

SUBMIT ORIGINAL WITH 5 COPIES

Case Designation and Serial No.

NM-10934

# WELL COMPLETION OR RECOMPLETION REPORT AND LOG\*

1a. Type of Well: OIL ☒ WELL GAS ☐ WELL DRY ☐ OTHER ☐  
1b. Type of Completion: NEW ☐ WORK ☐ DEEPEN ☐ PLUG ☐ DIFF. ☐ OTHER RECOMPLETION  
WELL OVER N BACK RESVR.

6. If Indian, Alottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and Number  
FRISTOE, C. C. -A- FED. NCT-1

2. Name of Operator  
TEXACO EXPLORATION & PRODUCTION INC.

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3. Address and Telephone No. 15 SMITH ROAD, MIDLAND, TX 79705 915-687-737

9. API Well No.

3002521412

4. Location of Well (Report location clearly and in accordance with any State requirements.)

At Surface

Unit Letter E : 2080 Feet From The NORTH Line and 660 Feet From The WEST Line

At proposed prod. zone

10. Field and Pool, Exploratory Area  
LANGLIE MATTIX 7 RVRS QN GRAYBURG

11. SEC., T., R., M., or BLK. and Survey or Area  
Sec. 35, Township 24S, Range 37E

At Total Depth

14. Permit No.

Date Issued

12. County or Parish

LEA

13. State

NEW MEXICO

15. Date Spudded  
5/23/2002

16. Date T.D. Reached

17. Date Compl. (Ready to Prod.)  
5/30/2002

18. Elevations (Show whether DF, RT, GR, etc.)  
3201' KB

19. Elev. Casinhead

20. Total Depth, MD & TVD  
5850'

21. Plug Back T.D., MD & TVD

22. If Multiple Compl., How Many\*

23. Intervals Rotary Tools  
Drilled By -->

CableTools

24. Producing Interval(s), Of This Completion -- Top, Bottom, Name (MD and TVD)\*

3547'-3630' GRAYBURG

25. Was Directional Survey Made

No

26. Type Electric and Other Logs Run

GR-CNL-CCL

27. Was Well Cored

No

28. CASING RECORD (Report all Strings set in well)

CASING SIZE & GRADE	WEIGHT LB./FT.	DEPTH SET	HOLE SIZE	CEMENT RECORD	AMOUNT PULLED
			NO CHANGE		

29. LINER RECORD

30. TUBING RECORD

SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN	SIZE	DEPTH SET	PACKER SET
					2 1/16"	3660'	

31. Perforation record (interval, size, and number)

3547-60, 3565--77, 3584-3608, 3621-3630' (5 RUNS)

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

DEPTH INTERVAL AMOUNT AND KIND OF MATERIAL USED

3547-3630' ACIDIZE W/3000 GALS 15% HCL ACID  
& 2000 GALS 20% HCL ACID

33. PRODUCTION

Date First Production 6/8/2002		Production Method (Flowing, gas lift, pumping - size and type pump) PUMPING (ROD PUMP)				Well Status (Prod. or Shut-in) PROD	
Date of Test 6-26-02	Hours tested 24 HRS	Choke Size	Prod'n For Test Period	Oil - Bbl. 3	Gas - MCF 0	Water - Bbl. 37	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

36. I hereby certify that the foregoing is true and correct.

SIGNATURE *J. Denise Leake* TITLE Regulatory Specialist

DATE 7/2/2002

TYPE OR PRINT NAME J. Denise Leake

*Kg*