

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.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG*

1a. TYPE OF WELL: OIL WELL ☐ GAS WELL ☐ DRY ☐ Other <u>P X A</u>				7. UNIT AGREEMENT NAME _____	
b. TYPE OF COMPLETION: NEW WELL ☐ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other _____				8. FARM OR LEASE NAME Langlie "B" Federal	
2. NAME OF OPERATOR Amoco Production Company				9. WELL NO. 3	
3. ADDRESS OF OPERATOR P. O. Box 68, Hobbs, NM 88240				10. FIELD AND POOL, OR WILDCAT Langlie Mattix Queen	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 2130' FNL & 400' FWL Sec. 15 (Unit E, SW/4, NW/4) At top prod. interval reported below At total depth				11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA 15-25-37	
14. PERMIT NO.		DATE ISSUED		12. COUNTY OR PARISH Lea	
13. STATE NM					
15. DATE SPUDDED 5-12-78		16. DATE T.D. REACHED 5-21-78		17. DATE COMPL. (Ready to prod.) 7-6-78	
18. ELEVATIONS (DF, REB, RT, GR, ETC.)* 3116.7' GR		19. ELEV. CASINGHEAD			
20. TOTAL DEPTH, MD & TVD 3711'		21. PLUG, BACK T.D., MD & TVD 3664'		22. IF MULTIPLE COMPL., HOW MANY*	
23. INTERVALS DRILLED BY → 0-TD		24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* Dry hole			
25. WAS DIRECTIONAL SURVEY MADE No		26. TYPE ELECTRIC AND OTHER LOGS RUN Comp Neutron Formation Density; Dual Laterolog Micro SFL			
27. WAS WELL CORED No					
28. CASING RECORD (Report all strings set in well)					
CASING SIZE		WEIGHT, LB./FT.		DEPTH SET (MD)	
8-5/8"		24#		1100'	
5-1/2"		14#		3700'	
HOLE SIZE		CEMENTING RECORD		AMOUNT PULLED	
12-1/4"		550 SX Class C & filler			
7-7/8"		600 SX Class C Lo Dense			
29. LINER RECORD					
SIZE		TOP (MD)		BOTTOM (MD)	
SACKS CEMENT*		SCREEN (MD)			
30. TUBING RECORD					
SIZE		DEPTH SET (MD)		PACKER SET (MD)	
2-3/8"		3335'		3120	
31. PERFORATION RECORD (Interval, size and number)			32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.		
33. 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—BBL.	
FLOW. TUBING PRESS.		CANING PRESSURE		CALCULATED 24-HOUR RATE	
OIL—BBL.		GAS—MCF.		WATER—BBL.	
OIL GRAVITY-API (CORR.)		TEST WITNESSED BY			
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)					
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		Admin. Analyst		DATE	
Aug Mitchell				7-30-81	

*** (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:				38. GEOLOGIC MARKERS			
FORMATION		TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH	TRUE VERT. DEPTH
Queen		3368'	3546'	Oil Zone	Ruster Yates Queen	1075' 2900' 3324'	

RECEIVED

AUG 11 1981

OIL CONSERVATION DIV.