

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

5a. Indicate Type of Lease
State Fee
5. State Oil & Gas Lease No.
V-1355

1a. TYPE OF WELL
OIL WELL GAS WELL DRY OTHER _____

b. TYPE OF COMPLETION
NEW WELL WORK OVER DEEPEN PLUG BACK DIFF. RESVR. OTHER _____

2. Name of Operator
Exxon Corporation Attn: David A. Murray

3. Address of Operator
P. O. Box 1600, Midland, TX 79702

4. Location of Well
UNIT LETTER A LOCATED 330 FEET FROM THE North LINE AND 660 FEET FROM

THE East LINE OF SEC. 9 TWP. 17S RGE. 37E NMPM
15. Date Spudded _____ 16. Date T.D. Reached _____ 17. Date Compl. (Ready to Prod.) 12-29-86

18. Elevations (DF, RKB, RT, GR, etc.) GR 3768
19. Elev. Casinghead _____

20. Total Depth _____ 21. Plug Back T.D. 10,325
22. If Multiple Compl., How Many _____ 23. Intervals Drilled By: Rotary Tools _____ Cable Tools _____

24. Producing Interval(s), of this completion - Top, Bottom, Name
8810-8860 ABO (Attempted recompletion interval)

25. Was Directional Survey Made _____
26. Type Electric and Other Logs Run _____ 27. Was Well Cored _____

28. CASING RECORD (Report all strings set in well)

CASING SIZE	WEIGHT LB./FT.	DEPTH SET	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
13 3/8	54.5	462	17 1/2	500 sx	None
8 5/8	32	4198	12 1/4	1700 sx	None
5 1/2	17, 15.5	11412	7 7/8	1050 sx	None

29. LINER RECORD				30. TUBING RECORD			
SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN	SIZE	DEPTH SET	PACKER SET

31. Perforation Record (Interval, size and number)
8810-8860, 62 shots

32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
DEPTH INTERVAL	AMOUNT AND KIND MATERIAL USED
CIBP @ 10325	Test to 1000# - OK and cap w/ 35' cmt.
8810-8860	Acidized w/ 3000 gal. of 15% HCL

33. PRODUCTION
Date First Production N/A Production Method (Flowing, gas lift, pumping - Size and type pump) _____ Well Status (Prod. or Shut-in) _____

Date of Test	Hours Tested	Choke Size	Prod'n. For Test Period	Oil - Bbl.	Gas - MCF	Water - Bbl.	Gas - Oil Ratio

34. Disposition of Gas (Sold, used for fuel, vented, etc.) _____
Test Witnessed By _____

35. List of Attachments
Sundry Notice

36. I hereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief.

SIGNED David A. Murray TITLE Permits Supervisor DATE 2-3-87

