

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 _____		5. LEASE DESIGNATION AND SERIAL NO. LC 068281 B	
b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other _____		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
2. NAME OF OPERATOR CONTINENTAL OIL COMPANY		7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR Box 460, HOBBS, N.M. 88240		8. FARM OR LEASE NAME RUSSELL 30 FEDERAL	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements). At surface 1650' FNL E 2310' FEL OF SEC. 30 At top prod. interval reported below SAME At total depth SAME		9. WELL NO. 6	
14. PERMIT NO.		DATE ISSUED	
10. FIELD AND POOL, OR WILDCAT NORTH MASON DELAWARE		11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA Sec. 30, T-26S, R-32E	
12. COUNTY OR PARISH LEA		13. STATE N.M.	
15. DATE SPUDDED 4-6-75	16. DATE T.D. REACHED 4-13-75	17. DATE COMPL. (Ready to prod.) 5-4-75	18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 3137' GR
19. ELEV. CASINGHEAD -	20. TOTAL DEPTH, MD & TVD 4307'		
21. PLUG, BACK T.D., MD & TVD -		22. IF MULTIPLE COMPL., HOW MANY* -	23. INTERVALS DRILLED BY ROTARY
24. PRODUCING INTERVAL(S). OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 4245' - 4307' DELAWARE			25. WAS DIRECTIONAL SURVEY MADE YES
26. TYPE ELECTRIC AND OTHER LOGS RUN GR-BHC SONIC DCL			27. WAS WELL CORED No
28. CASING RECORD (Report all strings set in well)			
CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE
8 5/8"	24# K-55	524'	12 1/4"
5 1/2"	15.5# K-55	4245'	7 7/8"
CEMENTING RECORD		AMOUNT PULLED	
275 Skts. - Circ.		-	
225 Skts		-	
29. LINER RECORD			
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*
30. TUBING RECORD		PACKER SET (MD)	
SIZE	DEPTH SET (MD)		
2 3/8"	4237'		
31. PERFORATION RECORD (Interval, size and number)			
OH 4250' - 4307'			
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED	
4250' - 4307'		2000 gal oil prod, 3000 gal/s galled oil w/ 12,000# SL.	
33. PRODUCTION			
DATE FIRST PRODUCTION 5-4-75		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Pump	
WELL STATUS (Producing or shut-in) PROD.			
DATE OF TEST 5-20-75	HOURS TESTED 24	CHOKE SIZE -	PROD'N. FOR TEST PERIOD 55
OIL—BBL. 55	GAS—MCF. 102	WATER—BBL. 129	GAS-OIL RATIO
FLOW, TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE →	OIL GRAVITY-API (CORR.)
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Sold			
TEST WITNESSED BY M. K. CHAMBLESS			
35. LIST OF ATTACHMENTS			
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records			
SIGNED [Signature]		TITLE SR. ANALYST	
DATE 6-6-75			

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

4865-5, File

mp

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; CORRELATE 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
Ramsey	4251	4286	0.96.	no shallow log	4212	
				haman	4251	
				Ramsey	4286	
				Ford?		