

UNITED STATES N. M. DEPT. OF THE INTERIOR
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY
HOBBS, NEW MEXICO 88240Form approved.
Budget Bureau No. 42-R355.5.

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 The Superior Oil Company							
3. ADDRESS OF OPERATOR P. O. Box 3901 Midland, Texas 79701							
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 1980' FNL & 1980' FEL, Sec 21, T20S - R35E At top prod. interval reported below At total depth Straight Hole							
14. PERMIT NO.				DATE ISSUED 4-21-81			
15. DATE SPUDDED 4-28-81		16. DATE T.D. REACHED 10-31-81		17. DATE COMPL. (Ready to prod.) 2-18-82		18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* GR - 3716'	
20. TOTAL DEPTH, MD & TVD 14100		21. PLUG, BACK T.D., MD & TVD 10160		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)* Bone Springs 10086 - 96 DLL-CNL-FDC-BHC						25. WAS DIRECTIONAL SURVEY MADE NO	
26. TYPE ELECTRIC AND OTHER LOGS RUN DLL-CNL-FDC-BHC						27. WAS WELL CORED NO	
28. CASING RECORD (Report all strings set in well)							
CASING SIZE		WEIGHT, LB./FT.		DEPTH SET (MD)		HOLE SIZE	
20"		94		61'		26	
16"		65		628'		18-1/2	
10 3/4"		51 & 45.5		4421		14 3/4	
7 5/8"		29.7 & 26.4		11486		9 1/2	
29. LINER RECORD		30. TUBING RECORD					
SIZE		TOP (MD)		BOTTOM (MD)		SACKS CEMENT*	
5"		11194		14100		350 CL. H	
31. PERFORATION RECORD (Interval, size and number)		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.					
13575 - 81		9370					
13618 - 61		8940 w/ 4-jspf					
12478 - 515		(Squeeze Perfs)					
11968 - 75							
10086 - 96		w/2 jspf					
33. PRODUCTION		34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)					
DATE FIRST PRODUCTION 11-16-81		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Pumping-Rod pump 2 1/2 X 1 1/2 X 16"		WELL STATUS (Producing or shut-in) Producing			
DATE OF TEST 3-3-82		HOURS TESTED 24		CHOKE SIZE 58		PROD'N. FOR TEST PERIOD 50	
FLOW, TUBING PRESS. 75#		CASING PRESSURE 20#		CALCULATED 24-HOUR RATE 37.6		OIL GRAVITY-API (CORR.) 37.6	
35. LIST OF ATTACHMENTS 2 copies of logs		36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records					
SIGNED G. E. Tate		TITLE Production Superintendent		DATE 3/12/82			

* (See Instructions and Spaces for Additional Data on Reverse Side)

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 agency and/or State office. See instructions on Items 22 and 24, and 83, below regarding separate reports for separate completions.

tion 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 concrete production, show more than one item.

items 22 and 24: If this well is completed for separate production from more than one interval zone (multiple completion), so state in item 24 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: "Socks 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.)

7. SUMMARY OF FOLIOUS 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 RECOVERIES		38. GEOLOGIC MARKERS	
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.
Red Beds	402		
Rustler	2000		
Delaware	5847		
Bone Springs	8430		
Wolfcamp	11746		
Strawn	12104		
Atoka	12445		
Morrow	12965		
Barnett	13365		

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