

UNITED STATES DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYN. M. OIL CONS. COMMISSION
SUBMIT IN DUPLICATE
P. O. BOX 1330
ALBUQUERQUE, NEW MEXICO 87106Form approved.
Budget Bureau No. 42-R355.5.RECEIVED
LEASE DESIGNATION AND SERIAL NO.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL: OIL WELL ☒ GAS WELL ☐ DRY ☐ Other Re-Entryb. TYPE OF COMPLETION:
NEW WELL ☐ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. CENVR. ☐ Other P&A2. NAME OF OPERATOR
Manzano Oil Corporation3. ADDRESS OF OPERATOR
P.O. Box 2107, Roswell, NM 882024. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*
At surface 1980' FNL & 1980' FEL, Section 11-19S-32EAt top prod. interval reported below same unit GAt total depth same

14. PERMIT NO. DATE ISSUED

15. DATE SPUDDED 8-20-90 16. DATE T.D. REACHED 8-22-90 17. DATE COMPL. (Ready to prod.) 8-29-9018. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 3630' GL20. TOTAL DEPTH, MD & TVD 4275' 21. PLUG BACK T.D., MD & TVD 4275'22. IF MULTIPLE COMPL., HOW MANY* 123. INTERVALS DRILLED BY ROTARY TOOLS CABLE TOOLS24. PRODUCING INTERVAL(S). OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*
non-productive in Yates "A" & "C"25. WAS DIRECTIONAL SURVEY MADE
no26. TYPE ELECTRIC AND OTHER LOGS RUN
GR-CCL-CNL27. WAS WELL CORED
no

28. CASING RECORD (Report all strings set in well)

CASINO SIZE WEIGHT, LB./FT. DEPTH SET (MD) HOLE SIZE CEMENTING RECORD AMOUNT PULLED

CASINO SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
13-3/8"	54#	405'	17-1/2"	450 sx	None
8-5/8"	24# & 32#	4370'	11"	1400 sx	None
4-1/2"		13,050'	7-7/8"	910 sx	5050

29. LINER RECORD

30. TUBING RECORD

31. PERFORATION RECORD (Interval, size and number)

Yates "C" 3546-56 and 3566-82' (29 holes)
Yates "A" 3440-72' (33 holes)

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

DEPT. INTERVAL (MD) AMOUNT AND KIND OF MATERIAL USED

3546-82' 1500 gal 15% NE/FE + 45 balls
3440-72' 2000 gal 15% NE/FE + 45 balls

33.* PRODUCTION

DATE FIRST PRODUCTION PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)

WELL STATUS (Producing or shut-in)
P&A

DATE OF TEST HOURS TESTED CHOKE SIZE PROD'N. FOR TEST PERIOD OIL—BBL. GAS—MCF. WATER—BBL. GAS-OIL RATIO

FLOW. TUBING PRESS. CASING PRESSURE CALCULATED 24-HOUR RATE OIL—BBL. GAS—MCF. WATER—BBL. OIL GRAVITY-API (CORR.)

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

35. LIST OF ATTACHMENTS
logs: GR-CCL-CNL

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

SIGNED Sher Williams TITLE Production Clerk DATE 9-18-90

* (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 agency.

submitted, particularly with regard to local, area, or regional information, should be submitted separately 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.), formations and/or State office. See instructions on Items 22 and 24, and 83, below regarding separate reports for separate completions.

All attachments 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 33.

Consult local State requirements.

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

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.

item 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, showing the additional data pertinent to such interval.

Item 29: Cement's compaction 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 cement sacks used. (See instruction for items 22 and 24 above.)

Item 33: Submit a separate completion report on this form for each interval to be separately produced.

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					
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.		

38. GEOLOGIC MARKERS			
NAME	TOP		TRUE VERT. DEPTH
	MEAS. DEPTH		