

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE

(See other in-
structions on
reverse side)Form approved.
Budget Bureau No. 42-R355.5.

5. LEASE DESIGNATION AND SERIAL NO.

LC 067230

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Shell Federal

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Wildcat11. SEC., T., R., M., OR BLOCK AND SURVEY
OR AREA**Sec. 3, T19S, R32E**12. COUNTY OR
PARISH**Lea**

13. STATE

N. Mexico

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

Cactus Drilling Company

3. ADDRESS OF OPERATOR

Drawer 2068, Hobbs, New Mexico

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

At surface **1980' FS & FE Lines Sec. 3, Unit J.**

At top prod. interval reported below

At total depth

14. PERMIT NO.

DATE ISSUED

1-13-65

15. DATE SPUDDED

1-17-65

16. DATE T.D. REACHED

3-7-65

17. DATE COMPL. (Ready to prod.)

3-21-65

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

3682 DF

19. ELEV. CASINGHEAD

3674' 92

20. TOTAL DEPTH, MD & TVD

4203

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

3920

22. IF MULTIPLE COMPL.,

HOW MANY*

Is Not Multi.

23. INTERVALS

DRILLED BY

ROTARY TOOLS

0-1324

CABLE TOOLS

1324-TD

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

3848' - 3858' Seven Rivers25. WAS DIRECTIONAL
SURVEY MADE**no**

26. TYPE ELECTRIC AND OTHER LOGS RUN

Gamma Ray/Neutron

27. WAS WELL CORED

no

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"	20#	1324'	11"	350 sx circ.	none
7"	23#	3990'	8"	125 sx circ to base	none
				salt	

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
none					2-3/8"	3877	3757'

31. PERFORATION RECORD (Interval, size and number)

20 holes, 4" NCF, 2 SPF, 3858-3848.

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
Acidize	500 gal MEC
Acidize	500 gal Unisol
Fracture	20,000 gal : 23,000 # sd

33.*

PRODUCTION

DATE FIRST PRODUCTION 3-21-65		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Flowing				WELL STATUS (Producing or shut-in) Producing	
DATE OF TEST 3/21-22/65	HOURS TESTED 24	CHOKE SIZE 1/2"	PROD'N. FOR TEST PERIOD →	OIL—BBL. 42	GAS—MCF. 37.8	WATER—BBL. no	GAS-OIL RATIO 900:1
FLOW. TUBING PRESS. 60#	CASING PRESSURE Packer	CALCULATED 24-HOUR RATE →	OIL—BBL. -	GAS—MCF. -	WATER—BBL. -	OIL GRAVITY-API (CORR.) 32.1	

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

Vent

TEST WITNESSED BY

R. E. Davis

35. LIST OF ATTACHMENTS

Logs

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records

SIGNED

Lee W. Baker

TITLE

Vice President

DATE

Mar. 25, 1965

*(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 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
7 Rivers	3727	3738	17 gal water per hour Hole full of water Oil show	Anby Salt Salt (base) Yates 7 Rivers Queen	1296
	3759	3778			1420
	3848	3858			2750
Queen	4050	4060	19 gal water per hour Hole full of water		2995
	4190	4203			3481
					3925