

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.

5. LEASE DESIGNATION AND SERIAL NO.

NM-07054

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Mosey "A" Federal

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Wildcat

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

Sec. 7, T-25S, R-35E

12. COUNTY OR PARISH

Lea

13. STATE

New Mexico

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

Gulf Oil Corporation

3. ADDRESS OF OPERATOR

P. O. Box 980, Kermit, Texas

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

At surface 660 feet from North & West Lines

At top prod. interval reported below

At total depth

14. PERMIT NO.

DATE ISSUED

15. DATE SPUDDED

2-17-66

16. DATE T.D. REACHED

3-1-66

17. DATE COMPL. (Ready to prod.)

Completed dry

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

3363.7 GR

19. ELEV. CASINGHEAD

None

20. TOTAL DEPTH, MD & TVD

P&A

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

P&A

22. IF MULTIPLE COMPL., HOW MANY*

None

23. INTERVALS DRILLED BY

→

ROTARY TOOLS

85' to 5664'

CABLE TOOLS

0 - 85'

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

Completed dry

25. WAS DIRECTIONAL SURVEY MADE

No

26. TYPE ELECTRIC AND OTHER LOGS RUN

Sonic Log - Gamma Ray & Laterolog

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
8-5/8"	24#	368'	12-1/4"	175 sx reg neat w/2% CaCl ₂	None

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
None					None		

31. PERFORATION RECORD (Interval, size and number)

None

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
None	

33.*

PRODUCTION

DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)					WELL STATUS (Producing or shut-in)	
None							P&A	
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	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

Deviation test, Sonic Log - Gamma Ray & Laterolog

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

SIGNED ORIGINAL H. F. SWANNACK TITLE Area Production Manager DATE May 25, 1966
SIGNED BY: H. F. Swannack

*(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 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.)

61.2
62.7
63.8

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	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH	TRUM VERT. DEPTH
Kelly Bushing Sand & Red Bed Anhyd. & Dolo. Salt & Anhyd. Shale Sand	12 888 1250 5505 5540	12 888 1250 5505 5540 5664		Rustler Base of Salt Top of Delaware Top of Sand		888 5200 5505 5540

HOBBS OFFICE O. C. C.

WELL NAME AND NUMBER Mounsey "A" Federal No. 1

MAY 31 2 08 PM '66

LOCATION Unit D, Sec. 7, T-25S, R-35E, Lea County, New Mexico
(New Mexico give U,S,T&R; Texas give S,Blk.,Surv.& Twp.when required)

OPERATOR GULF OIL CORPORATION

DRILLING CONTRACTOR Capitan Drilling Company, Inc.

The undersigned hereby certifies that he is an authorized representative of the drilling contractor who drilled the above-described well and that he has conducted deviation tests and obtained the following results:

<u>Degrees @ Depth</u>	<u>Degrees @ Depth</u>	<u>Degrees @ Depth</u>	<u>Degrees @ Depth</u>
0 - 88'			
$\frac{1}{8}$ - 361'			
$\frac{3}{4}$ - 1381'			
$\frac{3}{4}$ - 2378'			
I - 2875'			
$I\frac{1}{8}$ - 3375'			
$2\frac{1}{8}$ - 3550'			
2 - 3942'			
$I\frac{1}{4}$ - 4288'			
3 - 5319'			
3- 5453			

Drilling Contractor CAPITAN DRILLING COMPANY, INC.

By *Maurice L. Smith*

Subscribed and sworn to before me this 7th day of March, 19 66

My Commission Expires:
June 1, 1967

Opal M. Brock
Notary Public Opal M. Brock
Ector County, Texas