

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 *

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 Tidewater Oil Company						5. LEASE DESIGNATION AND SERIAL NO. LC - 032650 (b)	
3. ADDRESS OF OPERATOR Box 249, Hobbs, New Mexico						6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 330' FSL, 1650' FEL, Sec. 24, T25S, R37E At top prod. interval reported below At total depth						7. UNIT AGREEMENT NAME	
14. PERMIT NO.						12. COUNTY OR PARISH Lea	
DATE ISSUED						13. STATE New Mexico	
15. DATE SHUDDERED 5-14-65		16. DATE T.D. REACHED 5-31-65		17. DATE COMPL. (Ready to prod.) 6-12-65		18. ELEVATIONS (DF, RNB, RT, GR, ETC.)* 3081 RNB	
19. ELEV. CASINGHEAD 3070		20. TOTAL DEPTH, MD & TVD 5650		21. PLUG, BACK T.D., MD & TVD 5614		22. IF MULTIPLE COMPL., HOW MANY*	
23. INTERVALS DRILLED BY		24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 5342 - 5463 Blinebry (MD)		25. WAS DIRECTIONAL SURVEY MADE No		26. TYPE ELECTRIC AND OTHER LOGS RUN GR/Sonic, Laterlog, Micro-laterolog and GR/Tie-in logs	
27. WAS WELL CORED No		28. CASING RECORD (Report all strings set in well)		29. LINER RECORD		30. TUBING RECORD	
CASING SIZE		WEIGHT, LB./FT.		DEPTH SET (MD)		HOLE SIZE	
7-5/8"		26.4		903'		11"	
4-1/2"		11.6		5649'		6-3/4"	
CEMENTING RECORD		AMOUNT PULLED		SIZE		DEPTH SET (MD)	
400 sacks		None		2-3/8		5317	
1100 sacks		None		PACKER SET (MD)		5247	
31. PERFORATION RECORD (Interval, size and number) One 3/8" hole @ 5342, 5347, 5357, 5370, 5377, 5394, 5404, 5411, 5416, 5449, 5453, 5463.		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.		DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED	
				5342 - 5463		24,000 gals. lse. oil and 48,000# sand with 1/20# Adomite per gal. 1,500 gal. NE acid.	
33. PRODUCTION		DATE FIRST PRODUCTION 6-12-65		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Flow		WELL STATUS (Producing or shut-in) Producing	
DATE OF TEST 6-13-65		HOURS TESTED 24		CHOKE SIZE 11/64		PROD'N. FOR TEST PERIOD 144	
FLOW, TUBING PRESS. 650		CASING PRESSURE Per.		CALCULATED 24-HOUR RATE 39.6		OIL—BBL. 144	
GAS—MCF. 10		WATER—BBL. -		OIL GRAVITY-API (CORR.) 39.6		34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Sold	
35. LIST OF ATTACHMENTS Schlumberger Sonic log-Gamma Ray, Laterolog, Microlaterolog		36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records		SIGNED _____		TITLE Area Engineer	
DATE 6-14-65							

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

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 23, below regarding separate reports for separate completions. If not filed prior to the time this summary record is submitted, the following instructions apply.

and data 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 completions), indicate the zone number.

Suppose that you have 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 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.)

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