

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.

5. LEASE DESIGNATION AND SERIAL NO.

NM 0449694-B

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Bond 685 Ltd.

9. WELL NO.

3

10. FIELD AND POOL, OR WILDCAT

- Undesignated-Penn11. SEC., T., R., M., OR BLOCK AND SURVEY
OR AREA**Sec. 4, T9S, R36E**12. COUNTY OR
PARISH**Lea**

13. STATE

New Mexico

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

Re-entry

2. NAME OF OPERATOR

BTA Oil Producers

3. ADDRESS OF OPERATOR

104 South Pecos, Midland, Texas 79701

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*

At surface

660' FWL & 660' FNL, Sec. 4, T-9-S, R-36-E

At top prod. interval reported below

At total depth

14. PERMIT NO.

DATE ISSUED

re-entry15. DATE T.D. REACHED
9-3-6816. DATE T.D. REACHED
10-3-6817. DATE COMPL. (Ready to prod.)
10-4-6818. ELEVATIONS (DF, RKB, RT, GR, ETC.)*
4088' GL19. ELEV. CASINGHEAD
4088'20. TOTAL DEPTH, MD & TVD
9850'21. PLUG, BACK T.D., MD & TVD
9825'22. IF MULTIPLE COMPL.,
HOW MANY*23. INTERVALS
DRILLED BY

ROTARY TOOLS

CABLE TOOLS

TD**TD**

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*

9732 - 9842' Bough "C" Penn25. WAS DIRECTIONAL
SURVEY MADE**NO**

26. TYPE ELECTRIC AND OTHER LOGS RUN

27. WAS WELL CORED

28. CASING RECORD (Report all strings set in well)

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
10 3/4"	32.75#	442'	Unkn	250 sx	
7 5/8"	28 - 40#	4130'	Unkn	200 sx	
4 1/2"	11.60#	9825'	6 3/4"	225 sx	

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					2 3/8"	9775	9751

31. PERFORATION RECORD (Interval, size and number)

9808 - 24' w/2JSPF

32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
9808-24'	500 gal 15% NE

33.* PRODUCTION

DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)				WELL STATUS (Producing or shut-in)	
10-7-68		Pumping				Pump	
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
10-8-68	24		→	281	219	932	780
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.)

vent

TEST WITNESSED BY

Cecil Overcast

35. LIST OF ATTACHMENTS

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records

Production Supt.

SIGNED

TITLE

DATE

10-10-68

*(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 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 POROUS ZONES:			38. GEOLOGIC MARKERS			
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	NAME	MEAS. DEPTH	TOP	TRUE VERT. DEPTH
Rough C Penn	9735	9842		2232		
			Tool open 2 hrs. GAS 2" MTS 18"	2790		
			Flw 22 B/fluid, cut 41% wtr.	4150		
			Total Rec. 50.1 B/G, 3.5 bho 69	5510		
			WCM + 42.5 BF, cut 41 wtr.	6950		
			Rustler	7722		
			Yates	9052		
			San Andres	9802		
			Glorietta			
			Tubb			
			Abo			
			Wolfcamp			
			Bough "C"			