

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE

(See other In-
structions on
reverse side)

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

Amoco Production Company

3. ADDRESS OF OPERATOR

P. O. Drawer A, Levelland, Texas 79336

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

At surface

1,980' FEL x 1,980' FNL, Sec. 7 (Unit G, SW/4 NE/4)

At total depth

At total depth

DEC 8 1977

14. PERMIT NO.

DATE ISSUED

15. DATE SPUDDED

9-22-77

16. DATE T.D. REACHED

11-1-77

17. DATE COMPL. (Ready to prod.)

11-18-77

18. ELEVATIONS (DF, RKB, RT, GR, ETC.)*

3589 GR

19. ELEV. CASINGHEAD

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20. TOTAL DEPTH, MD & TVD

11,085

21. PLUG, BACK T.D., MD & TVD

11,085

22. IF MULTIPLE COMPL.,
HOW MANY*23. INTERVALS
DRILLED BY

ROTARY TOOLS

CABLE TOOLS

10 - TD

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

10,918'-36' Morrow

25. WAS DIRECTIONAL
SURVEY MADE

No

26. TYPE ELECTRIC AND OTHER LOGS RUN

Comp. Neutron Formation Density, Dual Laterolog Micro SFL

27. WAS WELL CORED

No

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

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
13-3/8"	48#	390'	17 1/2"	450 SX Class C	
9-5/8"	32.3-36#	2,955'	12 1/4"	1,200 SX Lite X Class C	
5-1/2"	15.5#	11,085'	8 3/4"	2,100 SX Lite X Class C	

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					2 3/8"	11,022'	10,680'

31. PERFORATION RECORD (Interval, size and number)

10,918'-36' - 4 JSPF

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
10,918'-36'	400 Gal 10% Acetic Acid

33. PRODUCTION

DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)				WELL STATUS (Producing or shut-in)	
11-18-77		Flowing				Shut in	
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
11-18-77	3	20/64	→	16	437.5	-0-	27,344
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)	
1,550	NA	→	128	3,500	-0-	NA	

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)

Sold

TEST WITNESSED BY

35. LIST OF ATTACHMENTS

Logs per Item No. 26

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

SIGNED

Randy Atkins

TITLE

Staff Assistant (SG)

DATE

11-23-77

0 & 4-USGS-Art (See Instructions and Spaces for Additional Data on Reverse Side)

1-Div. 1-RC

1-Susp 19-Partners

Rec'd 11/25/77

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.

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 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 FOMOSIS ZONES:

SHOW ALL IMPORTANT ZONES OF FOMOSITY AND CONTENTS THEREOF; CORSED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CUSHION TEST, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.
Mohican	10,418'	10,456'	Gas Zone

38.

GEOLOGIC MARKERS

NAME	MEAS. DEPTH	TRUE VERT. DEPTH
Liberman	7,443'	
Cisco	8,448'	
Amick	9,514'	
Strickland	9,828'	
Acker	10,274'	
Alvin	10,703'	
Lower Mohican	11,020'	
Exhaust Sand	11,056'	