

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICAT

(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 ☐		
b. TYPE OF COMPLETION:		NEW WELL ☒	WORK OVER ☐	DEEP-EN ☐	PLUG BACK ☐	DIFF. RESVR. ☐	Other ☐
2. NAME OF OPERATOR Conoco Inc.							
3. ADDRESS OF OPERATOR P.O. Box 460 Hobbs NM 88240							
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 1480/S 1980/W At top prod. interval reported below SANG At total depth SAME							
14. PERMIT NO.				DATE ISSUED			
15. DATE SPUDDED 5-13-79							
16. DATE T.D. REACHED 5-23-79							
17. DATE COMPL. (Ready to prod.) 7-13-79							
18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 3518 GR							
19. ELEV. CASINGHEAD -							
20. TOTAL DEPTH, MD & TVD 6130'		21. PLUG, BACK T.D., MD & TVD 6076		22. IF MULTIPLE COMPL., HOW MANY* -		23. INTERVALS DRILLED BY -	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 5812-6023 Blinberry		25. WAS DIRECTIONAL SURVEY MADE YES		26. TYPE ELECTRIC AND OTHER LOGS RUN GR CME FDC DLE R30		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	
8 3/8"	24#	1300'	12 1/4"	570 sx		circ to surf.	
5 1/2"	17#	6130'	7 7/8"	577 sx DV tool 2974' 809 sx		21 sx	
29. LINER RECORD							
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	30. TUBING RECORD		
					SIZE 2 3/8"	DEPTH SET (MD) 5998'	PACKER SET (MD)
31. PERFORATION RECORD (Interval, size and number) 5812, 17, 20, 34, 36, 41, 48, 50, 18, 81, 84, 27, 90 5922, 25, 42, 49, 52, 59, 6003, 05, 11, 21, 23 w/135PF					32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.		
					DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED	
					5812-6023	4800 gal 15% HCl-Ng acid, 20,000 gals gelled fluid, 35,000# 20/40 sd	
33.* PRODUCTION							
DATE FIRST PRODUCTION 7-16-79		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Pmpg				WELL STATUS (Producing or shut-in) Prod.	
DATE OF TEST 8-13-79	HOURS TESTED 24	CHOKE SIZE NN	PROD'N. FOR TEST PERIOD ->	OIL—BBL. 32	GAS—MCF. 214	WATER—BBL. 4	GAS-OIL RATIO 6688
FLOW. TUBING PRESS. NA	CASING PRESSURE NA	CALCULATED 24-HOUR RATE ->	OIL—BBL. 32	GAS—MCF. 214	WATER—BBL. 4	OIL GRAVITY-API (CORR.) 38°	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) sold						TEST WITNESSED BY W.D. Cotes	
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. Butterfield		TITLE Admin. Supl.				DATE 8-29-79	

*(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 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.
Blumebry	5799	6137-10	Oil & Gas

38. GEOLOGIC MARKERS

NAME	TOP	
	MEAS. DEPTH	TRUE VERT. DEPTH
T/ Salt	1541	
B/ Salt	2600	
Yates	2752	
Seven Rivers	3010	
Quinn	3572	
Pemrose	3718	
Grayburg	3900	
San Andres	4120	
Glorieta	5390	
T/ Blumebry Pool	5799	
Blumebry Mkr	5874	
TP	6137	

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O.C.D. HOBBS, OFFICE