

**UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY**

SUBMIT IN DUPLICATE

(See other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R355.5.

5. LEASE DESIGNATION AND SERIAL NO.

NM30398

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Caviness Federal

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Mescalero Escarpe

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

Sec 11, T18S, R33E

12. COUNTY OR PARISH

Lea

13. STATE

New 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

El Paso Exploration Company

3. ADDRESS OF OPERATOR

1800 Wilco Bldg. Midland, Texas 79701

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

At surface 1980 FSL & 1980 FWL

At top prod. interval reported below

At total depth

14. PERMIT NO.

NM30398

DATE ISSUED

9-18-85

15. DATE SPUDDED

11-19-85

16. DATE T.D. REACHED

12-16-85

17. DATE COMPL. (Ready to prod.)

12-21-85

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

4,000 GR

19. ELEV. CASINGHEAD

20. TOTAL DEPTH, MD & TVD

8920'

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

8885'

22. IF MULTIPLE COMPL., HOW MANY*

23. INTERVALS DRILLED BY

→

ROTARY TOOLS

X

CABLE TOOLS

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

8706-8726

8688-8700

Bone Spring

25. WAS DIRECTIONAL SURVEY MADE

Yes

26. TAPE ELECTRIC AND OTHER LOGS RUN

CBL/GR/CNL

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
13 3/8	61	555	17 1/2	575 sxs Cls 'C'	Circ
8 5/8	24/32	3278	11	900 sxs HalcoLite & Cls 'C'	Circ
5 1/2	17	8920	7 7/8	400 sxs HalcoLite & Cls 'H'	Circ

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
N/A							

31. PERFORATION RECORD (Interval, size and number)

2 1/8"

32 shots

8706-8726, 8688-8700

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
8706-8726	None - natural completion
8688-8700	

33. PRODUCTION

DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)					WELL STATUS (Producing or shut-in)	
12-21-85		Flowing					Producing	
DATE OF TEST	HOURS TESTED	CHOKER SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO	
12-24-85	24	1"	————→	257	334	-0-	1302	
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)		
70	70	————→	257	334	-0-	39		

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

Vented

TEST WITNESSED BY

35. LIST OF ATTACHMENTS

Inclination report & Logs

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

SIGNED

Carole Myers

TITLE

Production Clerk

DATE

1-6-86

*(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 POROSITY ZONES: SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF; COBED INTERVALS; AND ALL DATA-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	TOP MEAS. DEPTH	TRUE VERT. DEPTH
Rustler	1605					
Yates	3210					
Queen	4256					
Grayburg	4692					
San Andres	5026					
One Spring	6680					
1st Bone Spring Sand	8258					
2nd Bone Spring Sand	8883					

RECEIVED
JAN 13 1986
O.C.D.
HOBBS OFFICE