UNITED STATES SUBMIT IN

SUBMIT IN DUPLICATE*

Form approved. Budget Bureau No. 42-R355.5.

T RT UE I TOU	(See other in-	Budget Bureau No. 42-R355.5.
DEPARTMENT OF THE INTERIOR	(4.00001111	
	reverse Edd (T. MARE DESIGNATION AND SERIAL NO.
GEOLOGICAL SURVEY	11-61	N.M.=05570.80

WELL COMPLETION OR RECOMPLETION REPORT AND LOG* 1a. TYPE OF WELL: OIL OF WELL OF WEL	0
1a. TYPE OF WELL: OIL GAS WELL DRY Other	6. IF INDIAN, ALLOTTEE OR TRIBE NAM
WELL CO WELL DRY Uner Uner	7. CHIT AGRESTENT NAME
L TVDE OF COMPLETION.	
NEW WORK DEEP DIEF. Other Pendine, Tike	S. FARM OR LEASE NAME
2. NAME OF OPERATOR	SEMU Penn
Conoco Ine	9. WELL NO.
3. ADDRESS OF OPERATOR	122
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)	10. FIELD AND POOL, OR WILDCAT
	Cass Penn
At surface 766 FNL + 766 F-WL - Unit D At top prod. interval reported below	11. SEC., T., R., M., OR BLOCK AND SURVE OR AREA
At total depth	23 205 376
14. PERMIT NO. DATE ISSUED	$\frac{23}{12. \text{ COUNTY OR}}, \frac{37E}{13. \text{ STATE}}$
20-025-30429	PARISH NM
15. DATE SPUDDED 16. DATE T.D. REACHED 17. DATE COMPL. (Ready to prod.) 10.	10 mm a amaza
7-35-88 8-20-88 9-14-88 3533 810	31
7-35-88 8-20-88 9-14-88 35-38-8° 0 20. TOTAL DEPTH, MD & TVD 21. PLUG, BACK T.D., MD & TVD 22. IF MULTIPLE COMPL., HOW MANY* 23. INTERVALS DRILLED BY	ROTARY TOOLS CABLE TOOLS
1820' 1740' DRILLED BY	ace I have
22. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*	25. WAS DIRECTIONAL SURVEY MADE
Dendene P & A 26. TYPE ELECTRIC AND OTHER LOGS RUN	l Ges
	27. WAS WELL CORED
GR-CAL-DIL-MSFL, GR-LDT CNZ-PEF	
CASING RECORD (Report all strings set in well) CASING SIZE WEIGHT, LB./FT. DEPTH SET (MD) HOLE SIZE CEMENTING DEPTH SET (MD) CEMENTING DEPTH SET (MD) HOLE SIZE CEMENTING DEPTH SET (MD) CEMENTING DEPTH SET	
CASING SIZE WEIGHT, LB./FT. DEPTH SET (MD) HOLE SIZE CEMENTING R	ECORD AMOUNT PULLED
	
