

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT AN DUPLICATION
N. M. M. 3013. 031111
(See other in-
structions on
reverse side)
FOR BOX 1980
HOBBS, NEW MEXICO

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 DESIGNATION AND SERIAL NO. 83240 NM-13125	
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 CONOCO INC.		7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR P.O. Box 460, Hobbs, N.M. 88240		8. FARM OR LEASE NAME Meyer A-29	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface Unit C 660' FNB & 1980' FWL At top prod. interval reported below At total depth		9. WELL NO. 10	
14. PERMIT NO. 30-025-26419		DATE ISSUED	
15. DATE SPUDDED 11-5-79		16. DATE T.D. REACHED 11-11-79	
17. DATE COMPL. (Ready to prod.) 7-28-87		18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 3537'	
19. ELEV. CASINGHEAD -		20. TOTAL DEPTH, MD & TVD 3795'	
21. PLUG, BACK T.D., MD & TVD 3236'		22. IF MULTIPLE COMPL., HOW MANY* -	
23. INTERVALS DRILLED BY All		24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* Jalmat Yates 7 Rivers 3637'-3754' OKKZ	
25. WAS DIRECTIONAL SURVEY MADE NO		26. TYPE ELECTRIC AND OTHER LOGS RUN B66, FDC, CNB, GR, Caliper	
27. WAS WELL CORED NO		28. CASING RECORD (Report all strings set in well) ACCEPTED FOR RECORD AUG 25 1987 SJS CARLSBAD, NEW MEXICO	
29. LINER RECORD SIZE TOP (MD) BOTTOM (MD) SACKS CEMENT* SCREEN (MD) None		30. TUBING RECORD SIZE DEPTH SET (MD) PACKER SET (MD) 2 3/8" 3529'	
31. PERFORATION RECORD (Interval, size and number) 3637' - 3754' w/1 JSPE		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC. DEPTH INTERVAL (MD) AMOUNT AND KIND OF MATERIAL USED 3637'-3754' 38 lbs 15% HCL-NF-FE followed with 209 lbs TFW	
33.* PRODUCTION DATE FIRST PRODUCTION PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) WELL STATUS (Producing or shut-in) Shut in 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.) Well Shut in Pending P+H Evaluation		TEST WITNESSED BY James Edmiston	
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 J. FINNEY		TITLE Administrative Supervisor DATE 8-12-87	

*(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.)

AUG 1963

37. SUMMARY OF IMPORTANT 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	MEAS. DEPTH	TRUE VERT. DEPTH
Anhydrite (Rustler)	1200'	1630'				
Sact (Saledo)	1630'	3330'				
Delaware non thorp	5132'	8662'				
Bone Spring	8662'	8835' (7A)				