

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE

(See or 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 <input type="checkbox"/>	GAS WELL <input checked="" type="checkbox"/>	DRY <input type="checkbox"/>	Other _____		
b. TYPE OF COMPLETION:		NEW WELL <input checked="" type="checkbox"/>	WORK OVER <input type="checkbox"/>	DEEP-EN <input type="checkbox"/>	PLUG BACK <input type="checkbox"/>	DIFF. RESVR. <input type="checkbox"/>	Other _____
2. NAME OF OPERATOR Koch Industries, Inc.							
3. ADDRESS OF OPERATOR P. O. Box 2256, Wichita, Kansas 67201							
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 855' FSL & 1060' FEL SE SE At top prod. interval reported below At total depth							
14. PERMIT NO.				DATE ISSUED 12-4-75			
15. DATE SPUDDED 2-3-76		16. DATE T.D. REACHED 2-8-76		17. DATE COMPL. (Ready to prod.) 2-17-76		18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 6594' GR 6605' KB	
20. TOTAL DEPTH, MD & TVD 3555'		21. PLUG, BACK T.D., MD & TVD 3527'		22. IF MULTIPLE COMPL., HOW MANY*		23. INTERVALS DRILLED	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 3416-3454' Pictured Cliffs							
25. WAS DIRECTIONAL SURVEY MADE No							
26. TYPE ELECTRIC AND OTHER LOGS RUN Gamma Ray, Density, Caliper							
27. WAS WELL CORED No							
28. CASING RECORD (Report all strings set in well)							
CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD		AMOUNT PULLED	
7"	23#	197'	9-7/8"	150 sx			
4 1/2"	10.5#	3548'	6-1/4"	325 sx lite & 100 sx class "B"			
29. LINER RECORD							
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)			
30. TUBING RECORD							
SIZE	DEPTH SET (MD)	PACKER SET (MD)					
2-3/8	3426'	None					
31. PERFORATION RECORD (Interval, size and number) 3416-20 3423-38 23' w/26 holes 3450-54							
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.							
DEPTH INTERVAL (MD)				AMOUNT AND KIND OF MATERIAL USED			
3416-3454				250 gal 15%, 32 ball sealers, 50,000 gal sl wtr, 50,000# 10-20 sand, 750# BAF plug			
33.* PRODUCTION							
DATE FIRST PRODUCTION 2-16-76		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Flowing				WELL STATUS (Producing or shut-in) Shut-in (wtg on hook up)	
DATE OF TEST 2-17-76	HOURS TESTED 24	CHOKE SIZE 2"	PROD'N. FOR TEST PERIOD →	OIL—BBL. 0	GAS—MCF. 450	WATER—BBL. tr	GAS-OIL RATIO --
FLOW. TUBING PRESS. 50	CASING PRESSURE	CALCULATED 24-HOUR RATE →	OIL—BBL. 0	GAS—MCF. 450	WATER—BBL. tr	OIL GRAVITY-API (CORR.) --	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Vented, will be sold							TEST WITNESSED BY Delvin Echard
35. LIST OF ATTACHMENTS							
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records							
SIGNED <u>Orville L. Schmidt</u>		TITLE <u>Operations Manager</u>			DATE <u>2-19-76</u>		

\*(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 21, and 33, 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 FORMER ZONES: SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF; CORRELATE 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
				Fruitland	2997	(3608)
				Pictured Cliff	3391 <del>2391</del>	(3214)

