

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN DUPLICATE
(See other 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 Oryx Energy Company							
3. ADDRESS OF OPERATOR P. O. Box 1861, Midland, Texas 79702							
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements) At surface P, 990' FSL & 800' FEL At top prod. interval reported below At total depth							
14. PERMIT NO. 16587				DATE ISSUED JUL 26 '89			
15. DATE SPUNDED 4-23-89				16. DATE T.D. REACHED 5-29-89		17. DATE COMPL. (Ready to prod.) 5-29-89	
18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 3674.9'		19. ELEV. CASING HEAD		20. TOTAL DEPTH, MD & TVD 11,150		21. PLUG, BACK T.D., MD & TVD P&A'd to Surf.	
22. IF MULTIPLE COMPL., HOW MANY*		23. INTERVALS DRILLED BY →		ROTARY TOOLS X		CABLE TOOLS	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*							
25. WAS DIRECTIONAL SURVEY MADE?							
26. TYPE ELECTRIC AND OTHER LOGS RUN Spec. Density Dual Spaced Neutron-GR-CAL, DIL-GR-CAL, Full wave sonic log.							
27. WAS WELL Cased?							
28. CASING RECORD (Report all strings set in well)							
CASING SIZE		WEIGHT, LB./FT.		DEPTH SET (MD)		HOLE SIZE	
13 3/8"		54.5#		402'		17 1/2"	
8 5/8"		24 & 32#		3015'		11"	
---		---		11,150'		7 7/8"	
29. LINER RECORD							
SIZE		TOP (MD)		BOTTOM (MD)		SACKS CEMENT*	
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30. TUBING RECORD							
SIZE		DEPTH SET (MD)		PACKER SET (MD)		---	
---		None		---		---	
31. PERFORATION RECORD (Interval, size and number)							
None							
32. ACID, SHOT, FRACTURE, CEMENT-SQUEEZE, ETC.							
DEPTH INTERVAL (MD)				AMOUNT AND KIND OF MATERIAL USED			
---				None			
33.* PRODUCTION							
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)				WELL STATUS (Producing or shut-in)	
No Prod.		---				P&A'd	
DATE OF TEST		HOURS TESTED		CHOKE SIZE		PROD'N. FOR TEST PERIOD	
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FLOW. TUBING PRESS.		CASING PRESSURE		CALCULATED 24-HOUR RATE		OIL—BBL.	
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34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)							
TEST WITNESSED BY							
ACCEPTED FOR RECORD							
35. LIST OF ATTACHMENTS 3160-5, inclination							
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records.							
SIGNED		TITLE		DATE		---	
Maria L. Perez		Accountant		7-11-89		---	

*(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, of 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: 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
San Andres	2753	4186	Dolomite limestone	San Andres	2753
Abo	6305	7469	Dolomite W/interbedded green & red shale	Abo	6305
Wolfcamp	7469	9150	Limestone W/scattered chert and gray, green & brown shale	Wolfcamp	7469
Strawn	10105	10310	Limestone W/gray silty shale	Strawn	10105
Atoka	10310	10752	Limestone W/gray-black silty shale, some interbedded w/ grained sandstone	Atoka Clastics	10310
Morrow	10752	10958	Cherty limestone and pyritic sandstone W/interbedded gray-black pyritic shale	Atoka Carbonates	10505
				Morrow Clastics	10752
				Mississippian (Barnett)	10958