

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 *

1a. TYPE OF WELL:		OIL WELL ☐	GAS WELL ☐	DRY ☐	Other <u>Injection Well</u>
b. TYPE OF COMPLETION:					
NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other _____					
2. NAME OF OPERATOR TEXACO Inc.					
3. ADDRESS OF OPERATOR P. O. Box 728, Hobbs, New Mexico 88240					
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface <u>2310' FSL & 1820' FEL of Sec. 27, T-26-S, R-37-E, Unit Letter J.</u> At top prod. interval reported below <u>2180' / 5</u> At total depth <u>2180' / 5</u>					
14. PERMIT NO. Regular		DATE ISSUED 10-29-73			
15. DATE SPUNDED 1-6-74		16. DATE T.D. REACHED 1-16-74		17. DATE COMPL. (Ready to prod.) 2-10-74	
18. ELEVATIONS (DF, REB, RT, GR, ETC.)* 2976' GR		19. ELEV. CASINGHEAD 2976'			
20. TOTAL DEPTH, MD & TVD 3350'		21. PLUG, BACK T.D., MD & TVD 3311'		22. IF MULTIPLE COMPL., HOW MANY* -	
23. INTERVALS DRILLED BY 0-3350'		24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 2 JSPI @ 3182, 85, 90, 94, 3200, 37, 43, 46, 55, 70, 75, 79, 85, & 3295'.			
25. WAS DIRECTIONAL SURVEY MADE No		26. TYPE ELECTRIC AND OTHER LOGS RUN GRN-Compensated Log			
27. WAS WELL CORED Yes		28. CASING RECORD (Report all strings set in well)			
CASING SIZE		WEIGHT, LB./FT.		DEPTH SET (MD)	
7-5/8"		15.28#		650'	
4-1/2"		10.23#		3350'	
HOLE SIZE		CEMENTING RECORD		AMOUNT PULLED	
9-5/8"		300 sx.		-0-	
6-3/4"		400 sx.		-0-	
29. LINER RECORD		30. TUBING RECORD		31. PERFORATION RECORD (Interval, size and number)	
SIZE		SIZE		2 JSPI @ 3182, 85, 90, 94, 3200, 37, 43, 46, 55, 70, 75, 79, 85, & 3295'.	
TOP (MD)		DEPTH SET (MD)		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
BOTTOM (MD)		PACKER SET (MD)		DEPTH INTERVAL (MD)	
SACKS CEMENT*		3091'		3182-3295	
SCREEN (MD)		3091'		AMOUNT AND KIND OF MATERIAL USED	
2-3/8"		3091'		30,000 gals. WF-60, 15,000# 20-40 sand + 15,000# 10-20 sand, w/ 1,000 gals. 15% NEA	
33. PRODUCTION		34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)		35. LIST OF ATTACHMENTS	
DATE FIRST PRODUCTION Inj: 2-10-74		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Water Injection 1 Bbl. per minute		WELL STATUS (Producing or shut-in) Producing	
DATE OF TEST		HOURS TESTED		CHOKE SIZE	
FLOW. TUBING PRESS.		CASING PRESSURE		CALCULATED 24-HOUR RATE	
OIL—BBL.		GAS—MCF.		WATER—BBL.	
OIL GRAVITY-API (CORR.)		TEST WITNESSED BY		36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records	
SIGNED <u>[Signature]</u>		TITLE Asst. Dist. Supt.		DATE 2-12-74	

*(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 83, 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
Yates	2912	3010	Sand, Sandy Dolomite (Gas)	Anhydrite	1120	
Seven Rivers	3154	3195	Sand, Sandy Dolomite (Oil)	Yates Seven Rivers	2912 3154	