

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE

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

5. LEASE DESIGNATION AND SERIAL NO.

LC 064118

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

E. E. Elinbury

9. WELL NO.

15

10. FIELD AND POOL, OR WILDCAT

Langlie-Mattix

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

Sec. 35, T-23-S, R-37-E

12. COUNTY OR
PARISH
Lea13. STATE
New Mexico

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

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

Carter Foundation Production Company

3. ADDRESS OF OPERATOR

P. O. Box 900 - Kermit, Texas

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

At surface 1340 PNL, 1200 PNL, Sec. 35, T-23-S, R-37-E
Lea County, New Mexico

At top prod. interval reported below Same

At total depth Same

14. PERMIT NO.

DATE ISSUED

12-16-65

15. DATE SPUNDED

2-18-66

16. DATE T.D. REACHED

3-1-66

17. DATE COMPL. (Ready to prod.)

3-8-66

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

3255 RKB

19. ELEV. CASINGHEAD

3244

20. TOTAL DEPTH, MD & TVD

3664 MD & TVD

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

3643 MD & TVD

22. IF MULTIPLE COMPL.,
HOW MANY*

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23. INTERVALS
DRILLED BY

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ROTARY TOOLS

0-3664

CABLE TOOLS

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

3436-3588 MD & TVD

25. WAS DIRECTIONAL
SURVEY MADE

Inclination Only

26. TYPE ELECTRIC AND OTHER LOGS RUN

Gamma Ray Neutron

27. WAS WELL CORED

Yes

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"	20#	380	10-3/4	150 Sx	None
5-1/2"	14#	3661	7-7/8	1050 Sx. Circulated	None

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					2" RUB	3592	--

31. PERFORATION RECORD (Interval, size and number)

2 perf. per foot 1/2" Dia.

3436-3452 3534-3547

3457-3464 3561-3569

3468-3474 3582-3585

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
3436-3585	Frac. 16,800 Gals Refined oil, 33,600# Sand.

33. PRODUCTION

DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)					WELL STATUS (Producing or shut-in)	
3-31-66		Pumping					Producing	
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO	
3-31-66	24	--	→	11.04	61.7	0	5589	
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)		
50#	55#	→	11.04	61.7	0	39.80		

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

Used for gas lift or sold

TEST WITNESSED BY

35. LIST OF ATTACHMENTS

Gamma Ray Neutron Log, Core analysis, Inclination Survey

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records

SIGNED

TITLE

Field Manager

DATE

3-24-66

*(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				38. GEOLOGIC MARKERS	
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH TOP TRUNCATED DEPTH
Santa Rosa	500	750	Sand - water		
Parrisee	3430	3592	Sand and lime - oil		
Parrisee	3420	3623	Cored Interval		