

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.

RECEIVED

5. LEASE DESIGNATION AND SERIAL NO.

LC-D31740(B)

6. NAME, INDIAN, ALLOTTEE, OR TRIBE NAME

NOV 10 11 45 AM '88

7. UNIT AGREEMENT NAME

AREA

8. FARM OR LEASE NAME

Meyer B-17

9. WELL NO.

3

10. FIELD AND POOL, OR WILDCAT

Eumont Yates 7-Ros Queen Gas

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

OR AREA GAS

Sec. 17-213-36E

12. COUNTY OR PARISH

LEA

13. STATE

NM

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

CONOCO INC.

3. ADDRESS OF OPERATOR

P.O. Box 460, Hobbs, N.M. 88240

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

At surface Unit P, 1280' FSL & 480' FEL

At top prod. interval reported below

At total depth

14. PERMIT NO. DATE ISSUED

30-025-30422

15. DATE SPUDDED 16. DATE T.D. REACHED 17. DATE COMPL. (Ready to prod.) 18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 19. ELEV. CASING HEAD

8-10-88 8-27-88 10-13-88 3638.3

20. TOTAL DEPTH, MD & TVD 21. PLUG BACK T.D., MD & TVD 22. IF MULTIPLE COMPL., HOW MANY* 23. INTERVALS DRILLED BY 24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*

3750' 3689' ALL

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

3594' - 3680' Eumont Yates 7-Ros Queen Gas

26. TYPE ELECTRIC AND OTHER LOGS RUN

GR-CBL-CCL

27. WAS WELL CORED

NO

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

CARLSBAD NEW MEXICO

CEMENTING RECORD

AMOUNT PULLED

8 5/8" 32# 1330' 12 1/4" 525 SXS Class C 20 lbs

5 1/2" 15.5# 3750' 7 7/8" 1336 SXS Class C 88 lbs

29. LINER RECORD

30. TUBING RECORD

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

None 2 3/8 3499'

31. PERFORATION RECORD (Interval, size and number)

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

3594', 3606, 15, 20, 28, 50, 55, 61, 66, 80 w/1 JSPF

DEPTH INTERVAL (MD) AMOUNT AND KIND OF MATERIAL USED

3594' - 3680' Frac w/18000 gals PAD, 6 1/2 gal

frac fluid, flush w/22.6

w/ 3657 gals mud, 122

tons Co2 & 76320 # 20/40 Sand

33. PRODUCTION

DATE FIRST PRODUCTION PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) WELL STATUS (Producing or shut-in)

10-15-88 Flowing Producing

DATE OF TEST HOURS TESTED CHOKE SIZE PROD. N. FOR TEST PERIOD OIL—BBL. GAS—MCF. WATER—BBL. GAS-OIL RATIO

11-6-88 24 24/64 0 384 0

FLOW. TUBING PRESS. CASING PRESSURE CALCULATED 24-HOUR RATE OIL—BBL. GAS—MCF. WATER—BBL. OIL GRAVITY-API (CORR.)

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) TEST WITNESSED BY

VENTED Tom Aduddell

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. J. Simpson D. E. Kliney TITLE Adm. Supervisor DATE 11-8-88

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

Comp. Posted

E

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 (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: "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

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH	TOP	TRUE VERT. DEPTH
Yates	3126						
7 Run	3292						
Quan	3592						
Pemose	3737						

38. GEOLOGIC MARKERS

NAME	MEAS. DEPTH	TOP	TRUE VERT. DEPTH

RECEIVED

NOV 23 1988

HOBBS OFFICE