29. LINER RECORD 30. TI	UBING RECORD
SIZE TOP (MD) BOTTOM (MD) SACKS CEMENTS CONTROL (MD)	EPTH SET (MD) PACKER SET (MD)
	TACAGE SET (MD)
11. PERFORATION RECORD (Interval, size and number) 7651-57, 7666-63, 7667, 7671, 7674-87 DEPTH INTERVAL (MD) AMOUNT	RE, CEMENT SQUEEZE, ETC.
AMOI	ENT AND KIND OF MATERIAL USED
685, 7488-90', A 7692'-7711. all on attached	sheet.
8874206 AG 27 DO	
(001 cm) (7) 16 1 x) d3, 31, 34, 40,	
0809'-06,09',16', 20', 23', 31',34',40',	
12', 44', & 6847 (unit on attached sheet)	
12', 44', 4 (847 (unit on attached Sheet) 13.* PRODUCTION PRODUCTION PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)	WELL STATUS (Producing or shut-in)
PRODUCTION PRODUCTION PRODUCTION PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) ATE OF TEST HOURS TESTED CHOKE SIZE PROD'N. FOR OIL—BEL. GAS—MCF.	shut-in)
PRODUCTION PRODUCTION PRODUCTION PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) ATE OF TEST HOURS TESTED CHOKE SIZE PROD'N. FOR OIL—BBL. GAS—MCF. TEST PERIOD	
PRODUCTION PRODUCTION PRODUCTION PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) ATE OF TEST HOURS TESTED CHOKE SIZE PROD'N. FOR OIL—BEL. GAS—MCF.	water-bbl. Gas-oil ratio
PRODUCTION ATE FIRST PRODUCTION PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) ATE OF TEST HOURS TESTED CHOKE SIZE PROD'N. FOR OIL—BBL. GAS—MCF. LOW. TUBING PRESS. CASING PRESSURE CALCULATED 24-HOUR RATE 4. DISPOSITION OF GAS (Sold, used for fuel, pented, etc.)	WATER—BBL. GAS-OIL RATIO BL. OIL GRAVITY-API (CORR.)
PRODUCTION ATE FIRST PRODUCTION PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) ATE OF TEST HOURS TESTED CHOKE SIZE PROD'N. FOR TEST PERIOD LOW. TUBING PRESS. CASING PRESSURE CALCULATED 24-HOUR RATE SJS 4. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)	water—BBL. GAS-OIL RATIO
PRODUCTION ATE FIRST PRODUCTION PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) ATE OF TEST HOURS TESTED CHOKE SIZE PROD'N. FOR OIL—BBL. GAS—MCF. LOW. TUBING PRESS. CASING PRESSURE CALCULATED 24-HOUR RATE 4. DISPOSITION OF GAS (Sold, used for fuel, pented, etc.)	WATER-BBL. GAS-OIL RATIO BL. OIL GRAVITY-API (CORR.)
PRODUCTION ATE FIRST PRODUCTION PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) ATE OF TEST HOURS TESTED CHOKE SIZE PROD'N. FOR TEST PERIOD LOW. TUBING PRESS. CASING PRESSURE CALCULATED 24-HOUR RATE 24-HOUR RATE SIS 4. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) 5. LIST OF ATTACHMENTS	WATER—BBL. GAS-OIL RATIO BL. OIL GRAVITY-API (CORR.) TEST WITNESSED BY
PRODUCTION ATE FIRST PRODUCTION PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) ATE OF TEST HOURS TESTED CHOKE SIZE PROD'N. FOR TEST PERIOD LOW. TUBING PRESS. CASING PRESSURE CALCULATED 24-HOUR RATE 4. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) 5. LIST OF ATTACHMENTS 6. I hereby certify that the foregoing and attached information is complete and correct as determined from all the complete and correct as determined from	Shut-in) WATER—BBL. GAS-OIL RATIO BL. OIL GRAVITY-API (CORR.) TEST WITNESSED BY
PRODUCTION ATE FIRST PRODUCTION PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) ATE OF TEST HOURS TESTED CHOKE SIZE PROD'N. FOR TEST PERIOD LOW. TUBING PRESS. CASING PRESSURE CALCULATED 24-HOUR RATE 4. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) 5. LIST OF ATTACHMENTS	Shut-in) WATER—BBL. GAS-OIL RATIO BL. OIL GRAVITY-API (CORR.) TEST WITNESSED BY

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 copy 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, 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 anallable logs (drillers, reologists, sample and core analysis, all types elected, each directions are all the sample and core analysis, all types elected, each directions.

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HOBBS OFFICE

or Federal office for specific instructions. Trem 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with eral requirements. Consuit lo FE State

Hem 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. Hems 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.)

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.		TOP	P
,			-	NAME	MEAS. DEPTH	TRUB VERT. DEPTH
Driveare	S 30	6400	PDROSITY 5 to 12%	Sion Pivers	2902	からかっ十
Colonia						
interval)				Grayburg	0	6
				San Andres	4801	1451
				Glorietla	51 87	1637
. •				Blinebry	515	-2209
				Tues	している	-274
				ABO	69.00	1380
				Strawn	7688	1 38
		20 - 200 N				
					. •'	