

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY
HOBBS, NEW MEXICO 88240

SUBMIT IN DUPLICATE

Form approved.
Budget Bureau No. 42-R355.5.

5. LEASE DESIGNATION AND SERIAL NO.

NM-18631

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Jackson Federal

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Undesig.-Double X

11. SEC., T., R., M., OR BLOCK AND SURVEY
OR AREA

Sec. 26-24S-32E

12. COUNTY OR
PARISH

Lea

13. STATE

New Mexico

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

Exxon Corporation

3. ADDRESS OF OPERATOR

PO. Box 1600, Midland, TX 79702

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*

At surface 660' FNL & 660' FWL of Section

At top prod. interval reported below

At total depth

14. PERMIT NO.

DATE ISSUED

6-7-83

12. COUNTY OR
PARISH

Lea

13. STATE

New Mexico

15. DATE SPUDDED 6-26-83 16. DATE T.D. REACHED 7-23-83 17. DATE COMPL. (Ready to prod.) --- 18. ELEVATIONS (DF, REB, RT, GR, ETC.)* 3569 GR 19. ELEV. CASINGHEAD ---

20. TOTAL DEPTH, MD & TVD 9350 21. PLUG, BACK T.D., MD & TVD --- 22. IF MULTIPLE COMPL., HOW MANY* --- 23. INTERVALS DRILLED BY 10-9350 24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* --- 25. WAS DIRECTIONAL SURVEY MADE No

26. TYPE ELECTRIC AND OTHER LOGS RUN
EPT; LDT/CNL/NGT; MSFL-PLL; DIL; Dipmeter; DLL; Sidewall Cores27. 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
13 3/8	61	622	17 1/2	450 sx BJ Lite; 300 sx ClC	
8 5/8	24.32	4923	11	1100 sx Bj Lite; 400 sx ClC	

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)

30. TUBING RECORD

31. PERFORATION RECORD (Interval, size and number)

None

32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
8620-8810	75 sx ClH (TOC-8597)
4988-5006	15 sx ClH
4925-4975	75 sx ClH
534-684	50 sx ClH

33.* PRODUCTION 3-50' 2 yards RediMix

DATE FIRST PRODUCTION Dry Hole PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) --- WELL STATUS (Producing or shut-in)

DATE OF TEST	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

ACCEPTED FOR RECORD

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records

SIGNED

Melba Knippling

TITLE

UNIT HEAD

AUG 18 1983

DATE

2 Augu st 1983

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

Dry Hole marker welded on. Csg. cut 3' below ground level, NEW MEXICO

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; 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.	GEOLOGIC MARKERS		
				NAME	MEAS. DEPTH	TRUE VERT. DEPTH
				Delaware	4868	
				Bone Springs	8795	

RECEIVED
AUG 19 1983
O.C.D.
HOBBS OFFICE