

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE

(See instructions on
reverse side)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 052 3215	
1b. 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 Phillips Petroleum Company		7. UNIT AGREEMENT NAME _____	
3. ADDRESS OF OPERATOR Room 711, Phillips Building, Odessa, Texas 79761		8. FARM OR LEASE NAME Hat Mesa-A	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 660' FS and 1980' FB lines (Unit W) At top prod. interval reported below At total depth		9. WELL NO. 1	
14. PERMIT NO.		DATE ISSUED 3-4-74	
15. DATE SPUDDED 3-10-74		16. DATE T.D. REACHED 4-30-74	
17. DATE COMPL. (Ready to prod.) 7-15-74		18. ELEVATIONS (DF, REB, RT, GR, ETC.)* 3771' Gr., 3791' DF	
19. ELEV. CASINGHEAD —		20. TOTAL DEPTH, MD & TVD 14500'	
21. PLUG BACK T.D., MD & TVD 14454'		22. IF MULTIPLE COMPL., HOW MANY* —	
23. INTERVALS DRILLED BY —		24. ROTARY TOOLS 0-14500'	
25. CABLE TOOLS —		26. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* Morrow - top 13,600', bottom, 14,491'	
27. WAS DIRECTIONAL SURVEY MADE No		28. TYPE ELECTRIC AND OTHER LOGS RUN Schlumberger BHC Sonic, GR Caliper, dual Laterolog, Microlaterolog, CNL, FDC	
29. WAS WELL CORED No		30. CASING RECORD (Report all strings set in well)	
31. PERFORATION RECORD (Interval, size and number)		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
33. Form C 122 to be submitted when completed to Sales line. Test below is flow test only.		34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)	
DATE FIRST PRODUCTION 7-15-74		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Flowing	
WELL STATUS (Producing or shut-in) Producing		TEST WITNESSED BY C. L. Sumerwell	
DATE OF TEST 7-16-74		HOURS TESTED 24	
CHOKE SIZE 3/4"		PRESS. FOR TEST PERIOD 245 (condensate) 4000	
OIL—BBL. 2400#		GAS—MCF. 0	
WATER—BBL. —		OIL GRAVITY-API (CORR.) 52.9 (condensate)	
Casing Pressure 2000#		Flowing Pressure —	
Calculated 24-Hour Rate —		Oil—BBL. —	
Gas—MCF. —		Water—BBL. —	
Oil Gravity-API (CORR.) 52.9 (condensate)		—	
35. LIST OF ATTACHMENTS Electric logs, as run, furnished direct by logging company.		36. I hereby certify that the foregoing is a true and correct copy as determined from all available records.	
W. J. Mueller		DATE 7-17-74	
Senior Reservoir Engineer			

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

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, tops(s), bottom(s) and name(s) (if any) for only the interval reported in Item 23. 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 PRODUCE ZONES.

SHOW ALL IMPORTANT ZONES OF PRODUCE AND CONTENTS THEREOF. CORED INTERVALS, AND ALL DRILL-STEM TESTS, INCLUDING

DEPTH INTERVAL TESTED, CUSHION TEST, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERY

DESCRIPTION, CONTENTS, ETC.

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	38.	NAME	MEAS. DEPTH	TRUE VERT. DEPTH
Surf. sand, caliche	0'	456'			Rustler	1568'	
redbeds, shale	456	1222			Del. Mtn. Gp.	5543'	
anhydrite	1222	1528			Bone Spring	8718'	
anhydrite, salt	1528	1805			3rd Bone Spring	11270'	
salt	1805	1970			Wolfcamp	11630'	
anhydrite, salt	1970	2810			Strawn	12878'	
anhydrite, salt, lime	2810	3000			Atoka	13088'	
anhydrite, salt	3000	3257			Morrow Limestone	13334'	
anhydrite, salt	3257	3362			Morrow Sandstone	13600'	
anhydrite,	3362	7140			Barnett	14491'	
lime	7140	7564					
lime, sand	7564	11715					
lime	11715	12003					
lime, shale	12003	12225					
lime	12225	12346					
lime, shale, sand	12346	12725					
lime, shale	12725	13001					
lime, shale	13001	15717					
lime, shale, sand	15717	14146					
lime, shale, sand	14146	14338					
shale	14338	14500TD					

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE*
(Other instructions on
reverse side)Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

NM 0523215

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Hat Mesa-A

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Hat Mesa Morrow-Gas

11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA

2, 21S, 32E

12. COUNTY OR PARISH, 13. STATE

Lea

New Mexico

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL ☐ GAS WELL ☒ OTHER ☐	2. NAME OF OPERATOR Phillips Petroleum Company
3. ADDRESS OF OPERATOR Room 711, Phillips Building, Odessa, Texas 79761	4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 660' FS & 1980' FE Lines (Unit W)
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, OR, etc.) 3771' Gr., 3791' DF

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐FRACTURE TREAT ☐SHOOT OR ACIDIZE ☐REPAIR WELL ☐(Other) ☐PULL OR ALTER CASING ☐MULTIPLE COMPLETE ☐ABANDON* ☐CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☒FRACTURE TREATMENT ☐SECCOTING OR ACIDIZING ☐(Other) ☐REPAIRING WELL ☐ALTERING CASING ☐ABANDONMENT* ☐Total depth ☒

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)

Reached TD of 14,500' @ 11:30 PM, 4-30-74. Cond hole.

