

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*

1. TYPE OF WELL: OIL WELL ☐ GAS WELL ☐ DRY ☒ Other _____		7. UNIT AGREEMENT NAME _____	
2. NAME OF OPERATOR ODESSA NATURAL CORPORATION		8. FARM OR LEASE NAME YOUNG FEDERAL	
3. ADDRESS OF OPERATOR P. O. Box 3908, Odessa, Texas 79760		9. WELL NO. 1	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface At top prod. interval reported below 1980'/NL, 1980'/EL At total depth _____		10. FIELD AND POOL, OR WILDCAT Undesignated	
14. PERMIT NO. _____ DATE ISSUED _____		11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA Section 2, T23S, R37E NMPM	
15. DATE SPUDDED 1/22/74		12. COUNTY OR PARISH Lea	
16. DATE T.D. REACHED 1/30/74		13. STATE New Mexico	
17. DATE COMPL. (Ready to prod.) P & A 1/31/74		18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* GR 3275' KB 3285'	
19. TOTAL DEPTH, MD & TVD 3720'		19. ELEV. CASINGHEAD 3275'	
20. PLUG, BACK T.D., MD & TVD Surface		20. IF MULTIPLE COMPL., HOW MANY* _____	
21. INTERVALS DRILLED BY → p - 3720'		22. ROTARY TOOLS CABLE TOOLS 0	
23. PRODUCING INTERVAL(S), OF THIS COMPLETION--TOP, BOTTOM, NAME (MD AND TVD)* P & A 1/31/74		24. WAS DIRECTIONAL SURVEY MADE No	
25. TYPE ELECTRIC AND OTHER LOGS RUN Welex Compensated Sidewall Neutron Log		26. WAS WELL CORED Yes	
27. CASING RECORD (Report all strings set in well)			
CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE
8-5/8"	28.00#	444	12-1/4"
		CEMENTING RECORD	
		135 sxs Class C w/4% Gel	
		100 sxs Class C w/2% CaC ₂	
		AMOUNT PULLED 0	
28. LINER RECORD			
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*
29. TUBING RECORD			
SIZE	DEPTH SET (MD)	PACKER SET (MD)	
30. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)	
P & A 1/31/74		P & A 1/31/74	
WELL STATUS (Producing or shut-in)		TEST WITNESSED BY	
DATE OF TEST		HOURS TESTED	
CHOKE SIZE		PROD'N. FOR TEST PERIOD	
OIL—BBL.		GAS—MCF.	
WATER—BBL.		GAS-OIL RATIO	
FLOW. TUBING PRESS.		CASING PRESSURE	
CALCULATED 24-HOUR RATE		OIL—BBL.	
GAS—MCF.		WATER—BBL.	
OIL GRAVITY-API (CORR.)		TEST WITNESSED BY	
31. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)			
32. LIST OF ATTACHMENTS			
Electric Logs (3)			
33. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records			
SIGNED John J. Strojek		TITLE Manager - Production Dept.	
DATE 2/6/74			

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

5/HSCS-Hobbs, 1/JH, 1/RLH, 1/JJS, 1/WFile

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 23, and 22, 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 (diagrams, 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 38. 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.)

Core No. 1 - 3554-3601' Penrose Cut 47', Recovered 47'; 37' Anhydrite, 8' Dolomite ss & 2' Dolomite

Core No. 2 3670-3720' Grayburg Cut 50', Recovered 50'; 7' Sand, 43' Sandy Dolomite

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	TOP	
					MEAS. DEPTH	TRUE VERT. DEPTH
Salt	1250'	2471'	Salt	Salt	1250'	1250'
Yates	2608'	2731'	Sandstone & Dolomite	Yates	2608'	2608'
Seven Rivers	2731'	3152'	Dolomite, Anhydrite & Salt	Seven Rivers	2731'	2731'
Queens	3152'	3560'	Sandstone, Anhydrite & Dolomite	Queens	3152'	3152'
Penrose	3560'	3700'	Sandstone, Anhydrite & Dolomite	Penrose	3560'	3560'
Grayburg	3700'	-	Dolomite, Sandstone & Anhydrite	Grayburg	3700'	3700'
Tops are from Electric Logs						