

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.

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

3. ADDRESS OF OPERATOR

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

At surface
1650 FSL x 660' FEL, Sec. 9 (Unit I, NE 1/4 SE 1/4)
At top prod. interval reported below

At total depth

14. PERMIT NO. DATE ISSUED

5. LEASE DESIGNATION AND SERIAL NO.

NM 037667

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

MYERS B FEDERAL RIAA

9. WELL NO.

10. FIELD AND POOL, OR WILDCAT

FOWLER BLINEBRY

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

9-24-37 NMPM

12. COUNTY OR PARISH

LEA

13. STATE

N.M.

15. DATE MOUNTED 16. DATE P.D. REACHED 17. DATE COMPL. (Ready to prod.) 18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 19. ELEV. CASINGHEAD

6-11-66 6-11-66 6-13-66 3293' RDB

20. TOTAL DEPTH, MD & TVD 21. PLUG. BACK T.D., MD & TVD 22. IF MULTIPLE COMPL., HOW MANY* 23. INTERVALS DRILLED BY 24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 25. WAS DIRECTIONAL SURVEY MADE

7996' 5920'

26. TYPE ELECTRIC AND OTHER LOGS RUN* 27. WAS WELL CORED

28. CASING RECORD (Report all strings set in well)

29. LINER RECORD 30. TUBING RECORD

31. PERFORATION RECORD (Interval, size and number) 32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

5610-12, 19-22, 39-41, 43-45, 52-54, 62-63 5610-5766

76-79, 84-86, 88-89, 96-98, 5722-24, 30-32, 39-40, 63-66 w/2SPF

2000 gal acid
Frac - 40000 gal gel time
40000# sand
3000# beads

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—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

TITLE

Area Supt

DATE

7-27-66

*(See Instructions and Spaces for Additional Data on Reverse Side)

INSTRUCTIONS

USGS-10
1- NSW
1- KWB
1- SUSP
1- R211