

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPPLICATE
(Other instructions on
reverse side)Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

NM 18305
6. IF INDIAN, ALLOTTEE OR TRIBE NAME

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR CONTINENTAL Oil Company	8. FARM OR LEASE NAME MADDOX 19
3. ADDRESS OF OPERATOR Box 460, Hobbs, N.M. 88240	9. WELL NO. 1
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 660' ENL & 660' FEL OF SEC. 19	10. FIELD AND POOL, OR WILDCAT UNDESIGNATED
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3503' GR
	12. COUNTY OR PARISH LEA
	13. STATE N.M.

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

(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.)*

This well was drilled dry and temporary abandoned on 4-13-74. It is now proposed to plug and abandon by the following procedure: Run tubing open-ended to 4500'. Set 60 sks. cement plug 4500'-4200'. Cut & pull estimated 3600' of 8 5/8" csq. Set cement plugs as follows: 100 sks 3700'-3400'; 100 sks 700'-550'; 10'-surface. Erect dry hole marker & restore surface. Intervals between plugs to be filled w/ 9.0-9.5# Brine containing 25 sks. gel per 1000 barrels.

18. I hereby certify that the foregoing is true and correct

SIGNED

TITLE

DATE

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

11565-4. File

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.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG*

5. LEASE DESIGNATION AND SERIAL NO.

N.M. 18305

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

9. WELL NO.

10. FIELD AND POOL, OR WILDCAT

11. SEC. T. R. & S. OR BLOCK AND SURVEY
OR AREA

Sec. 19 T-235 R-34E

12. COUNTY OR
PARISH

Lea

13. STATE

N. Mex.

1a. TYPE OF WELL: OIL WELL ☒ GAS WELL ☐ DRY ☐ Other

b. TYPE OF COMPLETION:

NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other2. NAME OF OPERATOR
CONTINENTAL OIL COMPANY3. ADDRESS OF OPERATOR
P. O. Box 460, H555s, N.M. 88240

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

At surface

660' FNL & 660' FEL of Sec. 19

At top prod. interval reported below

At total depth

Same

Same

14. PERMIT NO.

DATE ISSUED

12. COUNTY OR
PARISH

Lea

13. STATE

N. Mex.

15. DATE SPUDDED

2-14-74

16. DATE T.D. REACHED

3-19-74

17. DATE COMPL. (Ready to prod.)

4-13-74

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

3,503' BR

19. ELEV. CASINGHEAD

20. TOTAL DEPTH, MD & TVD

8,710'

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

8,000'

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

ROTARY TOOLS

CABLE TOOLS

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

None - well temporarily abandoned

26. TYPE ELECTRIC AND OTHER LOGS RUN

SNP, LL-9 & Cont. Bond

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

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD*	AMOUNT PULLED
13 3/8"	54#	639'	17 1/2"	Cim. - 4.25 sacks	
8 7/8"	24# & 32#	4,901'	11"	300 sacks	
* 5 1/2"	10.5# & 17#	8,564'	7 7/8"	500 sacks	4,440'

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
* 5 1/2"	Included above since liner was first run to make a full string.						

31. PERFORATION RECORD (Interval, size and number)

Open hole 8,564' - 8,710'
5,205' - 5,206'
5,153' - 5,166'

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
8,564' - 8,710'	600 gal. 28% acid
5,205' - 5,206'	2 bbls. MCA. acid

33. PRODUCTION

DATE FIRST PRODUCTION

PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)

WELL STATUS: (Producing or shut-in)

Temp. Abandoned

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 foregoing and attached information is complete and correct as determined from all available records

SIGNED

Robert Paul

TITLE

Division Office Manager

DATE

4-26-74

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

USG 4, File

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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, 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 2: 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 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: 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, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES		38. GEOLOGIC MARKERS		39. COMPLETION OR RECOMPLETION INFO		UNIT STATE DEPARTMENT OF THE INTERIOR GEOLOGICAL SURVEY	
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH	TRUE VERT. DEPTH	
				haman Rawney Bone Spring Linn	5010 5050 8548		