

NEW MEXICO OIL CONSERVATION COMMISSION
WELL COMPLETION OR RECOMPLETION REPORT AND LOG

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

5a. Indicate Type of Lease	
State <input checked="" type="checkbox"/>	Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.	
B-1511	
7. Unit Agreement Name	
8. Farm or Lease Name	
State 176	
9. Well No.	
6	
10. Field and Pool, or Wildcat	
Eumont Queen Gas	
12. County	
Lea	

1a. TYPE OF WELL										
OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> DRY <input type="checkbox"/> OTHER <input type="checkbox"/>										
b. TYPE OF COMPLETION										
NEW WELL <input type="checkbox"/> WORK OVER <input type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input checked="" type="checkbox"/> DIFF. RESVR. <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>										
2. Name of Operator										
Atlantic Richfield Company										
3. Address of Operator										
P. O. Box 1710, Hobbs, New Mexico 88240										
4. Location of Well										
UNIT LETTER <u>C</u> LOCATED <u>330</u> FEET FROM THE <u>North</u> LINE AND <u>2310</u> FEET FROM										
THE <u>West</u> LINE OF SEC. <u>19</u> TWP. <u>21S</u> RGE. <u>36E</u> NMPM										
15. Date Spooling <u>WO commenced</u> <u>5/4/77</u>		16. Date T.E. Reached		17. Date Compl. (Ready to Prod.)		18. Elevations (DF, RKB, RT, GR, etc.)		19. Elev. Casinghead		
				<u>5/18/77</u>		<u>3638' GR</u>				
20. Total Depth		21. Plug Back T.D.		22. If Multiple Compl., How Many		23. Intervals Drilled By		Rotary Tools		Cable Tools
<u>3938'</u>		<u>3887'</u>								
24. Producing Interval(s), of this completion — Top, Bottom, Name										25. Was Directional Survey Made
<u>3179-3780' Eumont Queen Gas</u>										-
26. Type Electric and Other Logs Run										27. Was Well Cored
<u>GR-Compensated Neutron log w/collars</u>										-

28. CASING RECORD (Report all strings set in well)																	
CASING SIZE	WEIGHT LB./FT.	DEPTH SET	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED												
<u>12-1/2"</u>	<u>50#</u>	<u>240'</u>	<u>15 1/2"</u>	<u>250</u>													
<u>9-5/8"</u>	<u>36#</u>	<u>1435'</u>	<u>11 1/2"</u>	<u>400</u>													
<u>7"</u>	<u>24#</u>	<u>3853'</u>	<u>8-3/4"</u>	<u>400</u>													
29. LINER RECORD						30. TUBING RECORD											
SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN	SIZE	DEPTH SET	PACKER SET										
					<u>2-3/8" OD</u>	<u>3730'</u>	-										
31. Perforation Record (Interval, size and number)						32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.											
<u>3179, 84, 93, 3200, 08, 18, 25, 32, 38, 42, 50, 70, 75, 89, 3300, 18, 36, 40, 48, 52, 97, 3413, 55, 64, 70, 78, 82, 90, 95, 3500, 09, 36, 40, 46, 67, 72, 3609, 15, 61, 66, 88, 3706, 24, 28, 35, 42, 46, 55, 66 & 3780' - 1 SPF = 50 .42" holes)</u>						DEPTH INTERVAL						AMOUNT AND KIND MATERIAL USED					
						<u>3179-3780'</u>						<u>3000 gals 15% HCL-LSTNE acid w/iron agent</u>					
						<u>3179-3780'</u>						<u>20,000 gals gelled 9# BW, 10,000 gals CO₂, 40,500# sand</u>					

33. PRODUCTION							
Date First Production		Production Method (Flowing, gas lift, pumping — Size and type pump)				Well Status (Prod. or Shut-in)	
<u>5/8/77</u>		<u>Flowing</u>				<u>Shut in - WOPLC</u>	
Date of Test	Hours Tested	Choke Size	Prodn. Per Test Period	Oil — Bbl.	Gas — MCF	Water — Bbl.	Gas — Oil Ratio
<u>5/19/77</u>	<u>24</u>	<u>64/64"</u>		<u>0</u>	<u>752</u>	<u>5</u>	<u>-</u>
Flow Tubing Press.	Casing Pressure	Calculated 24-Hour Rate	Oil — Bbl.	Gas — MCF	Water — Bbl.	Oil Gravity — API (Corr.)	
<u>80#</u>	<u>275#</u>			<u>752</u>			
34. Disposition of Gas (Sold, used for fuel, vented, etc.)						Test Witnessed By	
<u>Sold - WOPLC</u>						<u>J. J. Ballard</u>	
35. List of Attachments							
<u>Log as listed in Item 26 above</u>							
36. I hereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief.							
SIGNED <u>[Signature]</u>		TITLE <u>Dist. Drlg. Supt.</u>			DATE <u>5/23/77</u>		

This form is to be filed with the appropriate District Office of the Commission not later than 20 days after the completion of any newly-drilled or deepened well. It shall be accompanied by one copy of all electrical and radio-activity logs run on the well and a summary of all special tests conducted, including drill stem tests. All depths reported shall be measured depths. In the case of directionally drilled wells, true vertical depths shall also be reported. For multiple completions, Items 30 through 34 shall be reported for each zone. The form is to be filed in quintuplicate except on state land, where six copies are required. See Rule 1105.

Southeastern New Mexico

T. Anhy _____	T. Canyon _____
T. Salt _____	T. Strawn _____
B. Salt _____	T. Atoka _____
T. Yates _____	T. Miss _____
T. 7 Rivers _____	T. Devonian _____
T. Queen _____	T. Silurian _____
T. Grayburg _____	T. Montoya _____
T. San Andres _____	T. Simpson _____
T. Glorieta _____	T. McKee _____
T. Paddock _____	T. Ellenburger _____
T. Blinberry _____	T. Gr. Wash _____
T. Tubb _____	T. Granite _____
T. Drinkard _____	T. Delaware Sand _____
T. Abo _____	T. Bone Springs _____
T. Wolfcamp _____	T. _____
T. Penn. _____	T. _____
T. Cisco (Bough C) _____	T. _____

T. Ojo Alamo _____	T. Penn. "B" _____
T. Kirtland-Fruitland _____	T. Penn. "C" _____
T. Pictured Cliffs _____	T. Penn. "D" _____
T. Cliff House _____	T. Leadville _____
T. Menefee _____	T. Madison _____
T. Point Lookout _____	T. Elbert _____
T. Mancos _____	T. McCracken _____
T. Gallup _____	T. Ignacio Qtzte _____
Base Greenhorn _____	T. Granite _____
T. Dakota _____	T. _____
T. Morrison _____	T. _____
T. Todilto _____	T. _____
T. Entrada _____	T. _____
T. Wingate _____	T. _____
T. Chinle _____	T. _____
T. Permian _____	T. _____
T. Penn. "A" _____	T. _____

No. 1, from.....to.....

No. 2, from.....to.....

No. 3, from.....to.....

No. 4, from.....to.....

No. 5, from.....to.....

No. 6, from.....to.....

Include data on rate of water inflow and elevation to which water rose in hole.

No. 1, from.....to.....feet.

No. 2, from.....to.....feet.

No. 3, from.....to.....feet.

No. 4, from.....to.....feet.

From	To	Thickness in Feet	Formation	From	To	Thickness in Feet	Formation