

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE

(Instructions on
reverse side)Form approved.
Budget Bureau No. 42-R355.5.

5. LEASE DESIGNATION AND SERIAL NO.

NM-02127-B

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL: OIL WELL ☐ GAS WELL ☐ DRY ☐ Other Disposal Well

b. TYPE OF COMPLETION:

NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other

2. NAME OF OPERATOR

Marathon Oil Company

3. ADDRESS OF OPERATOR

P. O. Box 2409 Hobbs, NM 88240

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

At surface 1625' FSL & 330' FWL

At top prod. interval reported below

At total depth

14. PERMIT NO.

DATE ISSUED

12/6/83

7. UNIT AGREEMENT NAME

Lea Unit

8. FARM OR LEASE NAME

Lea Unit

9. WELL NO.

SWD No. 2

10. FIELD AND POOL, OR WILDCAT

Lea

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

Sec. 12, T20S, R34E

12. COUNTY OR PARISH

Lea

13. STATE

NM

15. DATE SPUEDDED

12-30-83

16. DATE T.D. REACHED

1/12/83

17. DATE COMPL. (Ready to prod.)

18. ELEVATIONS (DF, RSB, RT, GR, ETC.)*

GR 3659, KB 367

19. ELEV. CASINGHEAD

3659

20. TOTAL DEPTH, MD & TVD

4611

21. PLUG, BACK T.D., MD & TVD

4611

22. IF MULTIPLE COMPL., HOW MANY*

23. INTERVALS DRILLED BY

ROTARY TOOLS

CABLE TOOLS

all

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

Open hole f/3800 - 4611', Seven Rivers formation

25. WAS DIRECTIONAL SURVEY MADE

No

26. TYPE ELECTRIC AND OTHER LOGS RUN

GR-N

27. WAS WELL CORED

No

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

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
9 5/8"	32.3	898	12 1/4"	600 sx circ.	
7"	23	3800	8 3/4"	850 sx	
Open hole		4611	6 1/8"		

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					4 1/2"	3714	3714

30. TUBING RECORD

31. PERFORATION RECORD (Interval, size and number)

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED

33.*

PRODUCTION

DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)				WELL STATUS (Producing or shut-in)	
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.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)	
			→	RECEIVED FOR RECORD			

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)

ACCEPTED FOR RECORD
PETER W. CHESTER

TEST WITNESSED BY

35. LIST OF ATTACHMENTS

GR-N

APR 9 1984

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

SIGNED

Thomas F. Zaparka

TITLE

Production Engineer

DATE

3-22-84

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

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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 DOWN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES			38. GEOLOGIC MARKERS			
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH	TRUE VERT. DEPTH
Seven Rivers	3800	4611	Anhydrite and Lime			

RECEIVED
APR 12 1984
O.C.D.
MOBBS OFFICE

INCLINATION REPORT

OPERATOR Marathon Oil Company ADDRESS P. O. Box 2409 Hobbs, NM
LEASE Lea Unit WELL NO. SWD #2 FIELD Lea Unit
LOCATION 1625' FSL & 330' FWL, Sec. 12, T20S, R34E

<u>Depth</u>	<u>Inclination (Degrees)</u>	<u>Displacement</u>	<u>Displacement Accumulated</u>
505	1/4	2.2	2.2
900	1 1/4	8.6	10.8
1455	1	9.7	20.5
1942	3/4	6.4	26.9
2439	3/4	6.5	33.4
2911	1 1/4	10.3	43.7
3413	2	17.5	61.2
3800	1	6.7	67.9
4600	1/4	3.5	71.4

I hereby certify that the above data as set forth is true and correct to the best of my knowledge and belief.

Thomas F. Zaparka
Title: Production Engineer

Affidavit:

Before me, the undersigned authority, appeared Thomas F. Zaparka known to me to be the person whose name is subscribed herebelow, who, on making deposition, under oath states that he is acting for and in behalf of the operator of the well identified above, and that to the best of his knowledge and belief such well was not intentionally deviated from the true vertical whatsoever.

Thomas F. Zaparka
(Affiant's Signature)

Sworn and subscribed to in my presence on this the 23rd day of March, 1984.

Al Cochran
Notary Public in and for the County
of Lea, State of New Mexico

My Commission Expires 7-21-84

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APR 12 1984

**O.C.D.
HOUSE OFFICE**