

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.

5. LEASE DESIGNATION AND SERIAL NO.
LC-031740(b)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Mezger B-4

9. WELL NO.
14

10. FIELD AND POOL, OR WILDCAT

Energie Movement G-5A

11. SEC. T. R. M. OR BLOCK AND SURVEY OR AREA

Sec 4, T-21S, R-36E

12. COUNTY OR PARISH

Lea

13. STATE

N. Mexico

14. PERMIT NO.

DATE ISSUED

15. DATE SPUNDED

16. DATE T.D. REACHED

17. DATE COMPL. (Ready to prod.)

18. ELEVATIONS (OF RKB, RT. GR., ETC.)

19. ELEV. CASINGHEAD

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

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

27. WAS WELL CORED

WELL COMPLETION OR RECOMPLETION REPORT AND LOG*

a. 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 410 Hobbs, N.M.

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*

At surface: **1780' FSL and 1980' FWH of Sec 4**
At top prod. interval reported below: **Some**
At total depth: **Some**

15. DATE SPUNDED

N/A

16. DATE T.D. REACHED

N/A

17. DATE COMPL. (Ready to prod.)

2-9-73

18. ELEVATIONS (OF RKB, RT. GR., ETC.)

3595'

19. ELEV. CASINGHEAD

—

20. TOTAL DEPTH, MD & TVD

3810'

21. PLUG, BACK T.D., MD & TVD

3700'

22. IF MULTIPLE COMPL., HOW MANY*

N/A

23. INTERVALS DRILLED BY

→

ROTARY TOOLS

N/A

CABLE TOOLS

—

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*

TOP - 3352'
Base - 3548' Energie Movement G-5A

25. WAS DIRECTIONAL SURVEY MADE

—

26. TYPE ELECTRIC AND OTHER LOGS RUN

GR collar

27. WAS WELL CORED

—

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

| CASING SIZE | WEIGHT, LB./FT. | DEPTH SET (MD) | HOLE SIZE | CEMENTING RECORD | AMOUNT PULLED |
|-------------|-----------------|----------------|-----------|------------------|---------------|
| 7 7/8" | 15# | 1611' | | 400 SCS | |
| 5 1/2" | 14# | 3747' | 7 7/8" | 400 SCS | |

29. LINER RECORD

| SIZE | TOP (MD) | BOTTOM (MD) | SACKS CEMENT* | SCREEN (MD) |
|------|----------|-------------|---------------|-------------|
| | | N/A | | |

30. TUBING RECORD

| SIZE | DEPTH SET (MD) | PACKER SET (MD) |
|---------------|----------------|-----------------|
| 2 3/8" | 3314' | 3714' |

31. PERFORATION RECORD (Interval, size and number)

**3358', 67', 75', 3386', 3429', 35', 3478',
3505', 3523', and 3534'**

32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

| DEPTH INTERVAL (MD) | AMOUNT AND KIND OF MATERIAL USED |
|---------------------|--|
| 3358'-3534' | 29,000 gal's gelled water and 40,000 lb 20/40 sil |

33.* PRODUCTION

| DATE FIRST PRODUCTION | | PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) | | | | WELL STATUS (Producing or shut-in) | |
|-----------------------|-----------------|--|-------------------------|----------|------------|------------------------------------|-------------------------|
| 2-13-73 | | Flowing | | | | Shut-in | |
| DATE OF TEST | HOURS TESTED | CHOKE SIZE | PROD'N. FOR TEST PERIOD | OIL—BBL. | GAS—MCF. | WATER—BBL. | GAS-OIL RATIO |
| 2-7-73 | 24 | | → | | | | Flowing 11/1000 |
| FLOW TUBING PRESS. | CASING PRESSURE | CALCULATED 24-HOUR RATE | GAS—MCF. | | WATER—BBL. | | OIL GRAVITY-API (CORR.) |
| 300 PSI | | → | 2396 mcf/gal | | | | |

34. DISPOSITION OF GAS (Sold, used for _____, vented, etc.)

Will be sold

TEST WITNESSED BY

Mr. M.K. Chambless

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

Robert Gault

TITLE

Admin. Supervisor

DATE

4-5-73

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 21, 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: "Secks Content": 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 COMPENSATION TERROR; COMED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CESSION TEST, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES

| FORMATION | TOP | BOTTOM | DESCRIPTION, CONTENTS, ETC. | 38. GEOLOGIC MARKERS | |
|-----------|-----|--------|-----------------------------|---------------------------|--|
| | | | | NAME | MEAS. DEPTH TOP TRUE VERT. DEPTH |
| | | | | B/Seal | 2585 |
| | | | | Yards | 2710 |
| | | | | no other markers reported | |

38. GEOLOGIC MARKERS *Sample log*