

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other instructions 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 Eastern Petroleum Company							
3. ADDRESS OF OPERATOR P. O. Box 291, Carol, Illinois 62821							
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 2310 FNL; 2310 FNL At top prod. interval reported below Same At total depth Same							
14. PERMIT NO.				DATE ISSUED NOV 15 1968			
15. DATE SPUDDED May 18, 1968		16. DATE T.D. REACHED July 3, 1968		17. DATE COMPL. (Ready to prod.) August 20, 1968		18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 5240 GR	
19. ELEV. CASINGHEAD 5440		20. TOTAL DEPTH, MD & TVD 842		21. PLUG, BACK T.D., MD & TVD		22. IF MULTIPLE COMPL., HOW MANY? single	
23. INTERVALS DRILLED BY 0 - 842		24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* Open Hole 832-842		25. WAS DIRECTIONAL SURVEY MADE Yes		26. TYPE ELECTRIC AND OTHER LOGS RUN Widco-Electrical-Resistance & Gamma Ray	
27. WAS WELL CORED Yes		28. CASING RECORD (Report all strings set in well)					
CASING SIZE		WEIGHT, LB./FT.		DEPTH SET (MD)		HOLE SIZE	
4 1/2"		9 1/2		671'		6 1/2"	
7"		240		17'		8 1/2"	
CEMENTING RECORD		AMOUNT PULLED					
35 sacks		None					
3 sacks regular		None					
29. LINER RECORD				30. TUBING RECORD			
SIZE		TOP (MD)		BOTTOM (MD)		SACKS CEMENT*	
1 3/8		831		831 1/2		831 1/2	
31. PERFORATION RECORD (Interval, size and number)				32. ACID, SHOT, FRACTURE, CEMENT-SQUEEZE, ETC.			
Open Hole 832-842				Natural Completion			
33.* PRODUCTION				WELL STATUS (Producing or shut in) Producing			
DATE FIRST PRODUCTION August 23, 1968		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Pumping - 1 1/2" Insert Pump				WELL STATUS (Producing or shut in) Producing	
DATE OF TEST August 26, 1968		HOURS TESTED 24 hrs.		CHOKE SIZE 2"		PROD'N. FOR TEST PERIOD 10	
FLOW. TUBING PRESS. 0		CASING PRESSURE 0		CALCULATED 24-HOUR RATE 10		OIL—BBL. 10	
GAS—MCF. 14		WATER—BBL. 2		OIL GRAVITY-API (CORR.) 68		GAS-OIL RATIO 143:1	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Used for fuel - engine				TEST WITNESSED BY Ed Garrett			
35. LIST OF ATTACHMENTS Deviation Survey							
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records							
SIGNED [Signature]		TITLE Secretary		DATE Nov. 8, 1968			

*(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 83. 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

FORMATION		TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	GEOLOGIC MARKERS	
					NAME	MEAS. DEPTH
Mancos		Surface			Mancos	Surface
		704			Greenhorn	600
		704			Greenhorn	650
		743			Dakota	704
		834				