

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY(S. 10-10-10)
str. 10-10-10
reverse 10-10-10COPY 5F
Form approved
Budget Bureau No. 42-R355.5

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL:		OIL WELL ☐	GAS WELL ☒	OTHER ☐					
b. TYPE OF COMPLETION:		NEW WELL ☒	WORK OVER ☐	DEEP-EN ☐	PLUG BACK ☐	REPERFORATE ☐	OTHER ☐		
2. NAME OF OPERATOR		Cities Service Oil Company							
3. ADDRESS OF OPERATOR		P. O. Box 1919 - Midland, Texas 79701							
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*		At surface 660' FNL, 1980' FWL of Sec. 34, T-21-S, R-27-E							
At top prod. interval reported below		same as above							
At total depth		same as above							
14. PERMIT NO.		DATE ISSUED							
15. DATE SPUDDED		16. DATE T.D. REACHED		17. DATE COMPL. (Ready to prod.)		18. ELEVATIONS (OF, REB, RT, GR, ETC.)*		19. ELEV. CASINGHEAD	
10/7/76		11/8/76		12/13/76		3167.95' GR		3167.95	
20. TOTAL DEPTH, MD & TVD		21. PLUG, BACK T.D., MD & TVD		22. IF MULTIPLE COMPL., HOW MANY*		23. INTERVALS DRILLED BY		24. ROTARY TOOLS	
11,775'		11,731'				0-11,775'		CABLE TOOLS	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND T.D.)		11,387'-11,542' Morrow						25. WAS DIRECTIONAL SURVEY MADE	
26. TYPE ELECTRIC AND OTHER LOGS RUN		CNL FDC, DLLRXO						27. WAS WELL CORED	
28. CASING RECORD (Report all strings set in well)		29. LINER RECORD						30. TUBING RECORD	
CASINO SIZE		WEIGHT, LB./FT.		DEPTH SET (MD)		HOLE SIZE		AMOUNT PULLED	
13-3/8" OD		48		600'		17-1/2"		600 sacks	
8-5/8" OD		24 & 32		3,020'		12-1/4"		1500 sacks	
5-1/2" OD		17 & 20		11,775'		7-7/8"		750 sacks	
31. PERFORATION RECORD (Interval, size and number)		2 - 0.48" holes		each at 11,387', 11,388', 11,425', 11,426', 11,447', 11,449', 11,451', 11,453', 11,458', 11,460', 11,461', 11,462', 11,464', 11,466', 11,467', 11,468', 11,469', 11,470', 11,472', 11,474', 11,494', 11,495', 11,516', 11,517', 11,518', 11,519', 11,520', 11,522', 11,524', 11,526', 11,529', 11,530', 11,532', 11,534', 11,536', 11,538', 11,540', 11,542', 11,528'		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
DATE FIRST PRODUCTION		12/5/76		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)		flowing		WELL STATUS (Producing or shut-in)	
DATE OF TEST		12/13/76		HOURS TESTED		4 hours		shut-in	
FLOW. TUBING PRESS.		1825		CASING PRESSURE		-----		OIL GRAVITY-API (CORR.)	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)		Well is shut in waiting on pipeline connection.						TEST WITNESSED BY	
35. LIST OF ATTACHMENTS		Deviation Test							
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records		SIGNED <u>E. J. Kildner</u> TITLE <u>Region Oper. Manager</u> DATE <u>12/20/76</u>							

*(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; CORED 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	TRUE VERT. DEPTH
				Bone Spr.	5220'	
				Dean	8737'	
				Wolfcamp	8750'	
				Canyon	9953'	
				Strawn	10996'	
				Atoka	10950'	
				Morrow	11090'	
				Chester	11734'	