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Form C-105  
Revised 1-1-65

# NEW MEXICO OIL CONSERVATION COMMISSION WELL COMPLETION OR RECOMPLETION REPORT AND LOG

5a. Indicate Type of Lease  
State ☒ Fee ☐

5. State Oil & Gas Lease No.  
**B-934**

7. Unit Agreement Name

8. Farm or Lease Name  
**New Mexico State**

9. Well No.  
**26**

10. Field and Pool, or Wildcat  
**Undesignated**

12. County  
**Lea**

1a. TYPE OF WELL

b. TYPE OF COMPLETION  
OIL WELL ☒ GAS WELL ☐ DRY ☒ OTHER ☐  
NEW WELL ☒ WORK OVER ☐ DEEPEN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ OTHER ☐

2. Name of Operator  
**Humble Oil & Refg Co.**

3. Address of Operator  
**Box 1600 - Midland, Texas 79701**

4. Location of Well

UNIT LETTER **L** LOCATED **2310'** FEET FROM THE **S** LINE AND **400** FEET FROM

THE **W** LINE OF SEC. **2** TWP. **22-S** RGE. **37-E** NMPM

15. Date Spudded **7-14-69** 16. Date T.D. Reached **7-21-69** 17. Date Compl. (Ready to Prod.) **—** 18. Elevations (DF, RKB, RT, GR, etc.) **3379-DF** 19. Elev. Casinghead **—**

20. Total Depth **4151'** 21. Plug Back T.D. **—** 22. If Multiple Compl., How Many **—** 23. Intervals Drilled By **Rotary Tools** Cable Tools **4151**

24. Producing Interval(s), of this completion - Top, Bottom, Name  
**San Andres prospect (dry)**

25. Was Directional Survey Made  
**No**

26. Type Electric and Other Logs Run  
**S.W. Neutron Gamma Ray**

27. Was Well Cored  
**No**

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

CASING SIZE	WEIGHT LB./FT.	DEPTH SET	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
8 5/8"	24#	298'		150 Sax	None
4 1/2"	9.5#	4139'		400 Sax	None

29. LINER RECORD 30. TUBING RECORD

SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN	SIZE	DEPTH SET	PACKER SET

31. Perforation Record (Interval, size and number) 32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

INTERVAL	SIZE	AMOUNT AND KIND MATERIAL USED
4005-4020	wy 1 shot/ft	
3969-3981	✓	1500 gal - 28% NE Acid
3920-3928	✓	1500 ✓
3941-3948	✓	1250 ✓
3860-3867	✓	500 ✓

33. PRODUCTION

Date First Production **Well made Some Oil while attempting Completion** Production Method (Flowing, gas lift, pumping - Size and type pump) **Shut In.** Well Status (Prod. or Shut-in)

Date of Test **—** Hours Tested **—** Choke Size **—** Prod'n. For Test Period **—** Oil - Bbl. **—** Gas - MCF **—** Water - Bbl. **—** Gas - Oil Ratio **—**

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 **—**

35. List of Attachments

36. I hereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief.

SIGNED **Darcy sat** TITLE **Unit Head** DATE **9/29/69**