

RECEIVED
DISTRIBUTION
NAME
TITLE
ADDRESS
LAND OFFICE
OPERATOR

Form C-105
Revised 10-4-66

NEW MEXICO OIL CONSERVATION COMMISSION
WELL COMPLETION OR RECOMPLETION REPORT AND LOG

6. Indicate Type of Lease
Lease ☒ Fee ☐
7. Unit Agreement Name

E-1734

1. TYPE OF WELL

OIL WELL ☐ GAS WELL ☒ DRY ☐ OTHER

2. TYPE OF COMPLETION

NEW WELL ☒ WORK OVER ☐ DEEPEN ☐ PLUG BACK ☐ DIFF. REGRV. ☐ OTHER

Doyle Hartman

508 C & K Petroleum Building, Midland, Texas 79701

3. Location of Well

UNIT LETTER G LOCATED 2310 FEET FROM THE North LINE AND 1800 FEET FROM

East LINE OF SEC. 36 TWP. 24S RGE. 36E

4. Date Drilled 12-2-79 15. Date T.D. Reached 12-10-79 17. Date Compl. (Ready to Prod.) 12-18-79 18. Elevations (DF, RKB, RF, GR, etc.) 3265 G. L. 19. Elev. Casing Head 3265

20. Total Depth 3425 21. Plug Back T.D. 3199 22. If Multiple Compl., How Many 0 23. Intervals Drilled By Rotary Tools 0-3425 Cable Tools

24. Producing Interval(s), of this completion - Top, Bottom, Name

2810-2900 w/15 (Yates)

25. Type Electric and Other Logs Run

CDL-Neutron-GR, Forxo-Guard, GRN-CCL

26. Was Directional Survey Made

No

27. Was Well Cored

No

CASING RECORD (Report all strings set in well)

CASING SIZE	WEIGHT LB./FT.	DEPTH SET	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
12 1/4	28	442	12 1/4	300 (circ 77)	None
7 7/8	17	3425	7 7/8	650 (circ 75)	None

29. LINER RECORD

SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN

30. TUBING RECORD

SIZE	DEPTH SET	PACKER SET
2 3/8	2844	---

31. Production Interval(s) (Interval, size and number)

One shot each at: 2810, 2815, 2820, 2825, 2832, 2837, 2847, 2852, 2857, 2862, 2866, 2888, 2892, 2896, 2900

32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

DEPTH INTERVAL	AMOUNT AND KIND MATERIAL USED
2810-2900	A/4500 15% MCA
2810-2900	SWF/60,000 + 80,000

33. PRODUCTION

Date of Test	Hours Tested	Flow Rate	Prodn. Per Test Period	Oil - BBL	Gas - MCF	Water - BBL	Gas - Oil Ratio
12-16-79		Flowing					
12-18-79	24	20/64		---	264	---	---
Flow Test Pressure	Casing Pressure	Calculated 24-hr Rate	Oil - BBL	Gas - MCF	Water - BBL	Oil Gravity - API (Corr.)	
FTP= 164	FCP= 171		---	264	---	---	

34. Disposition of Gas (Sold, used for fuel, vented, etc.)

Vented

Test Witnessed By

J. Gray

35. List of Attachments

None

36. I hereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief.

SIGNED Michelle Hernandez

TITLE Assistant Office Manager

DATE 12-18-79