

**UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY**

SUBMIT IN DUPLICATE*

(See instructions on reverse)

Form approved.
Budget Bureau No. 42-R3755.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG*

1a. TYPE OF WELL: OIL WELL ☒ GAS WELL ☐ DRY ☐ Other ☐		5. LEASE DESIGNATION AND SERIAL NO. NM 23199	
b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. DESVR. ☐ Other ☐		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
2. NAME OF OPERATOR HNG Oil Company		7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR P.O. Box 2267, Midland, Texas 79702		8. FARM OR LEASE NAME Wilson 21 Federal	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 990' FWL & 1650' FSL, Sec. 21 At top prod. interval reported below Same At total depth Same		9. WELL NO. 4	
14. PERMIT NO.		DATE ISSUED 6-18-79	
10. FIELD AND POOL, OR WILDCAT Comanche Stateline Tansill Yates		11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA Sec. 21, T26S, R36E	
12. COUNTY OR PARISH Lea		13. STATE NM	
15. DATE SPUDDED 2-2-79	16. DATE T.D. REACHED 9-11-79	17. DATE COMPL. (Ready to prod.) 10-3-79	18. ELEVATIONS (DF, RSB, RT, GR, ETC.)* 2918' GR
19. ELEV. CASINGHEAD 2918'		20. TOTAL DEPTH, MD & TVD 3575	
21. PLUG, BACK T.D., MD & TVD 3544		22. IF MULTIPLE COMPL., HOW MANY*	
23. INTERVALS DRILLED BY X		ROTARY TOOLS X	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 3154-3488 (Tansill Yates)		25. WAS DIRECTIONAL SURVEY MADE NO	
26. TYPE ELECTRIC AND OTHER LOGS RUN Dual Laterlog, Sonic & EPT		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#	1415'	11"
5-1/2"	14#	3575	7-7/8"
CEMENTING RECORD		AMOUNT PULLED	
600 HLW & 250 CLC		Circ.	
375 HLW & 325 CLC			
29. LINER RECORD			
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*
30. TUBING RECORD		PACKER SET (MD)	
SIZE 2-3/8	DEPTH SET (MD) 3084	3084	
31. PERFORATION RECORD (Interval, size and number)			
3154-3488 (.40" 16)		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED	
3154-3488		Acidized w/2000 gals	
		15% MCA	
33. PRODUCTION			
DATE FIRST PRODUCTION 10-3-79	PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Flowing		WELL STATUS (Producing or shut-in) Producing
DATE OF TEST 10-8-79	HOURS TESTED 24	CHOKE SIZE 42/64"	PROD'N. FOR TEST PERIOD 200
OIL—BBL. 200	GAS—MCF. 125	WATER—BBL. 15	GAS-OIL RATIO 625
FLOW TUBING PRESS. 200	CASING PRESSURE Packer	CALCULATED 24-HOUR RATE 31.0	OIL GRAVITY-API (CORR.) 31.0
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Sold			
35. LIST OF ATTACHMENTS Logs			
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records			
SIGNED Betty A. Gildon		TITLE Regulatory Clerk	
		DATE 10-8-79	

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

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.)

92

37. SUMMARY OF POROUS ZONES:

SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF; CURED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CUSHION TEST, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.
Tansill	3120	3440	Dolomite
Yates	3440	3494	Sand & Dolomite
Seven Rivers	3494	TD	Sand & Dolomite

38. GEOLOGIC MARKERS

NAME	TOP	
	MEAN. DEPTH	TRUE VERT. DEPTH
Tansill	3120	
Yates	3440	
Seven Rivers	3494	

RECEIVED

OCT 6 1950
O.C.D.
HOBBS, OFFICE