

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE

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

WELL COMPLETION OR RECOMPLETION REPORT AND LOG*

1. TYPE OF WELL: OIL WELL ☐ GAS WELL ☐ DRY ☒ Other <u>P&A</u>				5. LEASE DESIGNATION AND SERIAL NO. NM 15023	
2. TYPE OF COMPLETION: NEW WELL ☐ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR ☐ Other <u>P&A</u>				6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. NAME OF OPERATOR Holly Energy Inc.				7. UNIT AGREEMENT NAME	
4. ADDRESS OF OPERATOR P.O. Box 726 Artesia, New Mexico 88210				8. FARM OR LEASE NAME Beverly Federal	
5. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 1650 FSL & 1980 FEL Section 1 T-18S R-32E At top prod. interval reported below At total depth Same				9. WELL NO. 1	
10. FIELD AND POOL OR WILDCAT Corbin-Queen				11. SEC. T. R. M. OR BLOCK AND SURVEY OR AREA Sec 1, T-18S R-32E	
12. PERMIT NO.		DATE ISSUED		12. COUNTY OR PARISH Lea	
13. STATE NM		13. STATE			
14. DATE SPIDDED 1-31-82		16. DATE T.D. REACHED 2-18-82		17. DATE COMPLE. (Ready to prod.) P&A	
18. ELEVATIONS (DF, HKB, RT, GR, ETC.)* 3903.8 GR		19. ELEV. CASINGHEAD			
20. TOTAL LENGTH, MD & TVD 4345		21. PLUG, BACK T.D., MD & TVD P&A		22. IF MULTIPLE COMPLE. HOW MANY*	
23. INTERVALS INCLUDED BY 0-ID		24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* Plugged and Abandoned		25. WAS DIRECTIONAL SURVEY MADE No	
26. TYPE ELECTRIC AND OTHER LOGS RUN DIL/MIL/GR CDL/CNL/GR				27. WAS WELL COILED No	
28. CASING RECORD (Report all strings set in well)					
CASING SIZE 8-5/8	WEIGHT, LB./FT. 24#	DEPTH SET (MD) 611	BORE SIZE 12 1/4	CEMENTING RECORD 375 sacks	AMOUNT PULLED None
29. LINER RECORD					
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	PACKER SET (MD)
30. TUBING RECORD					
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	PACKER SET (MD)
31. PERFORATION RECORD (Interval, size and number) Plugged and Abandoned			32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE TESTS DEPTH INTERVAL (MD) NOV 17 1982		
33. PRODUCTION					
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)			
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.	WATER—BBL. OIL GRAVITY-API (CORR.)
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)				TEST WITNESSED BY	
35. LIST OF ATTACHMENTS					
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records plugging procedure					

MINERALS MANAGEMENT SERVICE
ROSWELL, NEW MEXICO

ACCEPTED FOR RECORD
(ORIG. SGN.) DAVID R. GLASS
DEC 8 1982

*(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, sample and core analysis, all types electric logs, and 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 measurements should be listed on this form, see Item 33, should be listed on this form, see Item 33, or Federal office for specific instructions.

Item 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements.

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 accompanying logs.

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 production 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 identifying 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.)

RECEIVED
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37. SUMMARY OF FORMER ZONES:

SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF; CORED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL, TESTED, CIRCULATION UPRD, TIME TOOL, OPEN, FLOWING AND SHUT-IN PRESSURE, AND RECOVERIES

FORMATION

TOP

BOTTOM

DESCRIPTION, CONTENTS, ETC.

38.

GEOLOGIC MARKERS

NAME

MEAN DEPTH

TOP

TRUE VERT. DEPTH

Top Sale

1512

2391.8

Yates

2922

981.8

Seven Rivers

3170

733.8

Bowers

3688

215.8

Queen

4008

-104.4

Penrose

4277

373.4