

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL:		OIL WELL ☐	GAS WELL ☒	RY. ☐	RECEIVED BY	
b. TYPE OF COMPLETION:		NEW WELL ☐	WORK OVER ☐	DEEP-EN ☐	PLUG BACK ☒	DATE: FEB 4 1985
2. NAME OF OPERATOR Southland Royalty Company						
3. ADDRESS OF OPERATOR 21 Desta Drive, Midland, Texas 79705						
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 660' FNL & 2130' FEL, Sec. 5, T-20-S; R-28-E At top prod. interval reported below At total depth						
14. PERMIT NO.				DATE ISSUED		
15. DATE SPUDDED 1-14-85		16. DATE T.D. REACHED -		17. DATE COMPL. (Ready to prod.) 1-18-85		18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 3329' GR
20. TOTAL DEPTH, MD & TVD 11,198'		21. PLUG BACK T.D., MD & TVD 10,355'		22. IF MULTIPLE COMPL., HOW MANY*		23. INTERVALS DRILLED BY NA
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 9048-62' Wolfcamp						19. ELEV. CASINGHEAD -
26. TYPE ELECTRIC AND OTHER LOGS RUN NA						25. WAS DIRECTIONAL SURVEY MADE NA
27. WAS WELL CORED NA						
28. CASING RECORD (Report all strings set in well)						
CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD		AMOUNT PULLED
11 3/4"	42#	325'	17 1/2"	350 sx.		Circ.
8 5/8"	24#	2600'	12 1/4"	950 sx.		Circ.
4 1/2"	11.6 & 13.5#	11,194'	7 7/8"	1125 sx.		TOC @ 6180'
29. LINER RECORD						
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)		
30. TUBING RECORD						
SIZE	DEPTH SET (MD)	PACKER SET (MD)				
2 3/8"	8961'	8965'				
31. PERFORATION RECORD (Interval, size and number) 9048-62' (50 holes)						
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.						
DEPTH INTERVAL (MD)			AMOUNT AND KIND OF MATERIAL USED			
10,135-154'			Sgz w/50 sx C1 "H" to 6000#.			
33.* PRODUCTION						
DATE FIRST PRODUCTION - 1-24-85		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Flowing			WELL STATUS (Producing or shut-in) SI	
DATE OF TEST 1-24-85	HOURS TESTED 4	CHOKE SIZE 10/64"	PROD'N. FOR TEST PERIOD →	OIL—BBL. 7.5	GAS—MCF. 623.6	GAS-OIL RATIO 83066
FLOW. TUBING PRESS. 1770	CASING PRESSURE -	CALCULATED 24-HOUR RATE →	OIL—BBL. 43	GAS—MCF. 3743	WATER—BBL. 0	OIL GRAVITY-API (CORR.) 50
34. DISPOSITION OF GAS (Solid, used for fuel, vented, etc.) SOLD FLARED						TEST WITNESSED BY Ed Jackson
35. LIST OF ATTACHMENTS C-104, C-122, 9-331						
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records						
SIGNED Daniel Roberts		TITLE Operations Engineer			DATE 1/31/85	

*(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