

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

COPY TO BUREAU

(See instructions 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 _____
2. NAME OF OPERATOR HNG Oil Company							
3. ADDRESS OF OPERATOR P.O. Box 2267, Midland, Texas 79702							
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements) At surface 660' FSL & 1980' FWL, Sec. 9 At top prod. interval reported below Same At total depth Same							
14. PERMIT NO.				DATE ISSUED 6-18-79			
15. DATE SPUDDED 2-6-80		16. DATE T.D. REACHED 2-12-80		17. DATE COMPL. (Ready to prod.) 3-5-80		18. ELEVATIONS (DF, REB, RT, GR, ETC.)* 2954' GR	
20. TOTAL DEPTH, MD & TVD 3684'		21. PLUG BACK T.D., MD & TVD 3632'		22. IF MULTIPLE COMPL., HOW MANY*		23. INTERVALS DRILLED BY →	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 3250 - 3604 (Yates)						25. WAS DIRECTIONAL SURVEY MADE No	
26. TYPE ELECTRIC AND OTHER LOGS RUN BHC Sonic						27. WAS WELL CORED No	
28. CASING RECORD (Report all strings set in well)							
CASING SIZE		WEIGHT, LB./FT.		DEPTH SET (MD)		HOLE SIZE	
8-5/8"		23#		1410'		11"	
5-1/2"		14#		3682'		7-7/8"	
29. LINER RECORD							
SIZE		TOP (MD)		BOTTOM (MD)		SACKS CEMENT*	
30. TUBING RECORD							
SIZE		DEPTH SET (MD)		PACKER SET (MD)			
2-3/8"		3212'		3212'			
31. PERFORATION RECORD (Interval, size and number)							
3250 - 3604 (.41" 22)							
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.							
DEPTH INTERVAL (MD)				AMOUNT AND KIND OF MATERIAL USED			
3250 - 3604				30,000 gals gelled			
				50#/1000gel KCL, 50%			
				CO ₂ , 135000# 18-42 sand &			
				50,000# 10-20 sand.			
33.* PRODUCTION							
DATE FIRST PRODUCTION 3-18-80		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Pumping					WELL STATUS (Producing or shut-in) Producing
DATE OF TEST 3-19-80		HOURS TESTED 24		CHOKE SIZE -		PROD'N. FOR TEST PERIOD →	
FLOW. TUBING PRESS.		CASING PRESSURE Packer		CALCULATED 24-HOUR RATE →		OIL GRAVITY-API (CORR.) 31.0	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Sold						TEST WITNESSED BY	
35. LIST OF ATTACHMENTS Log							
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records							
SIGNATURE Betty A. Gilden		TITLE Regulatory Clerk				DATE 3-26-80	

*(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 oil/or State office. See instructions on items 22 and 24, and 33, below regarding separate reports for separate completions.

* 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.), formations 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, or 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.)

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	MEAS. DEPTH	TRUE VERT. DEPTH
Adt & Anhy	0	3214	Sand & Dolomite Sand & Dolomite Sand & Dolomite			
insill	3214	3408				
ites	3408	3552				
ven Rivers	3552	TD				

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OIL CONSERVATION DIV.