

5-USGS
1-FILEUNITED 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 *

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 GETTY OIL COMPANY							
3. ADDRESS OF OPERATOR P. O. BOX 249, HOBBS, NEW MEXICO 88240							
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 660' FNL and 1880' FEL, SECTION 24 At top prod. interval reported below At total depth							
14. PERMIT NO.			DATE ISSUED				
RECOMPLETE							
15. DATE SCHEDULED 12-20-72		16. DATE T.D. REACHED		17. DATE COMPL. (Ready to prod.) 12-29-72		18. ELEVATIONS (DF, RKB, T, GR, ETC.)* 3083 D.F.	
20. TOTAL DEPTH, MD & TVD		21. PLUG, BACK T.D., MD & TVD 5765		22. IF MULTIPLE COMPL., HOW MANY*		23. INTERVALS DRILLED BY	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 5031 - 5639 BLINEBRY							
26. TYPE ELECTRIC AND OTHER LOGS RUN NONE							
28. CASING RECORD (Report all strings set in well)							
CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING			RECORD
NO CHANGE							AMOUNT PULLED
29. LINER RECORD							
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	25. WAS DIRECTIONAL SURVEY MADE	
					2"	27. WAS WELL CORED	
31. PERFORATION RECORD (Interval, size and number) 5031, 39, 40, 46, 47; 5139, 40, 41, 42, 55, 56, 58, 59, 63, 39, 87, 89, 91; 5277, 80, 81, 89, 90, 96, 97; 5310, 11, 37, 43, 45, 46, 75, 80, 89, 90, 5404, 06, 17, 33, 34, 48, 51, 73, 74, 82, 83; 5523, 24, 35, 36, 54, 56, 87, 88; 5632, 33, & 39 (59)							
32. ACID, SHOT, FRAC							
DEPTH INTERVAL (MD)				AMOUNT AND KIND OF MATERIAL USED			
5031 - 5639				87,600 gals. gelled water			
				112,000 # 20-40 Sand			
				2,000 gal. acid.			
33.* PRODUCTION							
DATE FIRST PRODUCTION 1-5-73		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) FLOWING					
DATE OF TEST 1-7-73	HOURS TESTED 24	CHOKE SIZE 32/64	PROD'N. FOR TEST PERIOD	OIL—BBL. 40	GAS—MCF. 503	WELL STATUS (Producing or shut-in) PRODUCING	
FLOW. TUBING PRESS. 150	CASING PRESSURE 600	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO 12,575	OIL GRAVITY-API (CORR.) 39.1
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) SOLD							
35. LIST OF ATTACHMENTS							
36. I hereby certify that the foregoing and attached information is complete and correct as determined from available records							
SIGNED C. L. WADE			TITLE AREA SUPERINTENDENT				
DATE 1-8-73							

*(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 83, 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			38. GEOLOGIC MARKERS		
FORMATION	TOP	BOTTOM	NAME	TOP MEAS. DEPTH	TRUE VERT. DEPTH