

UNITED STATES

SUBMIT IN DUPLICATE*

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

N. M. OIL CONS. COMMISSION

P. O. BOX 1980

HOBBS, NEW MEXICO 88240

DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY(See or in-
str. as on
reverse side)

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

RECEIVED
MAY 20 1983

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
Anadarko Production Company3. ADDRESS OF OPERATOR
P.O. Box 806 Eunice, New Mexico 882314. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*
At surface 1295' FWL & 1980' FWL

At top prod. interval reported below

At total depth

14. PERMIT NO. DATE ISSUED
11-15-82

OIL & GAS

ROSWELL, NEW MEXICO

5. LEASE DESIGNATION AND SERIAL NO.

LC 064975

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

Teas Yates Unit

8. FARM OR LEASE NAME

Tract # 2

9. WELL NO.

3

10. FIELD AND POOL, OR WILDCAT

Teas Yates

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

Sec 13, Twp 20S, Rq 33E

12. COUNTY OR PARISH

Lea

13. STATE

NM

15. DATE SPUDDED 4-1-83 16. DATE T.D. REACHED 5-6-83 17. DATE COMPL. (Ready to prod.) 5-12-83 18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 3603' GR 19. ELEV. CASINGHEAD 3601'

20. TOTAL DEPTH, MD & TVD 3386' 21. PLUG, BACK T.D., MD & TVD 3386' 22. IF MULTIPLE COMPL., HOW MANY* 23. INTERVALS DRILLED BY 10 - 3200' 24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 3228' - 3386' OH 25. WAS DIRECTIONAL SURVEY MADE Yes

26. TYPE ELECTRIC AND OTHER LOGS RUN

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
10-3/4"	40.5#	1470'	14-3/4"	1000 ΔX	
7-5/8"	29.70#	3200'	9-7/8"	1700 ΔX	

29. LINER RECORD					30. TUBING RECORD		
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					2-3/8"	3366'	

31. PERFORATION RECORD (Interval, size and number)				32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
				DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
OH Completion					

33.* PRODUCTION							
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)					WELL STATUS (Producing or shut-in)
5-12-83		Pumping Insert 2"x1 1/2"x16'					Producing
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
5-16-83	24			66	12.9	0	195
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)	
						33.8	

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)
SoldACCEPTED FOR RECORD
(ORIG. SGD) DAVID R. GLASS

TEST WITNESSED BY

Bill Winker

35. LIST OF ATTACHMENTS

Compensated Neutron GR

MAY 25 1983

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records

SIGNED David R. Glass TITLE Field Foreman DATE May 18, 1983

*(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.

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: 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.	NAME	MEAS. DEPTH. TRUE VERT. DEPTH
Redbed	0	946'	Red Clays & Red Rock	Anhydrite	1392'
Anhydrite	946'	1392'	Anhydrite	Salt	1500'
Salt	1500'	3144'	Salt & Anhydrite	Vates	3228'
Twinsill	3144'	3228'	Dolomite		
Vates	3228'		Sand & Limestone		

RECEIVED
MAY 26 1983
O.C.D.
HOBBS OFFICE