

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other in-
structions on
reverse side)Form approved.
Budget Bureau No. 42-R355.5.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG*

1a. TYPE OF WELL: OIL WELL ☒ GAS WELL ☐ DRY ☐ Other _____		11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA Sec. 27-215-37E	
b. TYPE OF COMPLETION: NEW WELL ☐ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☒ DIFF. RESVR. ☐ Other _____		12. COUNTY OR PARISH Lea	
2. NAME OF OPERATOR CONOCO INC.		13. STATE NM	
3. ADDRESS OF OPERATOR P. O. Box 460, Hobbs, N.M. 88240		14. PERMIT NO. 30-025-06805	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 810' FNL & 660' FWL Unit D At top prod. interval reported below At total depth		15. DATE SPUDDED 12-15-49	
16. DATE T.D. REACHED 1-16-50		17. DATE COMPL. (Ready to prod.) 8/15/87	
18. ELEVATIONS (DF, R&B, RT, GR, ETC.)* 3419' 6L		19. ELEV. CASINGHEAD -	
20. TOTAL DEPTH, MD & TVD 6630'		21. PLUG, BACK T.D., MD & TVD 5440'	
22. IF MULTIPLE COMPL., HOW MANY*		23. INTERVALS DRILLED BY Workover rig	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 5250'-5265' - Paddock		25. WAS DIRECTIONAL SURVEY MADE NO	
26. TYPE ELECTRIC AND OTHER LOGS RUN GR-CLL		27. WAS WELL CORED NO	
28. CASING RECORD (Report all strings set in well)			
CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE
original		casing	still set in well
29. LINER RECORD			
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*
			NONE SET
30. TUBING RECORD			
SIZE	DEPTH SET (MD)	PACKER SET (MD)	
2 7/8"	5273'		
31. PERFORATION RECORD (Interval, size and number) 5250'-5265' w/4JSPF, 5155'-5165', 5175'-5180', 5185'-5190' w/4JSPF			
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED	
6515'-6612'		CIBP@ 6510'-Cmt From 6510'-6464'	
6380'-6460'		CIBP@ 6350'-Cmt From 6350'-6310'	
5570'-5760'		CIBP@ 5480'-Cmt From 5480'-5440'	
5250'-5155'		Acidized w/138 bbls 15% HCL-NH-FF	
33. PRODUCTION			
DATE FIRST PRODUCTION 8/29/87		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Test pumped	
DATE OF TEST 9/11/87		WELL STATUS (Producing or shut-in) shut-in	
HOURS TESTED 24	CHOKE SIZE	PROD'N. FOR TEST PERIOD	
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Shut-in			
35. LIST OF ATTACHMENTS SJS			
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records			
SIGNED [Signature]		TITLE Administrative Supervisor	
DATE 10-2-87			

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

12487
TA Camp Paddock Packed &
24 bbls + 22 bbls (hold) F

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.
Queen	3339	3490	No tests, ϕ on GRN log
Penrose	3490	3905	" " " " " "
Glorietta	5056	5216	" " " " " "
Blinberry	5527	6044	" " " " " "
Tubb	6044	6350	" " " " " "
Drinkard	6350'	6630 (TD)	Producing interval F28 BOPD I1

38. GEOLOGIC MARKERS

NAME	TOP	
	MEAS. DEPTH	TRUE VERT. DEPTH
Rustler Anhydrite	1150	
Queen	3339	
Penrose	3490	
Glorietta	5056	
Blinberry	5527	
Tubb	6044	
Drinkard	6350	