

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. REGRV. ☐	Other ☐		
2. NAME OF OPERATOR		Eastern Petroleum Company							
3. ADDRESS OF OPERATOR		Box 291, Carmi, Illinois 62821							
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements):		At surface 2310' from south line, 990 from east line At top prod. interval reported below At total depth Same							
14. PERMIT NO.		DATE ISSUED		FEB 8 1968					
15. DATE SPUDDED		16. DATE T.D. REACHED		17. DATE COMPL. (Ready to prod.)		18. ELEVATIONS (DF, REB, RT, GR, ETC.)*		19. ELEV. CASINGHEAD	
11-13-67		11-15-67		12-5-67		5280 GL		5280	
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)*	
705				Single		Q-700		700-705	
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	
Gamma Ray - Neutron		No		Casing Size, Weight, Depth Set, Hole Size, Cementing Record, Amount Pulled		Liner Size, Top, Bottom, Screen, Depth Set, Packset		Tubing Size, Depth Set, Packset	
7"		20#		15		8 3/4"		5 sax	
4 1/2"		9.5#		700		6 1/4"		10 sax	
31. PERFORATION RECORD (Interval, size and number)		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.		33. PRODUCTION		34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)		35. LIST OF ATTACHMENTS	
Open Hole - 700-705		Natural Completion		Pumping - 1 1/2" x 6" Insert Pump		Used for fuel and vented		Deviation Survey & Log	
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	
1-5-68		Pumping - 1 1/2" x 6" Insert Pump		Shut-in		1-5-68		24	
CHOKE SIZE		PROD'N. FOR TEST PERIOD		OIL—BBL.		GAS—MCF.		WATER—BBL.	
2"		21		21		15		None	
FLOW. TUBING PRESS.		CASING PRESSURE		CALCULATED 24-HOUR RATE		OIL—BBL.		GAS—MCF.	
0		15#		21		21		15	
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records		TEST WITNESSED BY		DATE		SIGNED		TITLE	
		John Cunningham		January 26, 1968		Henry Fullop		President	

*(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 83, 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: 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 TOP	MEAS. DEPTH TALL VERT. DEPTH
Mancos	Surface	701	Shale, dark gray with minor sandstone & limestone	Mancos	Surface	Surface
Dakota	701	TD 701	Sandstone, white-tan, very fine, fine grained, fair porosity - OIL	Green Horn Greneros Dakota	612 682 701	612 682 701