

DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYForm approved.
Budget Bureau No. 42-R355.5.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG*

1a. TYPE OF WELL:		OIL WELL ☒	GAS WELL ☐	DRY ☐	Other _____										
b. TYPE OF COMPLETION:		NEW WELL ☒	WORK OVER ☐	DEEP-EN ☐	PLUG BACK ☐	DIFF. RESVR. ☐	Other _____								
2. NAME OF OPERATOR		Highland Production Company													
3. ADDRESS OF OPERATOR		P.O. Box 6326, Odessa, TX 79762													
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*		At surface 330 FNL 990 FWL Sec 20, Lea County, NM													
At top prod. interval reported below															
At total depth															
Same as above.															
14. PERMIT NO.		?													
DATE ISSUED		12-16-82													
5. LEASE DESIGNATION AND SERIAL NO.		71-06-8281B													
6. IF INDIAN, ALLOTTEE OR TRIBE NAME															
7. UNIT AGREEMENT NAME															
8. FARM OR LEASE NAME		Russell Federal													
9. WELL NO.		9													
10. FIELD AND POOL, OR WILDCAT		East Mason (Delaware)													
11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA		Sec 20, T-26-S R-32-E													
12. COUNTY OR PARISH		Lea													
13. STATE		NM													
15. DATE SPUDDED		16. DATE T.D. REACHED		17. DATE COMPL. (Ready to prod.)		18. ELEVATIONS (DF, RKB, RT, GR, ETC.)*		19. ELEV. CASINGHEAD							
1-24-83		3-13-83		3-19-83		3175.9GR		3177							
20. TOTAL DEPTH, MD & TVD		21. PLUG, BACK T.D., MD & TVD		22. IF MULTIPLE COMPL., HOW MANY*		23. INTERVALS DRILLED BY		ROTARY TOOLS CABLE TOOLS							
4356						4343		4356							
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*		4343 to 4356 Open Hole													
25. WAS DIRECTIONAL SURVEY MADE		No													
26. TYPE ELECTRIC AND OTHER LOGS RUN		Gamma Ray-Neutron													
27. WAS WELL CORED		No													
28. CASING RECORD (Report all strings set in well)															
CASING SIZE		WEIGHT, LB./FT.		DEPTH SET (MD)		HOLE SIZE		CEMENTING RECORD		AMOUNT PULLED					
8-5/8		24		1020		12 1/4		625 Sac		No					
5-1/2		15		4343		7-7/8		900 Sac		No					
29. LINER RECORD										30. TUBING RECORD					
SIZE		TOP (MD)		BOTTOM (MD)		SACKS CEMENT*		SCREEN (MD)		SIZE		DEPTH SET (MD)		PACKER SET (MD)	
										2-3/8		4341		4308	
31. PERFORATION RECORD (Interval, size and number)										32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.					
Open Hole 4343 to 4356										DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED			
										4343-4356		200 gal Acid			
										4343 - 4356		500 BBLS Oil Frac			
												5000 LBS 20/40 Sand			
33.* PRODUCTION															
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)						WELL STATUS (Producing or shut-in)							
3-19-83		Flowing						Producing							
DATE OF TEST		HOURS TESTED		CHOKE SIZE		PROD'N. FOR TEST PERIOD		OIL—BBL.		GAS—MCF.		WATER—BBL.		GAS-OIL RATIO	
3/25/83		24		14/64		→		185		150		10		810	
FLOW. TUBING PRESS.		CASING PRESSURE		CALCULATED 24-HOUR RATE		OIL—BBL.		GAS—MCF.		WATER—BBL.		OIL GRAVITY-API (CORR.)			
600		0		→		185		150		10		39			
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)										TEST WITNESSED BY					
Sold Phillips Petroleum										Max Pearce					
35. LIST OF ATTACHMENTS										ACCEPTED FOR RECORD					
1 copy of log										(ORIG. SGD.) DAVID R. GLASS					
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records										MAR 30 1983					
SIGNED		MARVIN L. SMITH				TITLE		President		DATE		3-28-83			
								MINERALS MANAGEMENT SERVICE							
								ROSWELL, NEW MEXICO							

* (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 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: "Subs 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.	38. GEOLOGIC MARKERS		
				NAME	MEAS. DEPTH	TRUE VERT. DEPTH
				Top Anhydrite	1430	
				Salt	2500	
				4m'		
				Sand Delaware	4310	

RECEIVED
MAR 31 1983
HOSBORN OFFICE