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Form C-105  
Revised 1-1-65

# NEW MEXICO OIL CONSERVATION COMMISSION WELL COMPLETION OR RECOMPLETION REPORT AND LOG

5a. Indicate Type of Lease	
State <input checked="" type="checkbox"/>	Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.	
A 2614	

a. TYPE OF WELL	
OIL WELL <input type="checkbox"/>	GAS WELL <input checked="" type="checkbox"/> DRY <input type="checkbox"/> OTHER <input type="checkbox"/>
b. TYPE OF COMPLETION	
NEW WELL <input checked="" type="checkbox"/> WORK OVER <input type="checkbox"/> DEEPEN <input type="checkbox"/>	PLUG BACK <input type="checkbox"/> DIFF. RESVR. <input type="checkbox"/> OTHER <input type="checkbox"/>

7. Unit Agreement Name
8. Farm or Lease Name
McDonald WN State
9. Well No.
23
10. Field and Pool, or Wildcat
Jalmat

2. Name of Operator	
Atlantic Richfield Company	
3. Address of Operator	
P. O. Box 1710, Hobbs, New Mexico 88240	

4. Location of Well	
UNIT LETTER C	LOCATED 660 FEET FROM THE North LINE AND 1980 FEET FROM
THE West	LINE OF SEC. 15 TWP. 22S RGE. 36E NMPM

12. County
Lea

15. Date Spudded	16. Date T.D. Reached	17. Date Compl. (Ready to Prod.)	18. Elevations (DF, RKB, RT, GR, etc.)	19. Elev. Casinghead
3/26/74	4/4/74	4/21/74	3539' GR	
20. Total Depth	21. Plug Back T.D.	22. If Multiple Compl., How Many	23. Intervals Drilled By	Rotary Tools Cable Tools
3710'	3695'		0-3710'	

24. Producing Interval(s), of this completion - Top, Bottom, Name	25. Was Directional Survey Made
3320-3667' Jalmat Yates Gas	No

26. Type Electric and Other Logs Run	27. Was Well Cored
Dual Laterlog, Sidewall Neutron Porosity w/Caliper	No

28. CASING RECORD (Report all strings set in well)					
CASING SIZE	WEIGHT LB./FT.	DEPTH SET	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
7-5/8" OD	26.40#	429'	10-1/2"	250 sx Circ to surf	-
4-1/2" OD	9.5#	3710'	6-3/4"	500 sx	-

29. LINER RECORD				30. TUBING RECORD		
SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN	SIZE	DEPTH SET
					2-3/8" OD	3254'
						PACKER SET
						3254'

31. Perforation Record (Interval, size and number)		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.							
3320, 31, 42, 58, 72, 97, 3403, 14, 24, 30, 36, 41, 46, 87, 92, 3537, 3584, 3601, 24, 36, 62 & 3667' w/1 - 3/8" JS ea interval		<table border="1"> <tr> <td>DEPTH INTERVAL</td> <td>AMOUNT AND KIND MATERIAL USED</td> </tr> <tr> <td>3320-3667'</td> <td>2000 gals 15% HCl-LSTNE flushed w/19 bbls 2% KCL wtr.</td> </tr> <tr> <td>3320-3667'</td> <td>45,000# 20/40 sd in 32,000 gal slick KCL wtr w/37#/1000 gal gal &amp; 2 gal/1000 gal LST additive.</td> </tr> </table>		DEPTH INTERVAL	AMOUNT AND KIND MATERIAL USED	3320-3667'	2000 gals 15% HCl-LSTNE flushed w/19 bbls 2% KCL wtr.	3320-3667'	45,000# 20/40 sd in 32,000 gal slick KCL wtr w/37#/1000 gal gal & 2 gal/1000 gal LST additive.
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33. PRODUCTION							
Date First Production		Production Method (Flowing, gas lift, pumping - Size and type pump)				Well Status (Prod. or Shut-in)	
4/21/74		Flowing				Shut-in	
Date of Test	Hours Tested	Choke Size	Prod'n. For Test Period	Oil - Bbl.	Gas - MCF	Water - Bbl.	Gas - Oil Ratio
4/25/74	24	3/4"		0	520	0	-
Flow Tubing Press.	Casing Pressure	Calculated 24-Hour Rate	Oil - Bbl.	Gas - MCF	Water - Bbl.	Oil Gravity - API (Corr.)	
125#	Pkr		0	520	0	-	

34. Disposition of Gas (Sold, used for fuel, vented, etc.)	Test Witnessed By
Vented - Purchaser presently installing sales line	D. C. Dodd

35. List of Attachments
Logs as listed in Item 26

36. I hereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief.		
SIGNED <i>H. J. Bernard</i>	TITLE Dist. Drlg. Supv.	DATE 5/2/74

## INSTRUCTIONS

This form is to be filed with the appropriate District Office of the Commission not later than 20 days after the completion of any newly-drilled or deepened well. It shall be accompanied by one copy of all electrical and radio-activity logs run on the well and a summary of all special tests conducted, including drill stem tests. All depths reported shall be measured depths. In the case of directionally drilled wells, true vertical depths shall also be reported. For multiple completions, Items 30 through 34 shall be reported for each zone. The form is to be filed in quintuplicate except on state land, where six copies are required. See Rule 110\$.

**INDICATE FORMATION TOPS IN CONFORMANCE WITH GEOGRAPHICAL SECTION OF STATE**

### Southeastern New Mexico

## Northwestern New Mexico

T. Anhy _____	1513'	T. Canyon _____	T. Ojo Alamo _____	T. Penn. "B" _____
T. Salt _____		T. Strawn _____	T. Kirtland-Fruitland _____	T. Penn. "C" _____
B. Salt _____	1595'	T. Atoka _____	T. Pictured Cliffs _____	T. Penn. "D" _____
T. Yates _____	3256'	T. Miss _____	T. Cliff House _____	T. Leadville _____
T. 7 Rivers _____		T. Devonian _____	T. Menefee _____	T. Madison _____
T. Queen _____		T. Silurian _____	T. Point Lookout _____	T. Elbert _____
T. Grayburg _____		T. Montoya _____	T. Mancos _____	T. McCracken _____
T. San Andres _____		T. Simpson _____	T. Gallup _____	T. Ignacio Qtzite _____
T. Glorieta _____		T. McKee _____	Base Greenhorn _____	T. Granite _____
T. Paddock _____		T. Ellenburger _____	T. Dakota _____	T. _____
T. Blinbry _____		T. Gr. Wash _____	T. Morrison _____	T. _____
T. Tubb _____		T. Granite _____	T. Todilto _____	T. _____
T. Drinkard _____		T. Delaware Sand _____	T. Entrada _____	T. _____
T. Abo _____		T. Bone Springs _____	T. Wingate _____	T. _____
T. Wolfcamp _____		T. _____	T. Chinle _____	T. _____
T. Penn. _____		T. _____	T. Permian _____	T. _____
T. Cisco (Bough C) _____		T. _____	T. Penn. "A" _____	T. _____

FORMATION RECORD (Attach additional sheets if necessary)

From	To	Thickness in Feet	Formation	From	To	Thickness in Feet	Formation
0	103	103	Sand				
103	545	442	Red Bed				
545	1504	959	Red Bed, Anhyd. & Salt				
1504	3030	1526	Anhyd & Salt				
3030	3710	680	Lime				
	TD						