

Form approved. 7
Budget Bureau No. 42-R355.5.

5. LEASE DESIGNATION AND SERIAL NO.

MM-10190

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME
East Shugart Unit 152

S. FARM OR LEASE NAME
East Shugart Unit

9. WELL NO.
19

10. FIELD AND POOL, OR WILDCAT
~~Shugart-Queen Yates~~

11. SEC., T., R., M., OR BLOCK AND SURVEY
OR AREA

Sec. 34, T10S, R31E

SEP 25 1969

14. PERMIT NO. U. S. G. 1000 DATE ISSUED 10-1-19 SOURCE OR 10-1-19

20. TOTAL DEPTH, MD & TVD 3870'	21. PLUG, BACK T.D., MD & TVD 3870'	22. IF MULTIPLE COMPL., HOW MANY*	23. INTERVALS DRILLED BY	ROTARY TOOLS	CABLE TOOLS
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24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*	3477-3870	25. WAS DIRECTIONAL SURVEY MADE
Injection 2706-2842 (Yates)		
3324-3445 (perfs) & 3477-3870 (O.H.) (Queen)		No

26. TYPE ELECTRIC AND OTHER LOGS RUN	27. WAS WELL CORED
GR-Neutron	

CASING RECORD (Report all strings set in well)					
CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
8-5/8	24#	920'	10"	Unknown	1500'
7"	20#	2678'	8"	Unknown	
4 1/2"	9.5#	3475	6 1/2"	100 sx	

29. LINER RECORD					30. TUBING RECORD		
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					2-3/8	2939	2939

31. PERFORATION RECORD (Interval, size and number) 2706, 2714, 2762, 2766, 2772 & 2842 w/one 3/8" jet. 3324-36 & 3390-3445	32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC. <table border="1"> <thead> <tr> <th data-bbox="750 1351 1027 1357">DEPTH INTERVAL (MD)</th> <th data-bbox="1027 1351 1494 1357">AMOUNT AND KIND OF MATERIAL USED</th> </tr> </thead> <tbody> <tr> <td data-bbox="750 1357 1027 1364">3477-3870 (OH)</td> <td data-bbox="1027 1357 1494 1364">6000 gal 15% HCl acid</td> </tr> <tr> <td data-bbox="750 1364 1027 1370"></td> <td data-bbox="1027 1364 1494 1370">in 4 stages separated</td> </tr> <tr> <td data-bbox="750 1370 1027 1376"></td> <td data-bbox="1027 1370 1494 1376">by 250# rock salt.</td> </tr> <tr> <td data-bbox="750 1376 1027 1383"></td> <td data-bbox="1027 1376 1494 1383"></td> </tr> </tbody> </table>	DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED	3477-3870 (OH)	6000 gal 15% HCl acid		in 4 stages separated		by 250# rock salt.		
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33.*		PRODUCTION					
DATE FIRST PRODUCTION		PRODUCTION METHOD (<i>Flowing, gas lift, pumping—size and type of pump</i>)				WELL STATUS (<i>Producing or shut-in</i>)	
WIN							
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
			RECEIVED				
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)	

34. DISPOSITION OF GAS (<i>Sold, used for fuel, vented, etc.</i>)	SEP 26 1969	TEST WITNESSED BY
35. LIST OF ATTACHMENTS		

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 Original Signed
O. D. Bretches TITLE Dist. Drlg. Supervisor DATE 9-24-69

*** (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 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; CORDED 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	TOP	TRUE VERT. DEPTH
No drill stem tests.							