

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.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL: OIL WELL ☒ GAS WELL ☐ DRY ☐ Other _____		5. LEASE DESIGNATION AND SERIAL NO. NM 073240																															
b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other _____		6. IF INDIAN, ALLOTTEE OR TRIBE NAME _____																															
2. NAME OF OPERATOR Walter W. Krug DBA Wallen Production Company		7. UNIT AGREEMENT NAME _____																															
3. ADDRESS OF OPERATOR Box 1960, Midland, Texas 79702		8. FARM OR LEASE NAME Wallen Tonto																															
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 990' FWL & 990' FSL At top prod. interval reported below Same At total depth Same		9. WELL NO. # 4																															
14. PERMIT NO. _____ DATE ISSUED _____		10. FIELD AND POOL, OR WILDCAT S Tonto, Yates, Seven River																															
15. DATE SPUDDED 11/13/77		11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA Sec 30, T 19 S, R 33 E																															
16. DATE T.D. REACHED 1/10/78		12. COUNTY OR PARISH Lea																															
17. DATE COMPL. (Ready to prod.) 1/25/78		13. STATE New Mexico																															
18. ELEVATIONS (DF, REB, RT, GR, ETC.)* GR 3580'		19. ELEV. CASINGHEAD GR 3580'																															
20. TOTAL DEPTH, MD & TVD 3130'		21. PLUG, BACK T.D., MD & TVD _____																															
22. IF MULTIPLE COMPL., HOW MANY* _____		23. INTERVALS DRILLED BY ROTARY TOOLS _____ CABLE TOOLS ☒																															
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 2904' - 3107'		25. WAS DIRECTIONAL SURVEY MADE? No																															
26. TYPE ELECTRIC AND OTHER LOGS RUN GRN		27. WAS WELL CORED? No																															
28. CASING RECORD (Report all strings set in well)																																	
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31. PERFORATION RECORD (Interval, size and number)																																	
2991' - 3107'																																	
0.51" - 20 shots																																	
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.																																	
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33. PRODUCTION																																	
DATE FIRST PRODUCTION 1/20/78																																	
PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Pump 1 1/2" x 12" (swabbing test)																																	
WELL STATUS (Producing or shut-in) shut in																																	
DATE OF TEST 1/20/78																																	
HOURS TESTED 24																																	
CHOKE SIZE _____																																	
PROD'N. FOR TEST PERIOD _____																																	
OIL—BBL. 92																																	
GAS—MCF. TSTM																																	
WATER—BBL. 4																																	
GAS-OIL RATIO TSTM																																	
FLOW. TUBING PRESS. _____																																	
CASING PRESSURE 40 PSI																																	
CALCULATED 24-HOUR RATE _____																																	
OIL—BBL. 92																																	
GAS—MCF. TSTM																																	
WATER—BBL. 4																																	
OIL GRAVITY-API (CORR.) 32°																																	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Used for fuel																																	
TEST WITNESSED BY Walter W. Krug																																	
35. LIST OF ATTACHMENTS GRN																																	
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records																																	
SIGNED <u>Walter W. Krug</u> TITLE <u>Engineer</u> DATE <u>1/23/78</u>																																	

*(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, of 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 33.

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 RECORDS

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.
Santa Rosa	552	570	Water sand, H 20
11	600	660	"
Yates	2904	3107	Oil

38. GEOLOGIC MARKERS

NAME	MEAS. DEPTH	TOP	TRUE VERT. DEPTH
Santa Rosa	552		Same
Salt & Potash	1205		Same
Lime	2880		Same
Yates	2904		Same
Seven-Rivers	3107		Same

FEB 7 1978
OIL CONSULTING
HOBBS, N.M.