

Form approved.
Budget Bureau No. 42-R365.5.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG*

1a. TYPE OF WELL:		OIL WELL ☐ GAS WELL ☒ DRY ☐ Other ☐		JUN 1 1982	
b. TYPE OF COMPLETION:		NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other ☐			
2. NAME OF OPERATOR		GLENN COPE		(915) 684-7827 O.C.D. ARTESIA, OFFICE	
3. ADDRESS OF OPERATOR		1604 W. FRONT STREET, MIDLAND, TEXAS 79701			
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*		At surface 1090' KNL & 560' FEL OF SEC. 30-225-25E			
At top prod. interval reported below					
At total depth					
14. PERMIT NO.		JIM GILLIAN		DATE ISSUED 2-9-82	
15. DATE SPUDDED		2-17-82		16. DATE T.D. REACHED 4-3-82	
17. DATE COMPL. (Ready to prod.)		4-28-82		18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 3752 GL	
19. ELEV. CASINGHEAD		3752			
20. TOTAL DEPTH, MD & TVD		10,180		21. PLUG, BACK T.D., MD & TVD 10,025	
22. IF MULTIPLE COMPL., HOW MANY*				23. INTERVALS DRILLED BY 10,180	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*		9784'-90' ROSS SAND		25. WAS DIRECTIONAL SURVEY MADE No.	
26. TYPE ELECTRIC AND OTHER LOGS RUN		COMPENSATED ACOUSTIC VELOCITY LOG & GUARD FOREX LOG		27. WAS WELL CORED No.	
28. CASING RECORD (Report all strings set in well)					
CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
13 3/8	48	334	17 1/2	725 SX (CIRCULATED)	
9 5/8	40	1484	12 1/4	650 SX (CIRCULATED)	
5 1/2	17 @ 20	10,058	8 3/4	850 SX	
29. LINER RECORD					
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	
30. TUBING RECORD					
SIZE	DEPTH SET (MD)	PACKER SET (MD)			
2 1/8		9748			
31. PERFORATION RECORD (Interval, size and number)					
9784'-90'					
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.					
DEPTH INTERVAL (MD)			AMOUNT AND KIND OF MATERIAL USED		
33. PRODUCTION					
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)		WELL STATUS (Producing or shut-in)	
4-28-82		FLOWING		PRODUCING	
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.
5-1-82	24	17/64		0	2,370
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.
2010 #	PKR		0	2,370	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)					
SOLD					
35. LIST OF ATTACHMENTS					
LOGS					
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records					
SIGNED		TITLE		DATE	
Glenn Cope		OWNER-OPERATOR		5-3-82	

*** (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

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	38. GEOLOGIC MARKERS	NAME	MEAS. DEPTH	TRUE VERT. DEPTH
DILLON	1654'						
THIRD BOLE SPINGS	7233'						
WOLF CANYON	7520'						
CISCO - CANYON	7956'						
STRAWN	8784'						
170KA SAND	9056'						
ROSS SAND	9783'						
MORROW "A"	9842'						