

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE

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

5. LEASE DESIGNATION AND SERIAL NO.

6. LAND LOTTERY OR TRIBE NAME

## WELL COMPLETION OR RECOMPLETION REPORT AND LOG\*

1a. TYPE OF WELL: OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> DRY <input type="checkbox"/> Other _____		7. UNIT AGREEMENT NAME <u>NMFU</u>			
b. TYPE OF COMPLETION: NEW WELL <input checked="" type="checkbox"/> WORK OVER <input type="checkbox"/> DEEP-EN <input type="checkbox"/> PLUG BACK <input type="checkbox"/> DIFF. RESVR. <input type="checkbox"/> Other _____		8. FARM OR LEASE NAME <u>JACK B-27</u>			
2. NAME OF OPERATOR <u>Continental Oil Company</u>		9. WELL NO. <u>3</u>			
3. ADDRESS OF OPERATOR <u>Box 460, Hobbs, New Mexico 88240</u>		10. FIELD AND POOL, OR WILDCAT <u>JUSTIS BLINEBRY</u>			
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface <u>1980' FSL + 330' FEL of Sec 27, T-245,</u> At top prod. interval reported below <u>R-37E,</u> At total depth _____		11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA <u>SEC. 27, T-245, R-37E</u>			
14. PERMIT NO. _____		DATE ISSUED _____			
15. DATE SPULDED <u>10-17-69</u>		16. DATE T.D. REACHED <u>11-1-69</u>			
17. DATE COMPL. (Ready to prod.) <u>11-6-69</u>		18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* <u>3221' DF</u>			
19. ELEV. CASINGHEAD <u>5700</u>		20. TOTAL DEPTH, MD & TVD <u>5661</u>			
21. PLUG, BACK T.D., MD & TVD <u>5661</u>		22. IF MULTIPLE COMPL., HOW MANY* <u>1</u>			
23. INTERVALS DRILLED BY <u>→</u>		ROTARY TOOLS <input checked="" type="checkbox"/> CABLE TOOLS <input type="checkbox"/>			
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* <u>5449' - 5647 Blinebry</u>		25. WAS DIRECTIONAL SURVEY MADE <u>yes</u>			
26. TYPE ELECTRIC AND OTHER LOGS RUN <u>Dual Induction, Gamma Ray, SNP &amp; GR/Cellar</u>		27. WAS WELL CORED <u>NO</u>			
28. CASING RECORD (Report all strings set in well)					
CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
<u>8 5/8"</u>	<u>24</u>	<u>984</u>	<u>12 1/4</u>	<u>440</u>	<u>NONE</u>
<u>5 1/2"</u>	<u>14</u>	<u>5700</u>	<u>7 7/8</u>	<u>510</u>	<u>NONE</u>
29. LINER RECORD					
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	
30. TUBING RECORD					
SIZE	DEPTH SET (MD)	PACKER SET (MD)			
<u>2 3/8</u>	<u>5628</u>				
31. PERFORATION RECORD (Interval, size and number)					
<u>5449', 5451', 5453', 5468', 5470',</u> <u>5472', 5610', 5636', 5642', 5644',</u> <u>+ 5647.</u>					
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.					
DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED			
<u>5449-5472</u>		<u>4000 gal. 15% LST-NE</u>			
<u>5610-5647</u>		<u>1500 gal. 15% LST-NE</u> <u>+ 20,000 gal. water 30,000</u> <u># sand, frac.</u>			
33. PRODUCTION					
DATE FIRST PRODUCTION <u>11/11/69</u>		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) <u>Pumping</u>			WELL STATUS (Producing or shut-in) <u>Producing</u>
DATE OF TEST <u>12-4-69</u>	HOURS TESTED <u>24</u>	CHOKE SIZE <u>→</u>	PROD'N. FOR TEST PERIOD <u>→</u>	OIL—BBL. <u>107</u>	GAS—MCF. <u>90</u>
FLOW. TUBING PRESS. <u>→</u>	CASING PRESSURE <u>→</u>	CALCULATED 24-HOUR RATE <u>→</u>	OIL—BBL. <u>107</u>	GAS—MCF. <u>90</u>	WATER—BBL. <u>107</u>
					OIL GRAVITY-API (CORR.) <u>39</u>
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) <u>Sold</u>					
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 \_\_\_\_\_ TITLE Staff Supervisor DATE 12-8-69

\*(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 33.

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 13: 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 each interval.

Item 29: "Stacks Complete". 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; CORREL 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.	38. GEOLOGIC MARKERS	
				NAME	TOP MEAS. DEPTH TRUE VERT. DEPTH
				RUSTLER	1002
				SALADO	1108
				YATES	2502
				QUEEN	3364
				GLORIETA	4938
				BLINEBRY MARKER	5402