

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE

(See other instructions on reverse side)

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

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

5. LEASE DESIGNATION AND SERIAL NO.

NM 0766

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Carlson "B"

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Justin - Blinebry

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

Sec. 23, T25S, R37E

12. COUNTY OR PARISH

Lea

13. STATE

New Mexico

18. ELEVATIONS (DF, RKB, RT, GR, ETC.)*

3086 DF

19. ELEV. CASINGHEAD

3075

23. INTERVALS DRILLED BY

0-5965

ROTARY TOOLS

CABLE TOOLS

25. WAS DIRECTIONAL SURVEY MADE

NC

27. WAS WELL CORED

NO

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

UNION TEXAS PETROLEUM

3. ADDRESS OF OPERATOR

1300 Wilco Building, Midland, Texas

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

At surface

660' FSL & 330' TEL, Sec. 23, T25-S, R-37-E

At top prod. interval reported below

At total depth

14. PERMIT NO.

DATE ISSUED

15. DATE SPUDDED

2/1/66 W.O.

16. DATE T.D. REACHED

17. DATE COMPL. (Ready to prod.)

2/9/66

20. TOTAL DEPTH, MD & TVD

5965

21. PLUG, BACK T.D., MD & TVD

5806

22. IF MULTIPLE COMPL., HOW MANY*

Two

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*

Blinebry - 5287-5557

26. TYPE ELECTRIC AND OTHER LOGS RUN

Induction-Electric, Microlog, Gamma Ray-Neutron, Gamma Correlation

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	48	566	17 1/2	500 sax	
9-5/8	36 & 40	3334	12 1/2	1850 sax	
7	20 & 23	5965	8-3/4	540 sax	

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					2-3/8	5548	

31. PERFORATION RECORD (Interval, size and number)

5287, 5305, 5321, 5333, 5340, 5353, 5358, 5382, 5389, 5401, 5420, 5431, 5440, 5461, 5471, 5484, 5491, 5511, 5543, 5557;
20 - 0.36" hole

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
5287-5557	1500 gal. 15% acid
	30,000 gal gelled brine +
	40,700# sand

33.* PRODUCTION

DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)					WELL STATUS (Producing or shut-in)	
2/9/66		Flow					Producing	
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO	
2/10/66	18	20/64	→	147	482	17	3280	
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)		
600	1000	→	195.5	641	22.6	38		

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)

Vented during test.

TEST WITNESSED BY

R. S. Guenther

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

TITLE

Agent

DATE

2/22/66

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

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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.	38. GEOLOGIC MARKERS	
				NAME	TOP
				MEAS. DEPTH	TRUE VERT. DEPTH