

UNITED STATES DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE

(See also Instructions on reverse side)

WELL COMPLETION OR RECOMPLETION REPORT AND LOG*

1a. TYPE OF WELL: OIL WELL ☒ GAS WELL ☐ DRY ☒ Other _____

5. LEASE DESIGNATION AND SERIAL NO.

NM 025497

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Jennings "A" Federal

9. WELL NO.

3

10. FIELD AND POOL, OR WILDCAT

Northeast Lusk Yates

11. SEC., T., R., M., OR BLOCK AND SURVEY
OF AREA

Sec. 15, T-19-S, R-32-E

12. COUNTY
PARISH

13. STATE

Lea

New Mexico

15. DATE SPUDDED 12-16-81	16. DATE T.D. REACHED 12-23-81	17. DATE COMPL. (Ready to prod.) 1-23-82	18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 3630.7' GR	19. ELEV. CASINGHEAD 3630.7' GR
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20. TOTAL DEPTH, MD & TVD 3002	21. PLUG, BACK T.D., MD & TVD 3001	22. IF MULTIPLE COMPL., HOW MANY*	23. INTERVALS DRILLED BY	ROTARY TOOLS	CABLE TOOLS
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24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* Yates 2872- 3002	25. WAS DIRECTIONAL SURVEY MADE Yes
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26. TYPE ELECTRIC AND OTHER LOGS RUN	
Gr Log	
27. 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
8-5/8"	24#	443	12 1/4"	375 SXS	None
5-1/2"	14#	3002	7-7/8"	535 SXS	None
					None

29. LINER RECORD					30. TUBING RECORD		
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					2-7/8"	2937	

31. PERFORATION RECORD (Interval, size and number)		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.
		DEPTH INTERVAL (MD)
		AMOUNT AND KIND OF MATERIAL USED
2994-2999	2 JSPF. 11 holes, w/4" csg gun	Acid w/ 2000 Gals 15% NEHCL
23	gm chg.	Frac w/ 20,000 Gals Frac Fluid
3002-3014	Open hole	Sqz w/ 200 sxs "C"
		3002-3014 Acid w/ 1000 Gals 15% NEHCL

33.* Dry Hole		PRODUCTION	ACDZ w/ 1000 Gals 15% NEHCL
DATE FIRST PRODUCTION	PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)		WELL STATUS (Producing or

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-AP1 (CORR.)	

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

		OIL & GAS MINERALS
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 William H. King TITLE Accounting Assistant II DATE Jan. 10, 1983

*(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 38, 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 36.

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 19: 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) of 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

FORMATION			TOP		BOTTOM		DESCRIPTION, CONTENTS, ETC.		NAME		MEAS. DEPTH		TOP		TRUE VERT. DEPTH	
Rustler Tansill Yates	1077	2629	2832	2629	2832	2832	Anhydrite, Salt Anhydrite, Dolomite Anhydrite, Dolomite, Sandstone Perf: 2994-2999 A/ 1000 Gals 15% NEHCL RE A/ 1000 Gals 15% NEHCL Frac: 6000 Gals/ 4500 # sand Re Frac: 14,000 Gals/11,000 # sand Test: 0 BO, 2 BW Tested open hole 3002-3014 A/1000 Gals 15% NEHCL Frac: 14,000 Gals/11,000 # sand Test: Trace oil, 35 BW									

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FEB 1 1983
O.C.D.
HOBBS OFFICE