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MEAS. DEFTH TRUE VENT. DEPTH	NAME		DESCRIPTION, CONTENTS, ETC	BOTTOM	TOP	FORMATION
GEOLOGIC MARKERS	OFOLU	°.	37. SUMMARY OF POROUS ZONES: SHOW ALL DEPORTANT ZONES OF POROSITY AND CONTENTS THEREOF: CORED INTERVALS; AND ALL DRUL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTER, CUSHION USED, TIME TOOL OPEN, PROWING AND SHUT-IN PRESSURES, AND RECOVERIES	OROSITY AND CONTR N USED, TIME TOOL	MOUS ZONES: NORTANT ZONES OF I AL TESTED, CUSHIO2	SUMMARY OF PO SHOW ALL IN DEPTH INTERV

## 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 focal Federal and/or State effect. See instructions on items 22 and 24, and 35, 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 (driflers, geologists, sample and core analysis, all types electric, etc.), forma-tion 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.

Hen 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.

**Rem 18:** Indicate which eth atten is used as reference (where not otherwise shown) for depth measurements given in other spaces on this form and in any attachments. **Rems 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. Hem 29: "Nacks Comput": Attached supplemental records for this well should show the details of any multiple stage computing and the location of the computing tool. Hem 33: Submit a separate completion report on this form for each interval to be separately produced. (See instruction for items 22 and 24 above.)

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