

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE

(See other
struction
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 IDENTIFICATION AND SERIAL NO. NA-0554804																									
b. 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 TEXAS PACIFIC OIL COMPANY, INC.				7. UNIT AGREEMENT NAME _____																									
3. ADDRESS OF OPERATOR Post Office Box 1069 - Hobbs, New Mexico 8240				8. FARM OR LEASE NAME Elliott A-15																									
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface Unit J 1650' F3L & 2310' FEL At top prod. interval reported below At total depth				9. WELL NO. 1																									
14. PERMIT NO. _____ DATE ISSUED _____				12. COUNTY OR PARISH Lea County																									
15. DATE SPUNDED Commenced 9-15-69				13. STATE New Mexico																									
16. DATE T.D. REACHED 9-30-69		17. DATE COMPL. (Ready to prod.) 9-30-69		18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 3392' DF																									
19. ELEV. CASINGHEAD -		20. TOTAL DEPTH, MD & TVD 9658'		21. PLUG, BACK T.D., MD & TVD 3960' PBTD																									
22. IF MULTIPLE COMPL., HOW MANY* -		23. INTERVALS DRILLED BY →		ROTARY TOOLS -																									
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 3648-3855' Grayburg		25. WAS DIRECTIONAL SURVEY MADE No		26. TYPE ELECTRIC AND OTHER LOGS RUN Neutron Gamma Ray																									
27. WAS WELL CORED No		28. CASING RECORD (Report all strings set in well)																											
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31. PERFORATION RECORD (Interval, size and number) 3648-3855 32 - 1/2" holes																													
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.																													
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34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Sold																													
35. LIST OF ATTACHMENTS 9-330 and C-104																													
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records Original Signed by _____																													
SIGNED <u>Sheldon Ward</u> TITLE <u>Area Superintendent</u> DATE <u>10-3-69</u>																													

*(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 (drillers, geologists, sample and core analysis, all types electric, etc.), formation and pressure tests, and directional surveys, 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 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	TOP	
	MEAS. DEPTH	TRUE VERT. DEPTH

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLI
(Other instructions
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Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

MS-0554604

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Elliott A-15

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Penrose Shelly Grayburg

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

Sec. 15, T-22-S, R-37-E

12. COUNTY OR PARISH

Lea County

13. STATE

New Mexico

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR

TEXAS PACIFIC OIL COMPANY, INC.

3. ADDRESS OF OPERATOR

Post Office Box 1063 - Hobbs, New Mexico 58240

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface

Unit J 1650' FSL & 2310' FEL

14. PERMIT NO.

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

3392 DF

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐

FRACURE TREAT ☐

SHOOT OR ACIDIZE ☐

REPAIR WELL ☐

(Other) ☐

PULL OR ALTER CASING ☐

MULTIPLE COMPLETE ☐

ABANDON* ☐

CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐

FRACURE TREATMENT ☐

SHOOTING OR ACIDIZING ☐

(Other) ☐

REPAIRING WELL ☐

ALTERING CASING ☐

ABANDONMENT* ☐

Recomplete to Penrose Sh. Cr. x
(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.)*

Upon approval we completed the following:

1. Moved in, rigged up, installed BOP, pulled 2-3/8" tubing.
2. Placed 25 sax. cut. plug @ 7450-7600' and filled hole with a quality gel mud to bridge plug at 3950'.
3. Ran correlation log with neutron through Penrose Shelly.
4. Set C.I.B.P. at 3960' with 1 sack cement on top.
5. Perf. 3643-3653 w/ 12 1/2" jet shots.
6. Ran base temperature survey.
7. Ran 3-1/2" frac. tubing and P.B. pkr. to 3653'.
8. Acidized with 2,000 gal. 15% HCl acid, fraced with 40,000 gal. Brine and 50,000# sand (20/40).
9. Pulled tubing and packer.
10. Ran 2-3/8" tubing set at 3643, sat pump unit, rigged down and cleaned location.
11. Put well on production.

I hereby certify that the foregoing is true and correct

SIGNED

TITLE **Area Superintendent**

DATE **10-3-69**

(This space for Federal or State office use)

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:

APPROVED

*See Instructions on Reverse Side

OCT 6 1969

J. L. GORDON
ACTING DISTRICT ENGINEER

Instructions

General: This form is designed for submitting proposals to perform certain well operations, and reports of such operations when completed, as indicated, on Federal and Indian lands pursuant to applicable Federal law and regulations, and, if approved or accepted by any State, on all lands in such State, pursuant to applicable State law 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.

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 17: Proposals to abandon a well and subsequent reports of abandonment should include such special information as is required by local Federal and/or State offices. In addition, such proposals and reports should include reasons for the abandonment; data on any former or present productive zones, or other zones with present significant fluid contents not sealed off by cement or otherwise; depths (top and bottom) and method of placement of cement plugs; mud or other material placed below, between and above plugs; amount, size, method of parting of any casing, liner or tubing pulled and the depth to top of any left in the hole; method of closing top of well; and date well site conditioned for final inspection looking to approval of the abandonment.