

U. S. GEOLOGICAL SURVEY
P. O. BOX 1930
HOBBS, NEW MEXICO 88240UNITED 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.

5. LEASE DESIGNATION AND SERIAL NO.

NM 40456

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Sprinkle "B" Fed

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Undes Bone Springs

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

Sec 1-T18S-R32E

12. COUNTY OR
PARISH
Lea13. STATE
NM

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

Gulf Oil Corporation

3. ADDRESS OF OPERATOR

P. O. Box 670, Hobbs, NM 88240

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

At surface 2310' FNL & 1980' FWL

At top prod. interval reported below

At total depth

14. PERMIT NO.

DATE ISSUED

15. DATE SPUDDED 16. DATE T.D. REACHED 17. DATE COMPL. (Ready to prod.) 18. ELEVATIONS (DF, RSB, RT, GR, ETC.)* 19. ELEV. CASINGHEAD

9-28-84

10-23-84

None-Dry

3912' GL

20. TOTAL DEPTH, MD & TVD 21. PLUG, BACK T.D., MD & TVD 22. IF MULTIPLE COMPL., HOW MANY* 23. INTERVALS DRILLED BY 24. ROTARY TOOLS 25. CABLE TOOLS

9200'

Single-Dry

0'-9200'

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

Dry- P&A

No

26. TYPE ELECTRIC AND OTHER LOGS RUN

NGT-CNL-LDT, BHC, DLL-MSFL

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"	48#	456'	17 1/2"	500 sx-circ	
8-5/8"	28#	3800'	11"	1650 sx-circ	

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					None		

31. PERFORATION RECORD (Interval, size and number)

None - P&A

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
None	

33. PRODUCTION

DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)					WELL STATUS (Producing or shut-in)	
None-Dry		P&A					P&A	
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO	
			→	ACCEPTED FOR RECORD				
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.)

None-Dry

JAN 15 1985

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

SIGNED

James H. Howard

TITLE

Area Engineer

DATE

11-30-84

*(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 83, 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 POROUS ZONES:			38. GEOLOGIC MARKERS	
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME
Bone Spring	7810	7945	IHYD 3812 psi, FHYD 3817 psi, 5 min IFP 1153 psi, 64 min ISIP 3179 psi, 61 min FFP 2328 psi, 130 min FSIP 2916 psi-DF rec 30 oil, 100' wtr-hole in DP just above collars, lost most of rec, no rec in sampler	Anhydrite Base Salt Yates
Bone Spring	7800	7945	IHYD 3822 psi, FHYD 3753 psi, 4 min IFP 693 psi, 60 min ISIP 3553 psi, 52 min FFP 2122 psi, 122 min FSIP 3049 psi-DP rec 4034' sli gas cut wtr /wtr oil-sampler 85 psig .14 CFG, 2250 cc wtr	Seven Rivers Queen
Bone Spring	8270	8325	IHYD 3995 psi, FHYD 3973 psi, 5 min IFP 119, 62 min ISIP 3261 psi, 61 min FFP 379 psi, 120 min FSIP 2705 psi-DP rec 650' sli gas cut drlg flu-sampler 15 psi, 1.38 CFG, 850 cc drl flu	San Andres Delaware Bone Spring 2nd BS Sd
Bone Spring	8480	8630	IHYD 3981 psi, FHYD 3883, 5 min IFP 105 psi, 59 min ISIP 201 psi, 57 min FFP 125 psi, 120 FSIP 189 psi-DF rec 60' sli wtr cut drlg flu, sampler 2250 cc wtr 2 psi	
Bone Spring	7790	7835	IHYD 3697, FHYD 3697, 5 min IFP 73 psi, 60 min ISIP 3367 psi, 60 min FFP 154#, 120 min FSIP 3069 psi-DP rec 400' wtr	