

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.

P. O. BOX 1930

ROSWELL, NEW MEXICO

WELL DESIGNATION AND SERIAL NO.

LC-031621(6)
88240

INDIAN, ALLOTTEE OR TRIBE NAME

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

1a. TYPE OF WELL: OIL WELL ☒ GAS WELL ☐ DRY ☐ Other _____		7. UNIT AGREEMENT NAME NMFU	
b. TYPE OF COMPLETION: NEW WELL ☐ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☒ DIFF. SERV. ☒ Other _____		8. FARM OR LEASE NAME Britt Phillips	
2. NAME OF OPERATOR CONOCO INC.		9. WELL NO. 1	
3. ADDRESS OF OPERATOR P. O. Box 460, Hobbs, N.M. 88240		10. FIELD AND POOL, OR WILDCAT Weir Blinberry	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 1980' FNL & 660' FWL At top prod. interval reported below ✓ At total depth ✓		11. SEC. T., R., M., OR BLOCK AND SURVEY OR AREA Sec. 10, T-20S, R-37E	
14. PERMIT NO. _____ DATE ISSUED _____		12. COUNTY OR PARISH Lea	
15. DATE SPUDDED 12-21-81		13. STATE N.M.	
16. DATE T.D. REACHED 12-31-81		18. ELEVATIONS (DF, RKB, RT, GR, ETC.)*	
17. DATE COMPL. (Ready to prod.) 1-8-82		19. ELEV. CASINGHEAD	
20. TOTAL DEPTH, MD & TVD 6650'		21. PLUG, BACK T.D., MD & TVD 6023'	
22. IF MULTIPLE COMPL., HOW MANY* —		23. INTERVALS DRILLED BY All	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 5655'-5887' Blinberry		25. WAS DIRECTIONAL SURVEY MADE NONE	
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: _____ No Change		29. TUBING RECORD Size: 2 3/8" Depth Set (MD): 5943' Packer Set (MD): _____	
30. PERFORATION RECORD (Interval, size and number) 5655', 59', 67', 73', 76', 81', 84', 94', 98', 5706', 23', 30', 33', 54', 60', 5817', 50', 57', 69', 5887' w/ 15PF - 20 holes		31. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC. Depth Interval (MD): 5655'-5887' Amount and Kind of Material Used: 40 lbs 15% HCL-NE-FE 9.3966/5 28, KCL TFW Frac w/ 1006 lbs 40# gelled 2% KCL TFW 71.568# 20/40 sd, 3790# 100 mesh sd 9.3166/5 40# gelled 2% KCL TFW	
32. PRODUCTION Date First Production: 1-23-82 Production Method: Pumping Well Status: Producing		33. TEST DATA Date of Test: 3-9-82 Hours Tested: 24 Choke Size: NA Prod'n. for Test Period: 20 Oil—BBL.: 234 Gas—MCF.: 44 Water—BBL.: 11,700 Flow. Tubing Press.: NA Casing Pressure: NA Calculated 24-Hour Rate: 20 Oil—BBL.: 234 Gas—MCF.: 44 Water—BBL.: NA Oil Gravity-API (CORR.): NA	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Sold		35. TEST WITNESSED BY J.D. Spurlock	
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: R.E. Bingham for WAB TITLE: Administrative Supervisor DATE: 8-30-82	

*(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 38, 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.
Blinbry	5783'	6302'	Oil, gas, water
Tubb	6302'	6650'	Oil, gas, water

38. GEOLOGIC MARKERS

NAME	TOP	
	MEAS. DEPTH	TRUE VERT. DEPTH
Rustler	1242'	
Salado	1330'	
Tansill	2483'	
Yates	2623'	
Queen	3417'	
Glorieta	5170'	
Blinbry	5783'	
Tubb	6302'	
Tub marker	6468'	

OCT 14 1982
O.C.D.
HOUBBS OFFICE

RECEIVED