

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

Form approved.
Budget Bureau No. 1004-0137
Expires August 31, 1985

RECEIVED
INFORMATION AND SERIAL NO.

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
C. W. Trainer

3. ADDRESS OF OPERATOR
c/o Oil Reports & Gas Services, Box 755, Hobbs, NM 88241

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*
At surface 660' FNL & 1980' FWL of Section 24
At top prod. interval reported below
At total depth

14. PERMIT NO. _____ DATE ISSUED _____

15. DATE SPUDDED 4/28/89 16. DATE T.D. REACHED 9/30/89 17. DATE COMPL. (Ready to prod.) P & A 6/4/90 18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 3706 GR 19. ELEV. CASINGHEAD _____

20. TOTAL DEPTH, MD & TVD 253 21. PLUG, BACK T.D., MD & TVD _____ 22. IF MULTIPLE COMPL., HOW MANY* _____ 23. INTERVALS DRILLED BY _____ ROTARY TOOLS _____ CABLE TOOLS _____

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* _____ 25. WAS DIRECTIONAL SURVEY MADE _____

26. TYPE ELECTRIC AND OTHER LOGS RUN None Run 27. WAS WELL CORRED _____

28. CASING RECORD (Report all strings set in well)					CEMENTING RECORD		AMOUNT PULLED
CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE				
20	NA	40	26		6 yards ready mix		None

29. LINER RECORD					30. TUBING RECORD		
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)

31. PERFORATION RECORD (Interval, size and number)				32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
None				DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED

33.* PRODUCTION							
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)				WELL STATUS (Producing or shut-in)	
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)	

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) _____ TEST WITNESSED BY _____

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 Dann Walker TITLE Agent DATE 6/21/90

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

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

No Denotation Required

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, flowing and shut-in pressures, and recoveries):

38. GEOLOGIC MARKERS				
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME
Surface Sands	0	253	Surface Sand & Caliche	MEAS. DEPTH TRUE VERT. DEPTH

RECEIVED
JUL 2 1990
OCD
HOBBS OFFICE