

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE

(See 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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> DRY <input type="checkbox"/> Other _____		5. LEASE DESIGNATION AND SERIAL NO. <u>LC 052326-A</u> <u>N 44-7486</u>	
b. TYPE OF COMPLETION: NEW WELL <input type="checkbox"/> WORK OVER <input checked="" type="checkbox"/> DEEP-EN <input type="checkbox"/> PLUG BACK <input type="checkbox"/> DIFF. RESVR. <input checked="" type="checkbox"/> Other _____		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
2. NAME OF OPERATOR <u>Continental Oil Company</u>		7. UNIT AGREEMENT NAME <u>Langlie JACK</u>	
3. ADDRESS OF OPERATOR <u>Box 460, Hobbs, New Mexico 88240</u>		8. FARM OR LEASE NAME <u>Langlie JACK UNIT</u>	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface <u>1980' FNL & 1980' FEL of Sec 20, T-245, R-37E, Lea County, N. Mex.</u> At top prod. interval reported below At total depth <u>Some</u>		9. WELL NO. <u>8</u>	
14. PERMIT NO.		DATE ISSUED	
15. DATE OPERATED <u>work started 11-11-69</u>		16. DATE T.D. REACHED	
17. DATE COMPL. (Ready to prod.) <u>3-1-70</u>		18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* <u>3280' DF</u>	
19. ELEV. CASINGHEAD		10. FIELD AND POOL, OR WILDCAT <u>Langlie Mathis 7 Rivers Over</u>	
20. TOTAL DEPTH, MD & TVD <u>3580</u>		11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA <u>SEC. 20, T-245, R-37E</u>	
21. PLUG, BACK T.D., MD & TVD		12. COUNTY OR PARISH <u>LEA</u>	
22. IF MULTIPLE COMPL., HOW MANY*		13. STATE <u>N. MEX.</u>	
23. INTERVALS DRILLED BY <u>→</u>		ROTARY TOOLS	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* <u>3440 - 3500' Seven Rivers</u>		CABLE TOOLS	
25. WAS DIRECTIONAL SURVEY MADE		26. TYPE ELECTRIC AND OTHER LOGS RUN <u>none</u>	
27. WAS WELL CORED		28. CASING RECORD (Report all strings set in well)	
29. LINER RECORD		30. TUBING RECORD	
31. PERFORATION RECORD (Interval, size and number) <u>OH 3230 - 3580</u>		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC. DEPTH INTERVAL (MD) <u>3230 - 3580</u> AMOUNT AND KIND OF MATERIAL USED <u>1500 gals 15% LSTAE</u>	
33. PRODUCTION		34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) <u>Sold</u>	
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 <u>M.E. [Signature]</u>		TITLE <u>Staff Supervisor</u>	
DATE <u>3-10-70</u>		TEST WITNESSED BY <u>Mr. W.E. Tucker</u>	

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

INSTRUCTIONS

Excerpts: 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 16: 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 23: 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: "Seeds 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.)

31. SUMMARY OF POROUS ZONES:

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

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.
-----------	-----	--------	-----------------------------

38.

GEOLOGIC MARKERS

NAME	TOP	
	MEAS. DEPTH	TRUE VERT. DEPTH

Yolla
San River

2870
3173