

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 ☐		5. LEASE DESIGNATION AND SERIAL NO. LC 032096(6)	
b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other ☐		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
2. NAME OF OPERATOR CONTINENTAL OIL COMPANY		7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR Box 460, Hobbs, N.M. 88240		8. FARM OR LEASE NAME LOCKHART B-35	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements) At surface 2180' FNL E 660' FEL OF SEC. 35 At top prod. interval reported below At total depth SAME		9. WELL NO. 5	
14. PERMIT NO.		DATE ISSUED	
15. DATE SPUDDED 9-28-74		16. DATE T.D. REACHED 10-16-74	
17. DATE COMPL. (Ready to prod.) 10-26-74		18. ELEVATIONS (DF, RKB, RT, GR, ETC.) * 3376' DF	
19. ELEV. CASINGHEAD		10. FIELD AND POOL, OR WILDCAT WANTZ ABO	
20. TOTAL DEPTH, MD & TVD 7502'		11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA SEC. 35, T-215, R-37E	
21. PLUG, BACK T.D., MD & TVD 7480'		12. COUNTY OR PARISH LEA	
22. IF MULTIPLE COMPL., HOW MANY * -		13. STATE N.M.	
23. INTERVALS DRILLED BY -		24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD) * ABO 7425'-7480'	
25. WAS DIRECTIONAL SURVEY MADE Yes		26. TYPE ELECTRIC AND OTHER LOGS RUN GR-CNL-FDC, MLL, DLL	
27. WAS WELL CORED No		28. CASING RECORD (Report all strings set in well)	
29. LINER RECORD		30. TUBING RECORD	
31. PERFORATION RECORD (Interval, size and number) 7426', 31', 36', 41', 46', 51', 56', 61' & 7466'		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC. DEPTH INTERVAL (MD) 7426'-66' AMOUNT AND KIND OF MATERIAL USED 1800 gals 7 1/2% acid, 23,000 gals gelled wtr, 40,000 #5 sand.	
33. PRODUCTION		34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Sold	
DATE FIRST PRODUCTION 10-28-74		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Flow	
DATE OF TEST 10-29-74		WELL STATUS (Producing or shut-in) Prod.	
HOURS TESTED 24		CHOKE SIZE 20/64"	
PROD'N. FOR TEST PERIOD 184		OIL—BBL. -	
GAS—MCF. -		WATER—BBL. 1	
GAS-OIL RATIO		OIL GRAVITY-API (CORR.)	
FLOW, TUBING PRESS. 220		CASING PRESSURE 450	
CALCULATED 24-HOUR RATE -		OIL—BBL. -	
GAS—MCF. -		WATER—BBL. -	
OIL GRAVITY-API (CORR.)		TEST WITNESSED BY M.K. Chambers	
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 [Signature]		TITLE SR. ANALYST	
DATE 1-10-75			

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

1565-4, NMFU-4, File

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 36.

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; CORDED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CUSHION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES				38. GEOLOGIC MARKERS		
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH	TRUE VERT. DEPTH
Queen	0	3432	No log, Caliche, red beds, sand, ash	Queen	3432	
Penrose	3432	3507	dolo, sand.	Penrose	3507	
San Andres	3507	3910	Sand, dolo	San Andres	3910	
Glorieta	3910	5137	dolo, sand	Glorieta	5137	
Glorieta	5137	5580	Sand, dolo	Blumby	5580	
Blumby	5580	6023	dolo	Tubb	6023	
Tubb	6023	6361	Sand, dolo	Drunkard	6361	
Drunkard	6361	6601	lime, dolo	Abo	6601	
Abo	6601	7420	dolo, shale	Granite Wash	7420	
Gran. Wash	7420	7509	Sand, dolo, shale		7509	