

UNITED STATES DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DU. ATE*

(See other instructions on reverse side)

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

WELL COMPLETION OR RECOMPLETION REPORT AND LOG*

1a. TYPE OF WELL:		OIL WELL ☐ GAS WELL ☒ DRY ☐ Other _____		7. UNIT AGREEMENT NAME	
b. TYPE OF COMPLETION:		NEW WELL ☐ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other <u>DRY HOLE</u>		8. FARM OR LEASE NAME	
2. NAME OF OPERATOR		PERRY R. BASS		9. WELL NO.	
3. ADDRESS OF OPERATOR		Box 2760, MIDLAND, TX 79702		10. FIELD AND POOL, OR WILDCAT	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*		At surface 2310' FSL + 1980' FEL OF SECTION - UNIT LETTER J.		11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA	
At top prod. interval reported below				12. COUNTY OR PARISH	
At total depth				13. STATE	
14. PERMIT NO.		DATE ISSUED		15. DATE SPUDDED	
				16. DATE T.D. REACHED	
				17. DATE COMPL. (Ready to prod.)	
				18. ELEVATIONS (DF, RKB, RT, GR, ETC.)*	
				19. ELEV. CASINGHEAD	
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	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*		25. WAS DIRECTIONAL SURVEY MADE			
26. TYPE ELECTRIC AND OTHER LOGS RUN		27. WAS WELL CORED			
28. CASING RECORD (Report all strings set in well)		29. LINER RECORD		30. TUBING RECORD	
31. PERFORATION RECORD (Interval, size and number)		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.		33. PRODUCTION	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)		35. LIST OF ATTACHMENTS		36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records	
37. SIGNED		38. TITLE		39. DATE	

*** (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

DESCRIPTION, CONTENTS, ETC.

FORMATION

TOP

BOTTOM

38.

GEOLOGIC MARKERS

TOP

MEAS. DEPTH

TRUE VERT. DEPTH

NAME

T/BUSTLE

B/SALT

T/4ATES

DEL GP

INDIAN DA SD

BONE SPGS

WOLFECAMP

STRAWN

ATOKA

T/M. MORROW

T/L. MORROW

TO

383'

1841'

1920'

2109'

4270'

6955'

10197'

11382'

11789'

12532'

12830'

13024'

+ 3069'

+ 1611'

+ 1532'

+ 1343'

- 818'

- 3503'

- 6745'

- 7840'

- 8337'

- 9080'

- 9378'

- 9572'

SEE ATTACHED FOR DST No. 1.