

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE

Form approved.
Budget Bureau No. 42-R355.5.(See instructions on
reverse side)

WELL COMPLETION OR RECOMPLETION REPORT AND LOGS

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						5. FARM OR LEASE NAME	
SOUTHLAND ROYALTY COMPANY						PECOS RIVER FED. "20" COMM	
3. ADDRESS OF OPERATOR						9. WELL NO.	
1100 WALL TOWERS WEST MIDLAND, TEXAS 79701						1	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*						10. FIELD AND HOLE OR WILDCAT	
At surface 1980' FSL & 1980' FEL, SEC 20, T-19-S, R-27						UNDESIGNATED (WADROW)	
At top prod. interval reported below						11. SEC., T., R., M., OR BLOCK AND SURVEY	
At total depth						MOR. AREA	
14. PERMIT NO.						DATE ISSUED	
						O. C. D.	
15. DATE SPUDDED						18. ELEVATIONS (DT, KEB, RT, GR, ETC.)*	
2/28/80						3392' Gr.	
16. DATE T.D. REACHED						19. ELEV. CASINGHEAD	
4/16/80							
17. DATE COMPL. (Ready to prod.)						20. TOTAL DEPTH, MD & TVD	
5/24/80						10,510'	
21. PLUG, BACK T.D., MD & TVD						22. IF MULTIPLE COMPL., HOW MANY*	
8,200'							
23. INTERVALS DRILLED BY						ROTARY TOOLS	
						X	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*						25. WAS DIRECTIONAL SURVEY MADE	
8186-8190' (Wellcamp)						No	
26. TYPE ELECTRIC AND OTHER LOGS RUN						27. WAS WELL CORED	
Compensated Neutron Density w/GR Caliper, Dual Laterolog w/RX0,GR-CCL						No	
28. CASING RECORD (Report all strings set in well)							
CASING SIZE		WEIGHT, LB./FT.		DEPTH SET (MD)		HOLE SIZE	
11 3/4"		42#		200'		15"	
8 5/8"		24#		2006'		11"	
4 1/2"		11.6#		10,270'		7 7/8"	
29. LINER RECORD				30. TUBING RECORD			
SIZE		TOP (MD)		BOTTOM (MD)		SACKS CEMENT*	
31. PERFORATION RECORD (Interval, size and number)				32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
8186-8190' (2 JSPF)				DEPTH INTERVAL (MD)			
				8186-8190'			
				*See 9-331 For			
				Acidz w/250 gals 15% NEA			
				supplemental perf, acidizing & squeeze jobs.			
33.* PRODUCTION							
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)				WELL STATUS (Producing or shut-in)	
5/24/80		Flowing				Shut In	
DATE OF TEST		HOURS TESTED		CHOKE SIZE		PROD'N. FOR TEST PERIOD	
5/30/80		1 hr		13/64"			
FLOW. TUBING PRESS.		CASING PRESSURE		CALCULATED 24-HOUR RATE		OIL—BBL.	
1630		0				0	
						GAS—MCF.	
						61.6	
						WATER—BBL.	
						0	
						GAS-OIL RATIO	
						0	
						OIL GRAVITY-API (CORR.)	
						-	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)						TEST WITNESSED BY	
Sold						Wayne Grubbs	
35. LIST OF ATTACHMENTS							
CNDw/GR Caliper, Dual Laterolog w/RX0,GR-CCL, Inclination Survey, Temp Svy.							
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records							
SIGNED		TITLE				DATE	
Donald R Craig		District Operation Engineer				6/9/80	

*(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		
FORMATION		DEPTH INTERVAL TESTED, CUSHION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH	TRUE VERT. DEPTH
TOP	BOTTOM					
				Yates	306'	
				Grayburg	1208'	
				San Andres	1738'	
				Bone Spring	2525'	
				Wolfcamp	7606'	
				Cisco-Canyon	8155'	
				Strawn	8794'	
				Atoka	9470'	
				Morrow	9676'	
				Chester	10,219'	