Form 9-330
(Rev. 5-63)

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.

AUG 2 11 59 AM '67

WELL COMPLETION OR RECOMPLETION REPORT AND LOG*

5. LEASE DESIGNATION AND SERIAL NO.: LC 032582 (b)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME:

1a. TYPE OF WELL: OIL WELL [X] GAS WELL [ ] DRY [ ] Other

b. TYPE OF COMPLETION: NEW WELL [X] WORK OVER [ ] DEEP-EN [ ] PLUG BACK [ ] DIFF. RESVR. [ ] Other

7. UNIT AGREEMENT NAME: NMFU

8. FARM OR LEASE NAME: Wells B-1

2. NAME OF OPERATOR: Continental Oil Company

9. WELL NO.: 3

3. ADDRESS OF OPERATOR: Box 460, Hobbs, New Mexico 88240

10. FIELD AND POOL, OR WILDCAT: Langlie Mattix Pool

4. LOCATION OF WELL (*Report location clearly and in accordance with any State requirements*)*
At surface: 660' FNL & 1650' FWL, Sec. 1, T-26S, R-36E, Lea County, New Mexico.
At top prod. interval reported below: Same
At total depth: Same

11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA: Sec. 1, T-26S, R-36E

14. PERMIT NO. | DATE ISSUED

12. COUNTY OR PARISH: Lea | 13. STATE: N.M.

15. DATE SPUDDED	16. DATE T.D. REACHED	17. DATE COMPL. (*Ready to prod.*)	18. ELEVATIONS (DF, RKB, RT, GR, ETC.)*	19. ELEV. CASINGHEAD
12-10-64	3-23-65	4-22-66	3265 DF	3252

20. TOTAL DEPTH, MD & TVD	21. PLUG, BACK T.D., MD & TVD	22. IF MULTIPLE COMPL., HOW MANY*	23. INTERVALS DRILLED BY	ROTARY TOOLS	CABLE TOOLS
13,650	4,100		→	0-TD	-

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*: Seven Rivers 3270-3290

25. WAS DIRECTIONAL SURVEY MADE: No

26. TYPE ELECTRIC AND OTHER LOGS RUN: Gamma Ray Neutron, Dual Induction Laterolog & Dipmeter

27. WAS WELL CORED: No

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	1222	17 1/2	1095 sx. Class "C"	-
9 5/8"	36 & 40	4350	12 1/2	1050 sx. Class "C"	-

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)
None				

30. TUBING RECORD

SIZE	DEPTH SET (MD)	PACKER SET (MD)
2 7/8"	3272	None

31. PERFORATION RECORD (*Interval, size and number*)
3288, 3286, 3266, 3252, 3249, 3230 & 3217 w/2 JSPF.

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
3217-3288	750 gals. HCL Acid

33.* PRODUCTION

DATE FIRST PRODUCTION	PRODUCTION METHOD (*Flowing, gas lift, pumping—size and type of pump*)	WELL STATUS (*Producing or shut-in*)
4-22-66	Pumping	Producing

DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD →	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
4-22-66	24	Open		36	18	280	500

FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE →	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)
-	-		36	18	280	36

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

TEST WITNESSED BY: B. K. Rampley

35. LIST OF ATTACHMENTS: None

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records

SIGNED Jesse D. Hobbs TITLE Supervising Engineer DATE 8-16-67

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

USGS-4 ATL-Res-2 CFEV-Mid-2 PAN AM-Hobbs-2 FILE

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.
Devonian	10247	10265	Open 1 hr. good blow decr. to wk. in 1 hr. GTS 30". Rec. 1000' WB, 120' SGCM 30 ISIP 4426, FP 472-472, 120" FISP 4426 HP 4578-4556.
Fusselman	11250	11340	Open 1 hr., rec. 1000' WB, 454' G & sul. cut M, 1100' GC sed. wtr. 5" ISIP 4382 FP 779-1122, FSIP 4317 HP 5173-5173.
Fusselman	11590	11677	Open 90 min., rec. 1000' WB, 5922' sul. wtr. 5" ISIP 4705 FP 945-3101 60" FSIP 4672 HP 5488-5488.
Waddell	12970	13042	Open 1 hr., nitrogen blanket, no blow. Rec. 10' M, 60" ISIP 1145 FP 780-780 60" FSIP 865 HP 6604-6583.
Ellenburger	13185	13260	Open 1 hr. GTS 25", 325 MCF decr. to 40 MCF in 1 hr., rec. 90' GCM, 270' G & WCM 60" ISIP 4424 FP 865-865. 2 hr. FSIP 4338. HP 6730-6625.
Ellenburger	13255	13360	Open 1 hr. Gd. blo. throughout test, no gas. Rec. 80' M, 420 sul. cut M 60" ISP 4556. FP 965-965. 2 hr. FSIP 4556. HP 6715-6629.

38. GEOLOGIC MARKERS

NAME	TOP MEAS. DEPTH	TOP TRUE VERT. DEPTH
Yates	2714	
7-Rivers	2937	
Queen	3542	
Wolfcamp	7540	
Barnett	9110	
Mississippian	9368	
Woodford	9818	
Devonian	10231	
Fusselman	11090	
Montoya	11760	
Simpson	12126	
Ellenburger	13052	

U.S. GOVERNMENT PRINTING OFFICE: 1963—O-633036

NEW MEXICO OIL CONSERVATION COMMISSION

WELL LOCATION AND ACREAGE DEDICATION PLAT

Form C-102
Supersedes C-128
Effective 1-1-65

All distances must be from the outer boundaries of the Section.

