

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. RESVR. ☐	Other <u>Plugged</u>
2. NAME OF OPERATOR MIAMI OIL PRODUCERS, INC.							
3. ADDRESS OF OPERATOR P. O. Drawer 2040, Abilene, Texas 79604							
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface NW 1/4 SW 1/4 Sec. 10-T29N-R15W 650' FWL, 2105' FSL At top prod. interval reported below --- At total depth same							
14. PERMIT NO.				DATE ISSUED			
15. DATE SPUDDED 8/27/64							
16. DATE T.D. REACHED 9/9/64							
17. DATE COMPL. (Ready to prod.) Dry and Abandoned							
18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 5156' DF							
19. ELEV. CASINGHEAD ---							
20. TOTAL DEPTH, MD & TVD 4350'		21. PLUG, BACK T.D., MD & TVD None		22. IF MULTIPLE COMPL., HOW MANY* None		23. INTERVALS DRILLED BY 0 18 1/2	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* None - D & A						25. WAS DIRECTIONAL SURVEY MADE Yes	
26. TYPE ELECTRIC AND OTHER LOGS RUN Schlumberger IES; Sonic Log-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	CEMENTING RECORD		AMOUNT PULLED	
8-5/8"	24#	220'	12 1/4"	100 sacks		-0-	
29. LINER RECORD							
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	30. TUBING RECORD		
		None			SIZE	DEPTH SET (MD)	PACKER SET (MD)
						None	
31. PERFORATION RECORD (Interval, size and number) None - D and A				32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE			
				DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED	
33.* PRODUCTION							
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)				WELL STATUS (Producing or shut-in)	
None D and A							
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.)	

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)				TEST WITNESSED BY			
35. LIST OF ATTACHMENTS None							
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records							
SIGNED ORIGINAL SIGNED BY JACK STIVERS		TITLE Vice President		DATE Jan. 27, 1970			

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

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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 Neat, 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.

If not filed prior to the time this summary report is submitted, copies of all currently available logs (drillers, geologists, sample and core analysis, all types electric, etc.), formations, section 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.

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. 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:		38. GEOLOGIC MARKERS	
FORMATION	TOP	NAME	MEAS. DEPTH
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		DESCRIPTION, CONTENTS, ETC.	TRUE VERT. DEPTH
Well was cored from 4205' to 4265'		all recovery siltstone and shale.	
No shows of oil or gas were encountered.			
No other cores or tests.			
		Electric Log Tops:	
		Lewis Shale	370'
		Mass Verde	1065'
		Point Lickout	2590'
		Menace	2956'
		Gallup	3613'
		Lower Gallup	4112'
		Lower Gallup Sand	4198'
		Sensatee	4280'
		TD Driller	4390'
		TD Log	4356'