

COPY TO O. C. C.

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.

5. LEASE DESIGNATION AND SERIAL NO.

NM-0321613

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

South Mattix Unit Fed.

8. FARM OR LEASE NAME

South Mattix Unit Fed.

9. WELL NO.

39

10. FIELD AND POOL, OR WILDCAT

Fowler Upper Yeso

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

15-24-37

12. COUNTY OR
PARISH

Lea

13. STATE

NM

19. ELEV. CASINGHEAD

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

Amoco Production Company

3. ADDRESS OF OPERATOR

P. O. Box 68 Hobbs, NM 88240

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

At surface

1890' FNL & 2070' FEL, Sec. 15

At top prod. interval reported below (Unit G, SW/4, NE/4)

At total depth

14. PERMIT NO.

DATE ISSUED

15. DATE SPUDDED

12-27-79

16. DATE T.D. REACHED

1-28-80

17. DATE COMPL. (Ready to prod.)

4-9-80

18. ELEVATIONS (DF, RKB, RT, GR, ETC.)*

3257.1 RDB

20. TOTAL DEPTH, MD & TVD

6400'

21. PLUG, BACK T.D., MD & TVD

6357'

22. IF MULTIPLE COMPL.,
HOW MANY*

Dual

23. INTERVALS
DRILLED BYROTARY TOOLS
0-TD

CABLE TOOLS

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*

5117'-5638' Upper Yeso

25. WAS DIRECTIONAL
SURVEY MADE

No

26. TYPE ELECTRIC AND OTHER LOGS RUN

Comp Neutron Form Density; Dual Laterolog Micro SFL

27. WAS WELL CORED

Yes

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

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
9-5/8"	32.3#	1082'	12-1/4"	400 SX Lite; 150 SX C1 C	Circ 140 Sx
7"	20#, 23#, 26#	6400'	8-3/4"	1350 SX Class C	TCMT 90'

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					2-3/8"	5612'	6021'

31. PERFORATION RECORD (Interval, size and number)

5117'-5638' w/ 2 JSPF

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
5117'-5638'	20,000 gal 15% HCL acid

33.*

PRODUCTION

DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)					WELL STATUS (Producing or shut-in)	
3-23-80		Pumping					Shut-in	
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO	
4-9-80	24		→	22	115	19	5227	
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)		
		→	22	115	19			

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)

To be sold

TEST WITNESSED BY

35. LIST OF ATTACHMENTS

Logs mailed 3-27-80

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records

SIGNED

Bob Davis

TITLE Admin. Analyst

DATE 4-11-80

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

0+4-USGS, H

1-Hou

1-Susp

1-BD

1-Arco

1-Conoco

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. 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: 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
Upper Yeso	5117'	5638'	Oil & casing head gas	Upper Paddock Upper Yeso Tubb Drinkard	4844' 5108' 5826' 6084'	

RECEIVED
APR 22 1980
OIL CONSERVATION DIV.