

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE

(See other In-
structions on
reverse side)Form approved.
Budget Bureau No. 42-R355.6.

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.
RESR. ☐

2. NAME OF OPERATOR

Cities Service Company

3. ADDRESS OF OPERATOR

P.O. Box 1919 - Midland, Texas 79702

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

At surface 660' FSL & 1980' FEL

At top prod. interval reported below

Same as above

At total depth

Same as above

14. PERMIT NO.

DATE ISSUED

15. DATE SPUDDED

Respd 11-29-82

16. DATE T.D. REACHED

17. DATE COMPL. (Ready to prod.)

12-16-82

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

3426' GR

19. ELEV. CASINGHEAD

3462'

20. TOTAL DEPTH, MD & TVD

O.T.D. 11,356'

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

10,965'

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

ROTARY TOOLS

CABLE TOOLS

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

10,675- 10,680' - Atoka

26. TYPE ELECTRIC AND OTHER LOGS RUN

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

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE

(SEE ORIGINAL COMPLETION RECORDS)

CEMENTING RECORD

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT *	SCREEN (MD)

30. TUBING RECORD

SIZE	DEPTH SET (MD)	PACKER SET (MD)
2-7/8"	10,575'	10,575'

31. PERFORATION RECORD (Interval, size and number)

4 - 0.29" SPF @ 10,675 - 10,677' and
10,680'

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
10,675 - 10,680'	2500 gals 7-1/2% MSR-100 acid

33. PRODUCTION

DATE FIRST PRODUCTION

12-6-82

PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)

Flowing

DATE OF TEST

12-16-82

HOURS TESTED

3 hrs

CHOKE SIZE

6 9/16" &

PROD'N. FOR
TEST PERIOD

→

OIL—BBL.

→

GAS—MCF.

→

WATER—BBL.

→

GAS-OIL RATIO

→

FLOW. TUBING PRESS.

614#

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.)

Sold

35. LIST OF ATTACHMENTS

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

SIGNED

Edmer Stutz

TITLE

Reg. Opr. Mgr. - Prod.

DATE

1-12-83

*(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 83, 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.)

Item 37: SUMMARY OF POROUS ZONES: SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF; CORDED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, FUSION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES

Item 38: GEOLOGIC MARKERS

Item 39: FORMATION

Item 40: TOP

Item 41: BOTTOM

Item 42: DESCRIPTION, CONTENTS, ETC.

Item 43: MEAS. DEPTH

Item 44: TRUE VERT. DEPTH

Item 45: NAME

Item 46: Atoka

Item 47: 10,478'

Item 48: 10,478'

Item 49: 10,478'

Item 50: 10,478'

Item 51: 10,478'

Item 52: 10,478'

Item 53: 10,478'

Item 54: 10,478'

Item 55: 10,478'

Item 56: 10,478'

Item 57: 10,478'

Item 58: 10,478'

Item 59: 10,478'

Item 60: 10,478'

Item 61: 10,478'