

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See instructions on
reverse side)Form approved.
Budget Bureau No. 42-R353.5.

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 Continental Oil Company						5. LEASE DESIGNATION AND SERIAL NO. NM-7486	
3. ADDRESS OF OPERATOR Box 460, Hobbs, New Mexico 88240						6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 825' F&M 1750' FEL, Sec. 29, T-24S, R-37E Sec 29, T-24S, R-37E At top prod. interval reported below Same At total depth Same						7. UNIT AGREEMENT NAME	
14. PERMIT NO.						DATE ISSUED	
15. DATE SPUDDED 11-1-70						16. DATE T.D. REACHED 11-14-70	
17. DATE COMPL. (Ready to prod.) 11-21-70						18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* DT 3283'	
19. ELEV. CASINGHEAD						20. TOTAL DEPTH, MD & TVD 3630'	
21. PLUG, BACK T.D., MD & TVD						22. IF MULTIPLE COMPL., HOW MANY*	
23. INTERVALS DRILLED BY						ROTARY TOOLS	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 3429-3612' Packer						25. WAS DIRECTIONAL SURVEY MADE Yes	
26. TYPE ELECTRIC AND OTHER LOGS RUN 1-H-URM						27. WAS WELL CORED No	
28. CASING RECORD (Report all strings set in well)							
CASING SIZE		WEIGHT, LB./FT.		DEPTH SET (MD)		HOLE SIZE	
8 7/8"		20#		770'		12 1/4"	
5 1/2"		14#		2630'		7 7/8"	
29. LINER RECORD							
SIZE		TOP (MD)		BOTTOM (MD)		SACKS CEMENT*	
30. TUBING RECORD							
SIZE		DEPTH SET (MD)		PACKER SET (MD)			
2 3/4"		3435'					
31. PERFORATION RECORD (Interval, size and number)							
3429-3443-3475-3506- 3521-3538-3591 & 3612' with 2 GSPF.							
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.							
DEPTH INTERVAL (MD)				AMOUNT AND KIND OF MATERIAL USED			
3429-3612				1125 cc Gels. 25 PC. 2500 cc Gels. 1000 cc Gels. 1000 cc Gels.			
33.* PRODUCTION							
DATE FIRST PRODUCTION 11-22-70		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Pumping				WELL STATUS (Producing or shut-in) Producing	
DATE OF TEST 12-3-70		HOURS TESTED 24		CHOKE SIZE 5		PROD'N. FOR TEST PERIOD 103	
FLOW. TUBING PRESS. 250#		CASING PRESSURE 250#		CALCULATED 24-HOUR RATE 103		OIL—BBL. 78	
						GAS—MCF. 33	
						WATER—BBL. 156	
						OIL GRAVITY-API (CORR.) 34	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Sold						TEST WITNESSED BY R. H. E. Youker	
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 M. E. Yeilding				TITLE Staff Supervisor		DATE 12-7-70	

*(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 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
				<i>Rustlin</i>	1185	
				<i>Arado</i>	1280	
				<i>Donnell</i>	2745	
				<i>Yard</i>	2915	
				<i>Y-Lenue</i>	3190	
				<i>Queen</i>	3547	

RECEIVED

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OIL CONSERVATION COMM.
HOBBS, N. M.