J-1/2	20 Q 1711		.300	, – , , 0	0	30	1	
29.		LINER RECORI)		30.	TUBING RECORD		
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)	
					2-7/8	" 10931 '	10931'	
31. PERFORATION	RECORD (Interval,	size and number)	<u> </u>	32. A	CID, SHOT,	FRACTURE, CEMENT SQU	JEEZE, ETC.	
				DEPTH INTERVA	L (MD)	AMOUNT AND KIND OF	MATERIAL USED	
10967-74' w/28 .50" holes (4 SPF)				10967-74'		$w/2000g. 7\frac{1}{2}\%$ acid + N ₂ .		
					:	w/1000g. 7½% ac	id, 20000g.	
						MSF & CO ₂ , 3500	# 100 Mesh	

& 26400 20/40 sd. 33.* PRODUCTION DATE FIRST PRODUCTION PRODUCTION METHOD (Flowing, gas lift, pumping-size and type of pump) WELL STATUS (Producing or SIWOPLC Flowing 9-23-83 DATE OF TEST HOURS TESTED CHOKE SIZE PROD'N. FOR OIL -BBL. GAS-MCF. WATER-BBL. GAS-OIL RATIO TEST PERIOD 1/2" 178 9-23-83 3 FLOW, TUBING PRESS. CASING PRESSURE CALCULATED GAS--MCF OH. - BRI WATER-BBL OIL GRAVITY-API (CORR.) 24-HOUR RATE 1416 213 Pkr 34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) TEST WITNESSED BY ACCEPTED FOR RECORD Harvey Apple Vented - Will be sold 35. LIST OF ATTACHMENTS

Deviation Survey; DST's

36. I hereby certify that the foregoing and attached information is complete and the action and available records

9-28-83 Production Supervisor SIGNED TITLE DATE .

NSTRUCTIONS

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.

Hem 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.

Hem 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.

Hems 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,

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 for each additional interval to be separately produced, showing the additional data pertinent to such interval.

Hem 29: "Nacks Cement": Attached supplemental records for this well should show the details of any multiple stage cementing and the location of the cementing tool.

Hem 33: Submit a separate completion report on this form for each interval to be separately produced. (See instruction for items 22 and 24 above.)

OFFIR INTERVAL						
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	lor.	
					MEAS, DEPTH TR	TRUE VERT. DEPTH
				Delaware	2250	
				Bone Springs	4477	
				3rd Bone Springs	8020	
				Wolfcamp	8537	
				Strawn	9784	
				L. Strawn	9858	
				Atoka	10002	
				Morrow	10656	
				Lwr Morrow	10955	
				Chester	11086	
	•					
					_	