823

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*

5878'-5922' (Blinabry)

25. WAS DIRECTIONAL
SURVEY MADE

No

26. TYPE ELECTRIC AND OTHER LOGS RUN

Sidewall Neutron-GR-Caliper

27. WAS WELL CORED

No

CASING RECORD (Report all string set in well)				CEMENTING RECORD		AMOUNT PULLED
CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE			
12 1/2"	55 #	204' 7"	17"		180	None
9 5/8"	36 #	2750'	11 1/2"		630	✓
7"	24 #	3962'	8 3/4"		528	✓
4 1/2"	9.5 #	6000'	6 1/4"		275	✓

LINER RECORD					TUBING RECORD		
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					2 3/8"	5930'	-

31. PERFORATION RECORD (Interval, size and number)

5878-5888-5900-5908-5918-5922'
w/ 2 RASF Shots

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
5878-5922'	2000 gal. NE acid

PRODUCTION								WELL STATUS (Producing or shut-in)	
33.* DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)						Producing	
4-30-69		Pumping							
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO		
5-1-69	10	—	→	98	11	12	112		
FLOW, TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)			
			335	36	29	36.6			

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)

Sold - Phillips Pet Co.

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

D. L. Clemmer

TITLE

Unit Head

DATE

5/5/69

*(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; CORED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CUSHION TESTED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES		38. GEOLOGIC MARKERS	
ELEVATION	TOP	NAME	MEAS. DEPTH
Lime	4177	Russler	1453
		Yates	2630
		San Andres	4017
		Glorietta	5365
		Blinberry	5760
	6000' T.O.		
	Began deepening @ 4177'		