

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

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. NM-0557686	
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 Conoco Inc.		7. UNIT AGREEMENT NAME Semur	
3. ADDRESS OF OPERATOR P.O. Box 460, Abbe, NM 88240		8. FARM OR LEASE NAME Semur Subb	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 766' FNL & 766' FNL - Unit D At top prod. interval reported below At total depth		9. WELL NO. 122	
14. PERMIT NO. 300-25-30429		DATE ISSUED	
15. DATE SPUNDED 07-25-88		16. DATE T.D. REACHED 8-20-88	
17. DATE COMPL. (Ready to prod.) 1-11-89		18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 3533.8 6. L	
19. ELEV. CASINGHEAD		20. TOTAL DEPTH, MD & TVD 7820	
21. PLUG, BACK T.D., MD & TVD 7500		22. IF MULTIPLE COMPL., HOW MANY* 2	
23. INTERVALS DRILLED BY all		ROTARY TOOLS	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 6400-6592		CABLE TOOLS	
25. WAS DIRECTIONAL SURVEY MADE yes		26. TYPE ELECTRIC AND OTHER LOGS RUN GR-CAL-CCL-DLL, MSFL BR-LDT-BNL-DEF	
27. WAS WELL CORED		28. CASING RECORD (Report all strings set in well)	
CASING SIZE		WEIGHT, LB./FT.	
13 7/8"		54.5#	
7"		26.0#	
DEPTH SET (MD)		HOLE SIZE	
1290'		17 1/2	
7790		8 3/4	
CEMENTING RECORD		AMOUNT PULLED	
1000 AX. CLML "C"		301 SX	
4400 SX		86 bbls.	
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		6573'	
6600'		31. PERFORATION RECORD (Interval, size and number)	
6456, 58, 64, 68, 72, 76, 80, 84, 99, 92, 6000, 04, 17, 20, 31, 35, 42, 44, 53, 57, 61, 65, & 6569'-1 JSPF.		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
6348, 52, 56, 60, 64, 68, 72, 76, 80, 84, 88, 92, 96, 6400, 12, 16, 20, 24, 27, 32, -1 JSPF.		DEPTH INTERVAL (MD)	
6456-6596'		AMOUNT AND KIND OF MATERIAL USED	
110 BBL comp. fluid		99.9 BBL HCL-NF-FE	
33. PRODUCTION		DATE FIRST PRODUCTION 1-11-89	
PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) flowing		WELL STATUS (Producing or shut-in) producing	
DATE OF TEST 02-02-89		HOURS TESTED 24	
CHOKE SIZE		PROD'N. FOR TEST PERIOD	
OIL—BBL.		GAS—MCF.	
23		792	
WATER—BBL.		8	
OIL GRAVITY-API (CORR.)		34939	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Sold		(ORIG. SGD. DAVID R. GLASS)	
35. LIST OF ATTACHMENTS		TEST WITNESSED BY Bob Shirley	
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records		SIGNED D.F. Finney	
TITLE Administrative Supervisor		DATE 2/24/89	

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

BLM-(Carlsbad (6) NMFL (3) 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 28, 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			38. GEOLOGIC MARKERS		
FORMATION	TOP	BOTTOM	NAME	MEAS. DEPTH	TRUE VERT. DEPTH
			Saven Rivers	2902	+648
			Grayburg	3713	-163
			San Andres	11001	-451
			Glorietta	5187	1637
			Blinberry	5759	-2209
			Tubb	6291	-2741
			Abo	6935	-3385
			Strawn	7688	-4138

RECEIVED
MAR 21 1989
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