Operator	Lease	Well No.
Continental Oil Co.	Wells B-1	13

Unit Letter	Section	Township	Range	County
C	1	25-S	36-E	Lea

Actual Footage Location of Well:
660 feet from the North line and 1650 feet from the West line

Ground Level Elev.	Producing Formation	Pool	Dedicated Acreage:
	Yates 7 Rivers	Jalmat	40 Acres

1. Outline the acreage dedicated to the subject well by colored pencil or hachure marks on the plat below.

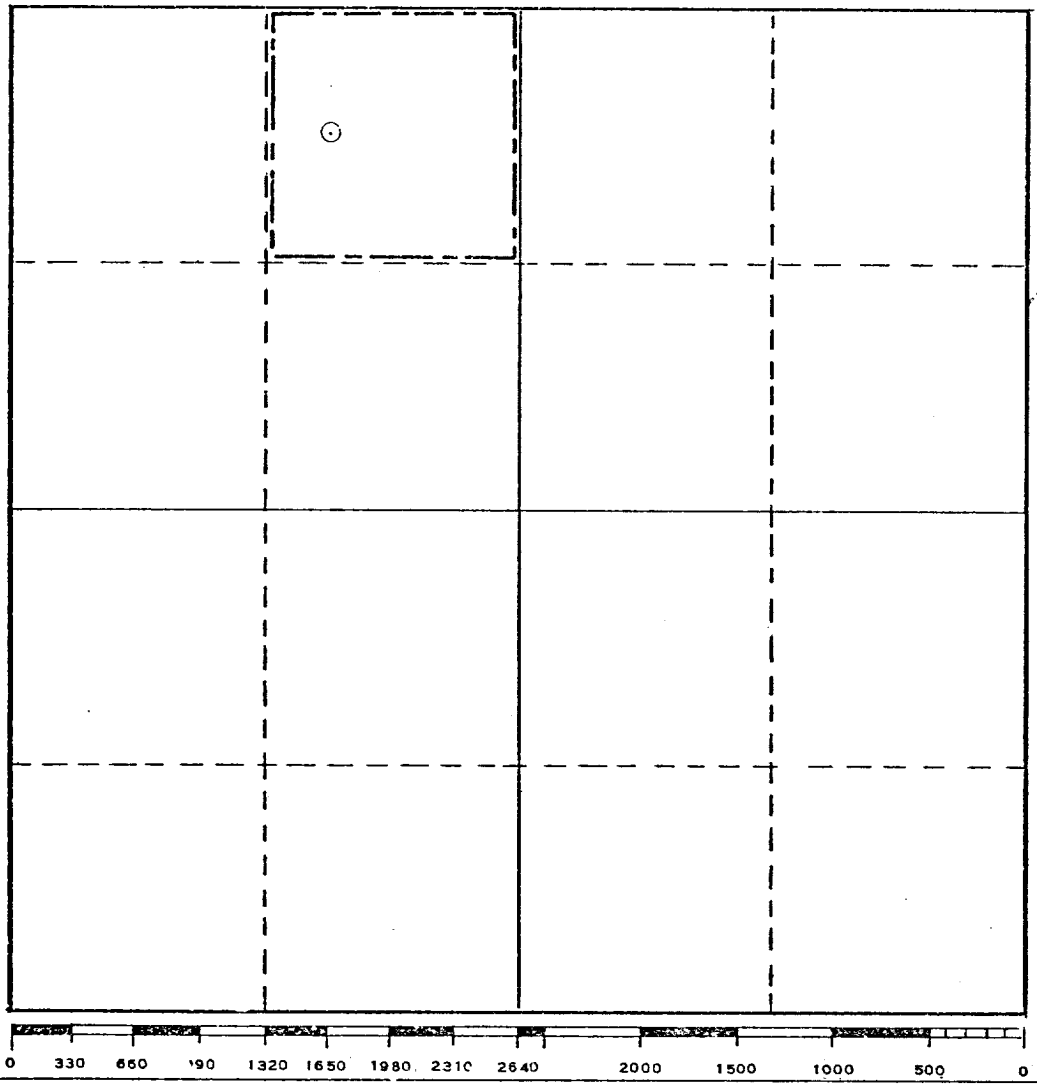
2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).

3. If more than one lease of different ownership is dedicated to the well, have the interests of all owners been consolidated by communitization, unitization, force-pooling. etc?

☐ Yes ☐ No If answer is "yes," type of consolidation _____

If answer is "no," list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if necessary.) _____

No allowable will be assigned to the well until all interests have been consolidated (by communitization, unitization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interests, has been approved by the Commission.



CERTIFICATION

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.

Name: Robert Bissell

Position: Adm. Section Chief

Company: Continental Oil Co

Date: 11-22-68

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my knowledge and belief.

Date Surveyed

Registered Professional Engineer and/or Land Surveyor

Certificate No.