

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE

(See other instructions on reverse side)

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

****CORRECTED****

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL: OIL WELL ☒ GAS WELL ☐ DRY ☐ Other ☐		5. LEASE DESIGNATION AND SERIAL NO. LC-048741-A	
b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESER. ☐ Other ☐		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
2. NAME OF OPERATOR Chevron U.S.A. Inc.		7. UNIT AGREEMENT NAME Eunice Monument South Unit	
3. ADDRESS OF OPERATOR P.O. Box 670, Hobbs, NM 88240		8. FARM OR LEASE NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 660 FSL and 2287 FWL At top prod. interval reported below At total depth		9. WELL NO. 123	
14. PERMIT NO. CER217		DATE ISSUED 6-15-87	
15. DATE SPUDDED 7-3-87		16. DATE T.D. REACHED 7-6-87	
17. DATE COMPL. (Ready to prod.) 8-10-87		18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 3541.0	
19. ELEV. CASINGHEAD		20. TOTAL DEPTH, MD & TVD 4200	
21. PLUG, BACK T.D., MD & TVD 4175		22. IF MULTIPLE COMPL., HOW MANY*	
23. INTERVALS DRILLED BY ROTARY TOOLS yes		24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* Grayburg/San Andres 4009-4020, 3874-3958, 3756 - 3860	
25. WAS DIRECTIONAL SURVEY MADE no		26. TYPE ELECTRIC AND OTHER LOGS RUN GR/CCL/CET	
27. WAS WELL CORRED no		28. CASING RECORD (Report all strings set in well)	
29. LINER RECORD		30. TUBING RECORD	
31. PERFORATION RECORD (Interval, size and number) 4" guns, 1 JHPF, 11 holes 4009-4020 54 holes, 1 JHPF 3874-3912, 3934-40, 3948-58 65 holes, 1 JHPF 3756-60, 3776-94, 3808-22 3828-39, 3842-60		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC. DEPTH INTERVAL (MD) 4009-4020 3874-3958 3756-3860 AMOUNT AND KIND OF MATERIAL USED 800 gal. 15% NEFE HCL 4000 gal 15% NEFE HCL 4000 gal 15% NEFE HCL	
33. PRODUCTION DATE FIRST PRODUCTION 8-21-87 HOURS TESTED 24 CHOKE SIZE 2"WO PROD'N. FOR TEST PERIOD 9 OIL—BBL. 9 GAS—MCF. 27 WATER—BBL. 127 GAS-OIL RATIO 3000 FLOW. TUBING PRESS. 30 CASING PRESSURE 30 CALCULATED 24-HOUR RATE 9 OIL—BBL. 9 GAS—MCF. 27 WATER—BBL. 127 OIL GRAVITY-API (CORR.) 33@70°		34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) sold	
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 <u>P. K. Elmer</u> / <u>M. E. Allen</u> TITLE <u>Staff Drilling Engineer</u> DATE <u>Sept. 29, 1987</u>	

*(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

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	38. GEOLOGIC MARKERS		
				NAME	MEAS. DEPTH	TRUE VERT. DEPTH
ANHY	1113	1305				
Salt	1305	2952				
Yates	2952	3200	Sands			
S. Rivers	3200	3390	Sands			
Queen	3390	3745	Sand/Dolo			
Grayburg	3745	4214 TD	Dolomite			

RECEIVED

OCT 12 1987
OCD
HOBBS OFFICE