33.*		PRO	PRODUCTION								
DATE FIRST PRODUCTION PRODUCTION METHOD (Flo			Flowing, gas lift, p	wing, gas lift, pumping—size and type of pump)				WELL STATUS (Producing or shut-in)			
			Flowing				Shut-in				
1-20-76	HOURS TEST	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL-BBL.	ı	GAS—MCF. 1067 AOF		GAS-OIL RATIO			
PLOW. TUBING PRESS. 1572 SI	casing pres	24-HOUR RA		GAS- 40 1067	f. AOF	WATER	BBL.	OIL GRAVITY-API (CORR.)			
34. DISPOSITION OF G	AS (Sold, used) / []	1			TEST WIT	NESSED BY				
35. LIST OF ATTACH	MENTS	12.50									
36. I hereby certify	that the fore	Lugan	TITLE	plete and correct Engin		ined from a		e records TE 1-23-76			

NSTRUCTIONS

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.

should be listed on this form, see item 35. 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

or Federal office for specific instructions. 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

Hem 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.

Hems 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 Coment": 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.)

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