

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE

(See other in-
structions on
reverse side)

BY TO U.S.

If approved,
get Bureau No. 42-R355.5.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG*

1. TYPE OF WELL: OIL WELL ☐ GAS WELL ☒ DRY ☐ Other _____		5. LEASE NATION AND SERIAL NO. 262384	
2. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other _____		6. IF INDIAN ALLOTTEE OR TRIBE NAME	
3. NAME OF OPERATOR		7. UNIT AGREEMENT NAME	
4. ADDRESS OF OPERATOR		8. FARM OR LEASE NAME	
9. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 200' FSL + 460' FWL At top prod. interval reported below At total depth		9. WELL NO. 8	
10. FIELD AND POOL, OR WILDCAT Calmet (Yatao Gas)		11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA	
14. PERMIT NO.		DATE ISSUED 9-29-66	
12. COUNTY OR PARISH Levi		13. STATE New Mexico	
15. DATE SPUDDED 10-15-66	16. DATE T.D. REACHED 10-22-66	17. DATE COMPL. (Ready to prod.) 12-30-66	18. ELEVATIONS (OF, RKB, RT, GR, ETC.)* 2986 DF
19. ELEV. CASINGHEAD 2978	20. TOTAL DEPTH, MD & TVD 3100	21. PLUG, BACK T.D., MD & TVD	22. IF MULTIPLE COMPL., HOW MANY*
23. INTERVALS DRILLED BY 0-3100			24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* open hole 2701-3100
25. WAS DIRECTIONAL SURVEY MADE			26. TYPE ELECTRIC AND OTHER LOGS RUN
27. WAS WELL CORED			
28. CASING RECORD (Report all strings set in well)			
CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE
7"		400	9 7/8"
4 1/2"		2701	6 1/2"
29. CEMENTING RECORD			
AMOUNT PULLED			
170 lb			
100 lb			
30. LINER RECORD			
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*
SCREEN (MD)			
31. TUBING RECORD			
SIZE	DEPTH SET (MD)	PACKER SET (MD)	
2 3/8"	3036		
32. PERFORATION RECORD (Interval, size and number)			
33. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED	
2701-3100		Acid 1750 gal Sand 20,000 lb and 30,000 lb	
34. PRODUCTION			
DATE FIRST PRODUCTION 12-30-66		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Flowing	
WELL STATUS (Producing or shut-in) Producing			
DATE OF TEST 12-30-66	HOURS TESTED 24	CHOKE SIZE 4 1/2"	PROD'N. FOR TEST PERIOD →
OIL—BBL. 337	GAS—MCF. 337	WATER—BBL.	GAS-OIL RATIO
FLOW. TUBING PRESS. 3075	CASING PRESSURE 270	CALCULATED 24-HOUR RATE →	OIL—BBL. 337
GAS—MCF. 337		WATER—BBL.	OIL GRAVITY-API (CORR.)
35. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Natural Gas			
36. TEST WITNESSED BY			
37. LIST OF ATTACHMENTS			
38. I hereby certify foregoing and attached information is complete and correct as determined from all available records			
SIGNED L.E. Smith		TITLE Asst. Prod. Clerk	
DATE 1-3-67			

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

[illegible]

If not filed prior to the time this sworn record is submitted, copies of all currently available tests (drilling, geologic, sample and core analysis, all types of geologic, etc.) and all pressure and pressure tests, and directional surveys, should be attached hereto, to the extent required by applicable Federal law and regulations. All attachments should be listed on this form, see item 10a.

4: If there are no applicable State requirements, locations or Federal or Indian land should be designated in accordance with Federal requirements of 40 CFR Part 15.1. The Federal office for specific instructions.

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.

5.22 a - 5.24: If this well is completed for separate production from more than one interval zone (multiple completion), you state in item 22, and in item 24 show the production intervals, top(s), bottom(s), and name(s) (if any) for only the interval reported in item 23. Submit a separate report (page) on the logs, adequately identifying each additional interval to be separately produced, showing the additional data pertinent to such interval.

Text 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.

33: Submit a separate completion report on this form for each interval to be separately produced. (See instruction for items 22 and 23 above.)

MARY OF POROUS ZONES: 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.	NAME	MEAS. DEPTH	TOP	DEPT. B-PTH
artesian sand	Surface	60	Sand and gravel		100		
cretaceous lim	60	455	claystone	Rustler	100		
climle	455	1000	red shale and sandstone	Sedalia	100		
Rustler	1000	1147	claystone		100		
Sedalia	1147	2000	clay shale and sandstone		100		
Tensile	2000	2900	sand and gravel (over)		100		