

UNITED STATES DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY
N. M. 88-8885
P. O. BOX 1090
HOBBS, NEW MEXICO 88240
(See other 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 ☐		
b. TYPE OF COMPLETION:		NEW WELL ☒	WORK OVER ☐	DEEP-EN ☐	PLUG BACK ☐	DIFF. RESV. ☐	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 C 560' FNL and 2015 FWL At top prod. interval reported below At total depth							
14. PERMIT NO.				DATE ISSUED OCT 23 1987			
15. DATE SPUDDED 7-13-87		16. DATE T.D. REACHED 7-17-87		17. DATE COMPL. (Ready to prod.) 9-20-87		18. ELEVATIONS (DF, REB, RT, GR, ETC.)* 3632	
20. TOTAL DEPTH, MD & TVD 4100		21. PLUG BACK T.D., MD & TVD 4077		22. IF MULTIPLE COMPL., HOW MANY* ACCEPTED FOR RECORD		23. INTERVALS DRILLED BY ROTARY TOOLS yes	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* Queen/Grayburg SA 4010-4054 3952-3990						25. WAS DIRECTIONAL SURVEY MADE no	
26. TYPE ELECTRIC AND OTHER LOGS RUN GR/CCL/CBL/CET						27. WAS WELL CORED no	
29. CASING RECORD (Report all strings set in well)							
CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD		AMOUNT PULLED	
8 5/8"	24#	1391	12 1/4"	900sx Class C CIRC'D SJS			
5 1/2"	15.5#	4100	7 7/8	700sx Class C CIRC'D			
29. LINER RECORD				30. TUBING RECORD			
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					2 7/8	4051	
31. PERFORATION RECORD (Interval, size and number) 4010-4054 w/4" guns 1 JHPF, 180° phase, 44 holes. 3952-3960-3966-3974, 3978-3990 4" guns 1 JHPF, 180° phase, 28 holes				32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
				DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED	
				4010-4054		3200 gallons NEFE HCL	
				3952-3990		2100 gallons NEFE HCL	
33.* PRODUCTION							
DATE FIRST PRODUCTION 9-24-87		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) pump				WELL STATUS (Producing or shut-in) prod	
DATE OF TEST 10-9-87	HOURS TESTED 24	CHOKE SIZE 2" w/o	PROD'N. FOR TEST PERIOD →	OIL—BBL. 21	GAS—MCF. 47	WATER—BBL. 241	GAS-OIL RATIO 2238
FLOW. TUBING PRESS. 30	CASING PRESSURE 30	CALCULATED 24-HOUR RATE →	OIL—BBL. 21	GAS—MCF. 47	WATER—BBL. 241	OIL GRAVITY-API (CORR.) 35.6 @ 60°	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) sold						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. Ahlin

TITLE Staff Drilling Engineer

DATE September 21, 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.

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. 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.)

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.

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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
Abby (Reservoir)	1365	1540	Anhyd.			
Salt	1540	2800	Salt			
Yates	2800	3070	Sand			
Seven Rivers	3070	3530	Sand			
Queen	3530	3950	Sand/Dolomite			
Grubbs	3950	4100	Dolomite/Sand			
		(TD)				

HOBBS OFFICE

OCD

OCT 30 1987

RECEIVED