5-2-74: Schlumberger ran RFG-scribe, GP caliper, dual laterolog, Micro laterolog, Microlog, CNL & FDC. Pulled bit up in 8-5/8" csg. SD, waiting on 5-1/2" csg.

5-3-74: SD

5-4-74: SD 11 hrs, ran bit to bottom, circ 3 hrs, COCH.

5-5-74: Set 375' jts (14500') 5-1/2" O.D. csg @ 14,500', top to bottom, as follows:

38 jts (1514) 20#, P-110, IT&O

26 jts (974) 20#, N-80, IT&O

143 jts (5570) 15#, N-80, IT&O

120 jts (4482) 20#, N-80, IT&O

46 jts (1880) 20#, N-80, IT&O

Howco pre-flushed w/20 bbls KCL mixed w/10 gals Morflo. Cndd w/750 sx Class C cnt w/1/16" IWL and 21 KCL per/sx. Plug to 14,450' w/223' 1/2" brine. Max press 15" CG, burred w/2000#. Related csg at 15 BPM. Job comp 2 1/2 PM 5-6-74. WOC.

5-6-74: WOC 3 hrs, West Ing ran comp survey, WOC outside 5-1/2" csg at 9350'.

Released rotary at 11 PM, 5-6-74.

Prep to perforate and complete.

18. I hereby certify that the foregoing is true and correct

SIGNED W. J. MuellerTITLE Senior Reservoir EngineerDATE May 7, 1974

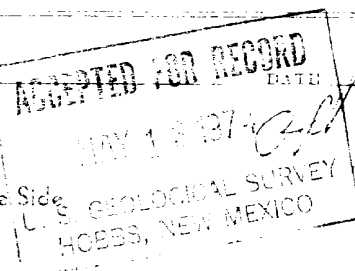
(This space for Federal or State office use)

APPROVED BY _____

TITLE _____

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side



UNITED STATES
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Budget Bureau No. 42 R1424.

5. LEASE DESIGNATION AND SERIAL NO.

NM 0523215

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Hat Mesa **A**

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Hat Mesa Morrow Gas

11. SEC., T., R., M., OR BLM. AND
SURVEY OR AREA

2, 21S, 32E

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

3771' GR., 3791' DF

12. COUNTY OR PARISH

Lea

13. STATE

New Mexico

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

☐
☐
☐
☐

FULL OR ALTER CASING

☐
☐
☐
☐

FRACTURE TREAT

MULTIPLE COMPLETION

SHOOT OR ACIDIZE

ABANDON*

REPAIR WELL

CHANGE PLANS

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

☐
☐
☐
☐

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other) Intermediate casing string

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

☐
☐
☐
☒(Note: Report results of multiple completion on Well
Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.) *

Reached 8-5/8" casing point in 12 1/4" hole, 5785', at 1 AM, 3-26-74. Conditioned hole. Mixed 100 bbls oil in mud system and pumped in hole. 3000'. North Well ran caliper survey 3500' to surface.

3-26-74. Set 144 jts 8-5/8" O.D. 32#, K-55, ST33 casing at 5785' w/DV collar at 3203'. Dowell cemented 1st stage w/100 sx Trinity LM cmt w/2% CaCl₂, 21# salt, 1/4# Celloflakes and 5# Kolite/sx. Slurry wt 13.4#, 150 sx RFO cmt w/1/4# Celloflakes and 5# Kolite/sx, slurry wt 14.4#, 400 sx Trinity LM w/2% CaCl₂, 21# salt and 1/4# Celloflakes per sx, slurry wt 14#, and 200 sx Class C cmt w/2% CaCl₂, and 19.6# salt/sx, slurry wt 15.4#. Displaced plug w/165 BW and 185 bbls mud. Max press 1000#, bmpd plug w/1500#. Job completed 1:30 AM 3-27-74. Csg did not rotate. Opened DV tool at 3203', circulated 12 hrs cmtd 2nd stage w/2000 sx Trinity LM w/2% CaCl₂, 21# salt, 1/4# Celloflakes and 5# Kolite per sx. Slurry wt 13.5#, followed by 150 sx Class C w/2% CaCl and 19.6# salt/sx. slurry wt 15.4#. Pumped plug to 3203' w/195 BW, closed DV tool w/1500#. Circ 165 sx cmt. Job completed 2:45 PM, 3-27-74. WOC 9-1/4 hrs.

3-28-74 WOC 9 hrs, RU BOP and tested to 5000# w/Yellow Jacket, hydril to 2000#. WIH w/7-7/8 bit, drld DV @ 3203', tested to 2200# for 30 min, OK.

3-29-74 Drld plug and float at 5783', cmt to 5783'. Tested csg w/2200# for 30 min, OK. Drld shoe. Tested w/600# for 30 min, OK. Started drlg ahead at 5785' w/7-7/8" bit.

18. I hereby certify that the foregoing is true and correct

SIGNED

W.J. Mueller

TITLE Senior Reservoir Engineer

DATE 4-4-74

(This space for Federal or State office use)

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side