

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

UNITED STATES DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

(See other instructions 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

Perry R. Bass

3. ADDRESS OF OPERATOR

Box 1178, Monahans, Texas 79756

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

At surface **660' PSL & 1980' PVL**

At top prod. interval reported below

At total depth

14. PERMIT NO. DATE ISSUED
ARTESIA, OFFICE

15. DATE SPURRED 8-31-65	16. DATE T.D. REACHED 10-1-65	17. DATE COMPL. (Ready to prod.) 10-11-65	18. ELEVATIONS (DF, REB, RT, GR, ETC.)* 3466' GL	19. ELEV. CASINGHEAD 3461'
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20. TOTAL DEPTH, MD & TVD	21. PLUG, BACK T.D., MD & TVD	22. IF MULTIPLE COMPL., HOW MANY*	23. INTERVALS DRILLED BY	ROTARY TOOLS	CABLE TOOLS
11,146'	11,383'		→	8	

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

11,350' - 11,360' Straum

26. TYPE ELECTRIC AND OTHER LOGS RUN

Lane Wells - Induction Electrolog, Minilog and Assurtilog.

27. WAS WELL CORED

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

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
16"	65	804.07	20"	950 sks	None
11 3/4"	47	2571.73	13 3/4"	1200 sks	None
8 5/8"	24 & 32	3990.00	10 5/8"	300 sks	None
5 1/2"	17 & 20	11438.22	7 7/8"	150 sks	None

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
None					2 1/8"	11,361	11,269

31. PERFORATION RECORD (Interval, size and number)

11,350' - 11,360' w/2 jet shots/foot

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
11,350-11,360	2500 gal 15% LST NE

33 *

PRODUCTION

DATE FIRST PRODUCTION 10-11-65	PRODUCTION METHOD (<i>Flowing, gas lift, pumping—size and type of pump</i>) Flowing	WELL STATUS (<i>Producing or shut-in</i>) Producing
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DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL-BBL.	GAS-MCF	WATER-BBL.	GAS-OIL RATIO
1-12 & 13-65	24	14"	→	342.24	687	1965	1832/1

FLOW, TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)
8754	Packer	→				44.7

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

Yeast

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

TITLE

Division Prod. Clerk

DATE _____

October 14, 1965

***(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:				38. GEOLOGIC MARKERS	
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					
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH
					TRUE VERT. DEPTH
Stream	11,350	11,360	Sand	Rustler Top Salt Base Salt Top Yates Let Delaware Rd Bane Springs Wolfcamp Stream Top of Porosity	778 1045 2195 2358 4090 6942 10200 11,214 11,329