

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN DUPLICATE

(See other information on reverse side)

FORM APPROVED
OMB NO. 1004-0137
Expires: February 28, 1995

LEASE DESIGNATION AND SERIAL NO

NMNM2244

IF INDIAN, ALLOTTEE OR TRIBE NAME

WELL COMPLETION OR RECOMPLETION REPORT AND LOG*

1. TYPE OF WELL: OIL ☐ GAS ☒ DRY ☐ Other _____
2. TYPE OF COMPLETION: NEW ☐ WORK OVER ☐ DEEPEN ☐ PLUG BACK ☐ DIFF. PRESS. ☐ Other _____
3. NAME OF OPERATOR: **N.M. Oil Cons.**
4. ADDRESS AND TELEPHONE NO.: **P.O. Box 1980**
Hobbs, NM 88241
5. LEASE OR LEASE NAME, WELL NO.: **on**

6. LOCATION OF WELL (Report location clearly and in accordance with any State requirements):
At surface: **Unit G, 1980' FNL & 1980' FEL Sec. 18, TS 23 S, Range 37 E**
At top prod. interval reported below: **(same)**
At total depth: **(same)**
7. PERMIT NO.: _____ DATE ISSUED: _____
8. COUNTY OR PARISH: **Lea** 9. STATE: **NM**
10. DATE SPUDDED: **6/68** 11. DATE T.D. REACHED: **7/68** 12. DATE COMPL. (Ready to prod.): **8/68 05-06-97** 13. ELEVATION (Dr. and, Rt. or, etc.): **3336' FGL** 14. ELEV. CASINGHEAD: **3336'**
15. TOTAL DEPTH, MD & TVD: **3800'** 16. PLUG BACK T.D., MD & TVD: **3744' / 2950'** 17. IF MULTIPLE COMPL. HOW MANY? **n/a** 18. INTERVALS DRILLED BY: **sur. to 3800'** 19. ROTARY TOOLS: _____ CABLE TOOLS: _____
20. PRODUCING INTERVAL(S) OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD): **2756'–2900' Yates** 21. WAS DIRECTIONAL SURVEY MADE: **unknown**
22. TYPE ELECTRIC AND OTHER LOGS RUN: **Compensated Neutron, Cement bond, Gamma Ray Correlation** 23. WAS WELL CORED: **No**

24. CARING RECORD (Report all strings set in well):

CASINO SIZE-GRADE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	TOP OF CEMENT, CEMENTING RECORD	AMOUNT PULLED
8-5/8"	20#	800'	12-1/4"	375 sx - circ	
5-1/2"	15.5#	3800'	7-7/8"	250 sx	

25. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	BACKS CEMENT	SCREEN (MD)

26. TURNING RECORD

SIZE	DEPTH SET (MD)	PACKER SET (MD)
2-3/8"	2910'	

27. PERFORATION RECORD (Interval, size and number)

2756' – 2900' (14 perfs)

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
2756-2900	1750 gal. 15% HCL
2756-2900	54,000# 16/30 Brady sand

29. PRODUCTION

DATE FIRST PRODUCTION	PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)	WELL STATUS (Producing or shut-in)
6/97 06-19-97	Pumping	Producing

DATE OF TEST	NOTES TESTED	CHOKER SIZE	PROD'N FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
06-18-97	24	none	0	0	350	22	350,000

FLOW. TURNING PERIOD	CASINO PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-APT (CORR.)
30#	35#	0	0	350	22	n/a

30. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.): **Sold**

31. LIST OF ATTACHMENTS

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

SIGNED: **Marvin B. Jahn, Jr.** TITLE: **President** DATE: **11/19/97**

ACCEPTED FOR RECORD
DAVID R. GLASS
FEB 2 1998
* (See Instructions and Space for Additional Data on Reverse Side)

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

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	TRUE VERT. DEPTH
Queen	3635	3759	Sand	T/S it T/S it 1 3 Seven Rivers	1160 1368 2668 2810 3079	