Form 9-330 (Rev. 5-63) SUBMIT IN DUPLICATE. Form approved. Budget Bureau No. 42-R355.5. UNITE\_ STATES (See other in-DEPARTMENT OF THE INTERIOR structions on reverse side) 5. LEASE DESIGNATION AND SERIAL NO. GEOLOGICAL SURVEY LC-032 339 IF INDIAN, ALLOTTEE OR TRIBE NAM WELL COMPLETION OR RECOMPLETION REPORT AND LOG\* 1s. TYPE OF WELL: WELL GAS WELL DRY 7. UNIT AGREEMENT NAME Other b. TYPE OF COMPLETION: WORK OVER DIFF. RESVR. WELL DEEP-EN PLUG DACK S. FARM OR LEASE NAME Other 2. NAME OF OPERATOR lat en moxico FIELD AND POOL, OR WILDCAT (Report location clearly and in accordance with any State requirements 4. LOCATION OF -lloper At sur and 1830' FEL of Sec 10 11. SEC., T., R., M., OF BLOCK AND S OR AREA reported below 14. PERMIT NO. DATE ISSUED 16. DATE T.D. REACHED | 17. DATE COMPL. (Ready to prod.) 15. DATE SPUDDED 18. ELEVATIONS (DF, RKB, RT, GR, ETC.) 3244919. ELEV. CASINGHEAD 10-72 2 -/-DEPTH, MD & TVD 21. PLUG, BACK T.D., MD & 20. TOTAL MULTIPLE COMPL., W MANY\* INTERVALS ROTARY TOOLS CABLE TOOLS 800 DRILLED BY N 24. PRODUCING INTERVAL(S), OF THIS -TOP, BOTTOM, NAME (MD AND TVD)\* 25. WAS DIRECTIONAL TOP-5228 SURVEY MADE For Bottom - 5740 no 26. TYPE ELECTRIC AND OTHER LOGS RUN WELL CORED 20 28. CASING RECORD (Report all strings set in well) CASING SIZE WEIGHT, LB./FT. DEPTH SET (MD) HOLE SIZE CEMENTING RECORD AMOUNT PULLED 54 20# 70 Circ-625 Sacks O Socka 29 LINER RECORD 30 TUBING RECORD SIZE TOP (MD) BOTTOM (MD) SACKS CEMENT SCREEN (MD) SIZE DEPTH SET (MD) PACKER SET (MD) 31. PERFORATION RECORD (Interval, size and number) 232,45,54;89,5300,12,20,38,43 ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC. DEPTH INTERVAL (MD) AMOUNT AND KIND OF MATERIAL USED 358; 5432, 5503; 5507; 5686; 5704; 5 5686 2600 gals 2890 NE ocid 708 5507 5708 and 5739 92L 2100 33.\* PRODUCTION 5232'-535? PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) -40,0000 11-c +80,000 # 24/40 DATE FIRST PRODUCTION ₽v Sond ROD'N. FOR TEST PERIOD HOURS TESTED CHOKE SIZE GAS-MCF OIL-BBL. WATER GAS-OLL BATIC -72 2-5 89 his 20 FLOW, TUBING PRESS. CASING PRESSURE CALCULATED 24-HOUR RATE OIL-WATER-BBL -BBL. GAS---MCF. OIL GRAVITY (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 ibert taul SIGNED / TITLE ( west DATE \*(See Instructions and Spaces for Additional Data on Reverse Side) 11565-4 File NMFU-4

871-233			II'S GOVERNMENT PRINTING DEFICE - 1963 O-593636		
				<u></u> ,	· . · .
	5245	Blinebry mar			
- · ·	4920	Glorieta			
•	3808	S. Andres			
	4825	Green			
	2796	った			
	2052	yates			
	2365	Tansill			
	1229	Solado			
	1120	Rustler			
TRUE VERT. DEPTH	MEAS. DEPTH	NAME			
	TOP		DESCRIPTION, CON	TOP	FORMATION
.*	GEOLOGIC MARKERS	38. GEOLOGI	(MARY OF POROUS ZONES: SHOW ALL INFORMAT ZONES OF FOROSITY AND CONTENTS THEREOF; CORED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEFTH INTERVAL TESTED, CUSHION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES	OROUS ZONES : ORTANT ZONES OF 1 AL TESTED, CUSHIO	37. SUMMARY OF POROUS ZONES: SHOW ALL IMPORTANT ZONES O DEFTH INTERVAL TESTED, CUSH
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a State agency, of copies to be le local Federal le, etc.), forma- till attachments sult local State chments. / the producing ately identified, tool.	ederal agency or and the number btained from, th all types electri t regulations. <i>L</i> uirements. Com- and in any atta l in item 24 show his form, adequa- ti the cementing ye.)	pes of lands and leases to either a Federal agency or a State agency, is concerning the use of this form and the number of copies to be w or will be issued by, or may be obtained from, the local Federal geologists, sample and core analysis, all types electric, etc.), forma- uble Federal and/or State laws and regulations. All attachments bed in accordance with Federal requirements. Consult local State s given in other spaces on this form and in any attachments. completion), so state in item 22, and in the producing ubmit a separate report (page) on this form, adequately identified, is the stage cementing and the location of the cementing tool.	tting a complete and correct well completion report and log on all ty ad/or State laws and regulations. Any necessary special instruction al, area, or regional procedures and practices, either are shown belo renored is submitted, copies of all currently available logs (drillers, record is submitted, copies of all currently available logs (drillers, urveys, should be attached hereto, to the extent required by applic requirements, locations on Federal or Indian land should be descri- tor separate production from more than one interval zone (multiple and name(s) (if any) for only the interval reported in item 33. S ely produced, showing the additional data pertinent to such interval lemental records for this well should show the details of any multiple port on this form for each interval to be separately produced. (Se	is designed for applicable Fede rly with regard See instructions the time this sum ests, and direction its form, see ite is no applicable for specific instruction hich elevation is this well is comp s. top(s), botton interval to be see interval to be see interval to be see	<b>General:</b> This form is designed for submit or both, pursuant to applicable Federal and submitted, particularly with regard to loc and/or State office. See instructions on it If not filed prior to the time this summary tion and pressure tests, and directional si- should be listed on this form, see item 35. Item 4: If there are no applicable State or Federal office for specific instructions. Item 78: Indicate which elevation is used interval, or intervals. top(s), bottom(s). for each additional interval to be separat Item 33: Submit a separate completion re

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INSTRUCTIONS

U.S. GOVERNMENT PRINTING OFFICE : 1963-0-683636

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