Form 9-330 (Kev. 5-63)		IINTE		TEC	SUBMI	י יי	DUPLICATE		Form a	pproved.
	DEPAR	ITINU THAMTS					(See other structions	00	Budget	Bureau No. 42-R355.
	DEI AI	GEOLOGIC				`	reverse si		ESIGNAT	10N AND SERIAL NO
WELL CO	MPLETIO	OR RECC	MPLET	ION	REPORT	ANI	D LOG*	6. IF INDIA	N, ALLO	TTEE OR TRIBE NAM
1a. TYPE OF WE		IL GAS WELL	<u> </u>	RY 🗌	Other			7. UNIT AG	REEMENT	NAME
b. TYPE OF COM	IPLETION:		- · · ·		Other					
NEW WELL Z	OVER E	EEP- PLUG N BACK	DIFF RES		Other	1,	<u> </u>	S. PARM OF	LEASE	NAME 70
2. NAME OF OPERA	1100 4	101	1	٠. ٨،				9. WELL NO	1 RE	RLYA
3. ADDRESS OF OP	ERATOR .			npo	ny	.: .			/	
4. LOCATION OF WE	160 /	tion clearly and in	N.M	8	7240 y State requir	. (3.1. (<u> </u>	10. FIELD	ND POOL	OR WILDCAT
		- £ 1980	'EE		Sac sequir	emeni. 12		UTHESI	gnade	OR BLOCK AND SURVE
At top prod. in	terval reported			- 7	<i>De C.</i> ,	"		OR ARE	A	
At total depth	ME		•		•			Sec. 13	T.2	45, R-32E
	ME		14. PE	BMIT NO.		DATE I	ISSUED	12. COUNTY		13. STATE -
								PARISH		N.M.
15. DATE SPUDDED	16. DATE T.D.	REACHED 17. D.	TE COMPL.	(Ready t	prod.) 18.	ELEV	~ /	(B, RT, GR, ETC.)*	19. E	LEV. CASINGHEAD
20. TOTAL DEPTH, MD		LUG, BACK T.D., MD	# TVD 22		TIPLE COMPL.,		3604] 23. INTERVAL	S ROTARY TO	ols	CABLE TOOLS
5050				HOW M			DRILLED	Rotar	4	
24. PRODUCING INTE	_							• • • • • • • • • • • • • • • • • • • •	25	. WAS DIRECTIONAL SURVEY MADE
TOP 4996	, Dotte	om 5036	MAM	15E	4					No
26. TYPE ELECTRIC	MIC, DI	L & PD							27. w	AS WELL CORED
28.	WEIGHT, LE		SING RECO		ort all strings	set in		NG RECORD	,	
85%"	24#	16	200'	1	24."			SX Cir		AMOUNT PULLED
53,	14 \$	± 50	50'	1	17/8"			S X		
				ļ						
29.		LINER RECOR	D	<u></u>		T	30.	TUBING REC	ORD	
SIZE	TOP (MD)	воттом (мв)	SACKS CE	MENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
		-	_				27/8	4988		<u> </u>
31. PERFORATION RE					32.	ACI	D, SHOT, FRA	CTURE, CEMEN	T SQUI	EEZE, ETC.
5004,5	007-12	5014-	18' and	1	DEPTH INT	ERVAL	(MD)	AMOUNT AND KI	ND OF M	ATERIAL USED
5004', 5 5019-23	1 25	SPF		-	5004-	<u>. 23</u>	Fin,		•	k My-T-0,
							26	000# 50	4 M-7	-0,/ dn1
33.*							7.4			
DATE FIRST PRODUCT	TION PRO	DUCTION METHOD	(Flowing, go		CTION imping—size a	nd ty	pe of pump)	l weil	STATIS	(Producing or
1-19-76		PHMPIN	19	• •			. , ,		ut-in) P	rad
ATE OF TEST	HOURS TESTER	CHOKE SIZ	PROD'N		OIL-RBL.		GAS-MCF.	WATER-88		GAS-OIL RATIO
FLOW. TUBING PRESS.	CASING PRESS	URE CALCULATE	OIIE	BI	CAS-3	CF.	/5// WAT	1 40		AVITY-API (CORR;)
		24-HOUR RA				•		·	i	42,0
34. DISPOSITION OF C	as (Sold, used for	or fuel, vented, etc	.)	***************************************				TEST WITNE	CSSED BY	,
35. LIST OF ATTACH	MENTS			·				C.R.	Pa	scha/
36. I hereby certify	that the foreun	ing and attached	information	te come	ete and ace	at co	dotours:			

SIGNED WM. R. Kulley I TITLE ADMIN. SUPV.

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

NSTRUCTIONS

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 Mws 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 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 shallysis, all types electric, etc.), formations of the contractions of the contractions of the contractions of the contractions. All attachments

should be listed on this form, see Item 35.

Hem 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.

Irem 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 Coment": 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.)

FORMATION	воттом	