

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other
instructions
reverse side)Form approved.
Budget Bureau No. 42-R355.5.

5. LEASE DESIGNATION AND SERIAL NO.

LC-032104

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

A.H. BLINEBRY FED NCT-4

9. WELL NO.

3

10. FIELD AND POOL, OR WILDCAT

TUBB GAS

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

SEC. 31, T-22-S, R-38-E

12. COUNTY OR
PARISH
LEA13. STATE
NEW MEXICO

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

TEXACO INC.

3. ADDRESS OF OPERATOR

P. O. BOX 728, HOBBS, NEW MEXICO 88240

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

At surface

700' FSL & 2100' FEL OF SEC.

At top prod. interval reported below

31, T-22-S, R-38-E, UNIT LETTER

At total depth

"0", LEA CO., NEW MEXICO

14. PERMIT NO.

DATE ISSUED

REGULAR

15. DATE SPUDDED

9/27/63

16. DATE T.D. REACHED

10/20/63

17. DATE COMPL. (Ready to prod.)

12/22/77

18. ELEVATIONS (DF, REB, RT, GR, ETC.)*

3343' (DF)

19. ELEV. CASINGHEAD

3329'

20. TOTAL DEPTH, MD & TVD

7975'

21. PLUG, BACK T.D., MD & TVD

7100'

22. IF MULTIPLE COMPL.,
HOW MANY*23. INTERVALS
DRILLED BY

ROTARY TOOLS

CABLE TOOLS

0 - 7975'

-0-

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

6095' - 6211' TUBB GAS

25. WAS DIRECTIONAL
SURVEY MADE

NO

26. TYPE ELECTRIC AND OTHER LOGS RUN

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	AMOUNT PULLED
8-5/8"	24#	1245	11"	500	
2-7/8"	6.50#	7963	7-7/8"	1900	

29. LINER RECORD

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

30. TUBING RECORD

31. PERFORATION RECORD (Interval, size and number)

PERFORATE 2-7/8" CSG W/1-JSPF @ 6095'
6101', 05', 09', 12', 17', 22', 26', 31',
60', 68', 77', 81', 86', 92', 96', 6200',
06', & 6211'

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
6095'-6211'	3000 GAL 15% NE ACID
	20,000 GAL APOLLO-20 &
	22,500# 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)	
11/23		FLOWING					SHUT-IN	
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO	
12/22/77	24	3/4"	→	0	64	0		
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)		
50#		→	0	64	0			

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

WELL SHUT-IN

TEST WITNESSED BY

C. H. OBANNON

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

TITLE ASSISTANT DISTRICT SUPT. DATE 1/4/78

*(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, 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.	38. GEOLOGIC MARKERS		
				NAME	MEAS. DEPTH	TRUE VEST. DEPTH
				YATES	2600	
				SAN ANDRES	4015	
				GLORIETA	5155	
				BLINEBRY	5592	
				TUBB	6090	