

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE

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 ☐b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other ☐

2. NAME OF OPERATOR

Chevron U.S.A. Inc.

3. ADDRESS OF OPERATOR

P.O. Box 670, Hobbs, NM 88240

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

At surface

Unit S, 1830' FSL & 2080' FWL

At top prod. interval reported below

At total depth

14. PERMIT NO.

DATE ISSUED

CER 104

2-25-87

15. DATE SPUDDED

16. DATE T.D. REACHED

17. DATE COMPL. (Ready to prod.)

18. ELEVATIONS (DF, RES, BT, GR, ETC.)*

19. ELEV. CASING HEAD

6-10-87

6-14-87

7-15-87

3569.6'

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

3950'

3925'

ACCEPTED FOR RECORD

rotary

rotary

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

Grayburg/San Andres

3798-3875

3682-3764

SEP 23 1987
SJS

25. WAS DIRECTIONAL SURVEY MADE

No

26. TYPE ELECTRIC AND OTHER LOGS RUN

GR/CCL/CBL/CET

27. WAS WELL CORED

No

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

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD
8 5/8	24#	1300	12 1/4"	800sx C1 C circ.
5 1/2	15.5#	3950	7 7/8"	1d.400sx C1 C "
				1.250sx C1 C "

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)

31. PERFORATION RECORD (Interval, size and number)

3798-3802, 3812-26, 3834-50, 3856-75 (53holes)

1 JHPF, 4" guns, 180° phasing.

3682-86, 3690-94, 3706-09, 3719-29, 3732-

41, 3746-50, 3754-59, 3764-77 (52 holes)

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
3798-3875	3500 gallons 15% NEFE HCL
3682-3777	4000 gallons 15% NEFE HCL

33.*

PRODUCTION

DATE FIRST PRODUCTION 7-17-87		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) pump				WELL STATUS (Producing or shut-in) prod	
DATE OF TEST 8-14-87	HOURS TESTED 24	CHOKE SIZE 2"wo	PROD'N. FOR TEST PERIOD →	OIL—BBL. 10	GAS—MCF. 10	WATER—BBL. 107	GAS-OIL RATIO 100
FLOW. TUBING PRESS. 20	CASING PRESSURE 20	CALCULATED 24-HOUR RATE →	OIL—BBL. 10	GAS—MCF. 10	WATER—BBL. 107	OIL GRAVITY-API (CORR.) 33.9 @ 76°	

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

M. E. Abim

TITLE

Staff Drilling Engineer

DATE

August 19, 1987

*(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 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 (drilllogs, geologic logs, 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: "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 POROUS ZONES: SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF; CORED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CUSHION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES				38. GEOLOGIC MARKERS		
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH	TRUE VERT. DEPTH
Anhydrite	1222	1412				
SALT	142	2523	SAND			
YATES	2523	3130	SAND			
7-RVRS		3553	SAND/Dolomite			
DUGAN	3553	3648	Dolomite			
Chapman	3648	3954 (TD)				