

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.

Federal LC - 057180

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

Stuart Langlie Mattix Unit

8. FARM OR LEASE NAME

9. WELL NO.

127

10. FIELD AND POOL, OR WILDCAT

Langlie Mattix

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

Sec. 10, 25S, 37E

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 Water Injection

b. TYPE OF COMPLETION:

NEW
WELL ☒WORK
OVER ☐LEAF-
IN ☐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 1315' FNL & 100' FWL

At top prod. interval reported below

At total depth

14. PERMIT NO.

DATE ISSUED

9-25-68

15. DATE SPUDDED

10-31-68

16. DATE T.D. REACHED

11-11-68

17. DATE COMPL. (Ready to prod.)

11-19-68

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

3155' KB

19. ELEV. CASINGHEAD

20. TOTAL DEPTH, MD & TVD

3550'

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

3515'

22. IF MULTIPLE COMPL.,
HOW MANY *

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23. INTERVALS
DRILLED BY

ROTARY TOOLS

Rotary

CABLE TOOLS

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

3375' - 3507'

25. WAS DIRECTIONAL
SURVEY MADE

No

26. TYPE ELECTRIC AND OTHER LOGS RUN

GRN

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"	24.00	1325'	11"	550 sx circulated	None
5-1/2"	14.00	3550'	7-7/8"	200 sx TSITC 2225'	None

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
None					2-3/8"	3286'	3286'

31. PERFORATION RECORD (Interval, size and number)

3375-77', 3397-99', 3426-28', 3454-56',
3479-81', 3505-07', w/2 - 0.45" JHPF
(24 holes)

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
3375' - 3507'	3,000 gals 15% NEA

33.* Water Injection Well

PRODUCTION

DATE FIRST PRODUCTION

PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)

WELL STATUS (Producing or
shut-in)

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

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

SIGNED

H. F. Swannack

TITLE Area Production ManagerDATE November 20, 1968

*(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 38, below regarding separate reports for separate completions.

It is not necessary 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.), formations, 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 3b.

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 22: 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 23 and 24: If this well is completed, *see* instructions for completion.

interval, or intervals, top(s), bottom(s) and name(s) (if any) for only the interval reported in item 83. 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 24: *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:		38. GEOLOGIC MARKERS	
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	DEPTH	TRUE VERT. DEPTH
Base Santa Rosa	0	685	
Yates	11	1047	
Queen	2700	2475	
	3414	2700	
		2975	
		3414	