

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.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL: OIL WELL ☐ GAS WELL ☐ DRY ☒ Other _____		5. LEASE DESIGNATION AND SERIAL NO. NM-0554254	
b. TYPE OF COMPLETION: NEW WELL ☐ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other P&A		6. IF INDIAN, ALLOTTEE OR TRIBE NAME -----	
2. NAME OF OPERATOR Hanagan Petroleum Corporation		7. UNIT AGREEMENT NAME -----	
3. ADDRESS OF OPERATOR P. O. Box 1737, Roswell, New Mexico 88201		8. FARM OR LEASE NAME Gerding	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 1980' FNL & 1980' FEL At top prod. interval reported below At total depth Same		9. WELL NO. 1	
14. PERMIT NO. _____ DATE ISSUED _____		10. FIELD AND POOL, OR WILDCAT Wildcat	
15. DATE SPUDDED 6/30/74		11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA Sec. 1-24S-34E	
16. DATE T.D. REACHED 7/11/74		12. COUNTY OR PARISH Lea	
17. DATE COMPL. (Ready to prod.) 7/12/74		13. STATE N.M.	
18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 3447' KB		19. ELEV. CASINGHEAD 3437'	
20. TOTAL DEPTH, MD & TVD 5365'		23. INTERVALS DRILLED BY 36-5365'	
21. PLUG, BACK T.D., MD & TVD		24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* None	
22. IF MULTIPLE COMPL., HOW MANY*		25. WAS DIRECTIONAL SURVEY MADE No.	
26. TYPE ELECTRIC AND OTHER LOGS RUN Gamma-Ray-Neutron		27. WAS WELL CORDED No.	
29. CASING RECORD (Report all strings set in well)			
CASING SIZE 16"	WEIGHT, LB./FT. 65#	DEPTH SET (MD) 280'	HOLE SIZE 20"
CEMENTING RECORD 300 sx Class "C" + 2% CaCl		AMOUNT PULLED None	
29. LINER RECORD			
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*
30. TUBING RECORD			
SIZE	DEPTH SET (MD)	PACKER SET (MD)	
31. PERFORATION RECORD (Interval, size and number)			
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED	
33.* PRODUCTION			
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)	
DATE OF TEST		WELL STATUS (Producing or shut-in)	
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.)			
TEST WITNESSED BY			
35. LIST OF ATTACHMENTS 2 copies Gamma Ray-Neutron, Deviation Report			
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records.			
SIGNED <i>Donald E. Harrington</i>		TITLE Agent	
DATE 7/16/74			

*(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 33.

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

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	NEAR, DEPTH	TRUE VERT. DEPTH
Dockum	0	360	Sand, Caliche, Anhydrite	Dockum	Surface	
Dewey Lake	360	880	Sand, Shale	Dewey Lake	360	
Rustler	880	1036	Anhydrite, Shale	Rustler	880	
Salado	1036	4918	Salt, Anhydrite	Salado	1036	
Castile	4918	5298	Anhydrite	Castile	4918	
Delaware Mountain	5298	5365	Limestone, Sand & Shale	Delaware Mountain	5298	

38. GEOLOGIC MARKERS

NAME	NEAR, DEPTH	TRUE VERT. DEPTH
Dockum	Surface	
Dewey Lake	360	
Rustler	880	
Salado	1036	
Castile	4918	
Delaware Mountain	5298	