

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.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG \*

1a. TYPE OF WELL: OIL WELL  GAS WELL  DRY  Other \_\_\_\_\_

b. TYPE OF COMPLETION: NEW WELL  WORK OVER  DEEP-EN  PLUG BACK  DIFF. RESVR.  Other \_\_\_\_\_

2. NAME OF OPERATOR  
**CONTINENTAL OIL COMPANY**

3. ADDRESS OF OPERATOR  
**Box 460, Hobbs, N.M. 88240**

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)\*  
At surface **660' FSL ± 1980' FWL of SEC. 27**  
At top prod. interval reported below **SAME**  
At total depth **SAME**

5. LEASE DESIGNATION AND SERIAL NO.  
**LC 031695 (b)**

6. IF INDIAN, ALLOTTEE OR TRUST NAME

7. UNIT AGREEMENT NAME  
**WARREN**

8. FARM OR LEASE NAME  
**WARREN UNIT**

9. WELL NO.  
**41**

10. FIELD AND POOL, OR WILDCAT  
**WARREN BURNERY**

11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA  
**SEC. 27, T20S, R38E**

14. PERMIT NO. DATE ISSUED

12. COUNTY OR PARISH  
**LEA**

13. STATE  
**N.M.**

15. DATE SPUNDED **2-19-76** 16. DATE T.D. REACHED **3-4-76** 17. DATE COMPL. (Ready to prod.) **3-24-76** 18. ELEVATIONS (DF, R&B, RT, GR, ETC.)\* **3543' DF** 19. ELEV. CASINGHEAD

20. TOTAL DEPTH, MD & TVD **6910'** 21. PLUG, BACK T.D., MD & TVD **6865'** 22. IF MULTIPLE COMPL., HOW MANY\* **2** 23. INTERVALS DRILLED BY **ROTARY** ROTARY TOOLS CABLE TOOLS

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)\*  
**5838' - 5954' BURNERY**

25. WAS DIRECTIONAL SURVEY MADE  
**No**

26. TYPE ELECTRIC AND OTHER LOGS RUN  
**GR-CNL-FDC, DLL, CBC-VOL, PDC**

27. WAS WELL CORED  
**No**

28. CASING RECORD (Report all strings set in well)

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
9 5/8"	32.30*	1500'	12 1/4"	625 SX. - CIRC.	—
7"	23 5/8#	6910'	8 3/4"	1200 SX.	—

29. LINER RECORD 30. TUBING RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					2 3/8"	5913'	6210'

31. PERFORATION RECORD (Interval, size and number) 32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
5834' - 5950'	1800 GALL. 15% ACID. Pump 4000 GALS TGFW Pad. Frac w/ 25,000 GALS TGFW & 50,000 # 20/40 SAND.

33. PRODUCTION

DATE FIRST PRODUCTION	PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)	WELL STATUS (Producing or shut-in)					
3-24-76	FLOWING	Producing					
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
4-2-76	24	2 3/8"	→	272	1200	0	4412
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)	
750	900	→				40.6	

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)  
**SOLD**

TEST WITNESSED BY  
**W.D. CATES**

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 **Wm. A. [Signature]** TITLE **ADMIN. SUPERV.** DATE **5/1/76**

\* (See Instructions and Spaces for Additional Data on Reverse Side)  
**USGS (4) NMFL (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.

**Item 4:** If there are no applicable State requirements, 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 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.	NAME	MEAS. DEPTH	TRUE VERT. DEPTH
				Tansill	2462	
				Yates	2743	
				7 Rivers	3002	
				Queen	3561	
				S. Andrews	3967	
				Glorietta	5418	
				Blaine by	5872	
				Tubb	6363	
				Drivakara	6653	

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