

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE

(See other in-
structions on
reverse side)Form approved.
Budget Bureau No. 42-R355.5.

5. LEASE DESIGNATION AND SERIAL NO.

LC-956958

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Federal "X"

9. WELL NO.

10. FIELD AND POOL, OR WILDCAT

Lunglie Mattix Queen

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

Sec. 15, T-25-N, R-37-E

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

Mobil Oil Corporation

3. ADDRESS OF OPERATOR

Box 633, Midland, Texas

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

At surface Unit 1, 650' FOL, 1162' FOL of Sec. 15, T-25-N, R-37-E

At top prod. interval reported below 1633

At total depth 3244-3572

3650

14. PERMIT NO.

DATE ISSUED

June 8, 1969

15. DATE SPUDDED

6-12-69

16. DATE T.D. REACHED

6-20-69

17. DATE COMPL. (Ready to prod.)

6-25-69

Dry

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

3080'

19. ELEV. CASINGHEAD

20. TOTAL DEPTH, MD & TVD

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

3615

22. IF MULTIPLE COMPL.,
HOW MANY*

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

3244-3572, 7 Rivers Queen

25. WAS DIRECTIONAL
SURVEY MADE

Yes

26. TYPE ELECTRIC AND OTHER LOGS RUN

Gr-Collar-Corr. Log

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"	20#	1103	12-1/4"	600 lbs	-
5-1/2"	15.5 & 17#	3650	7-7/8"	700 lbs	-

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)

30. TUBING RECORD

31. PERFORATION RECORD (Interval, size and number)

(3244-57 1-1/2"), (3280-3335, 3341-3353 2-1/2")
(3356-65, 3367-72, 3383-91, 3406-08, 3447-51,
3474-78 1-1/2") (3463, 3486, 3535, 3564 & 3572
2-1/2")

69 Total Holes

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
3244-3572	Spotted 500 gals. HCl acid

33.* When load oil recovered no oil

PRODUCTION

DATE FIRST PRODUCTION

Dry

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

2" x 1-1/2" x 20'

WELL STATUS (Producing or
shut-in)

Hold for shut-in water fl.

DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
8-1-69	24	2"	→	0	17	0	-
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

1 - Summary of Operations

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

SIGNED

TITLE

Authorized Agent

DATE

October 2, 1969

*(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.)

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	TRUE VERT. DEPTH
Rock and Red shales	0	602				
Red Beds & Anhyd.	602	1002				
Anhyd. & Salt	1002	2645				
Anhyd. & Gyp.	2645	2720				
Dolomite	2720	2905				
Anhyd. & Lias	2905	2955				
Lias	2955	3480				
Lias & Liana	3480	3556				
Lias	3556	3550 TD				