

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other in-
structions 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 _____		
b. TYPE OF COMPLETION:		NEW WELL ☐	WORK OVER ☐	DEEP-EN ☐	PLUG BACK ☐	DIFF. RESVR. ☐	Other _____
2. NAME OF OPERATOR AMOCO PRODUCTION COMPANY						7. UNIT AGREEMENT NAME OLD INDIAN DRAW UNIT	
3. ADDRESS OF OPERATOR P.O. DRAWER A, LEVELLAND, TEXAS 79336						8. FARM OR LEASE NAME OLD INDIAN DRAW UNIT FEDERAL	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 330' FNL x 668' FEL SEC. 19 (UNIT A NE1/4 NE1/4) At top prod. interval reported below At total depth						9. WELL NO. 11	
14. PERMIT NO.						13. STATE NM	
15. DATE SPUDDED 7/5/76						12. COUNTY OR PARISH EDDY	
16. DATE T.D. REACHED 7/11/76		17. DATE COMPL. (Ready to prod.) 8/1/76		18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 3083.15 RDB		19. ELEV. CASINGHEAD -	
20. TOTAL DEPTH, MD & TVD 3450		21. PLUG BACK T.D., MD & TVD 3403		22. IF MULTIPLE COMPL., HOW MANY* -		23. INTERVALS DRILLED BY ROTARY TOOLS CABLE TOOLS 0' to TD	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 3295'-3303' DELAWARE						25. WAS DIRECTIONAL SURVEY MADE No	
26. TYPE ELECTRIC AND OTHER LOGS RUN DUAL LATERAL LOG MICRO-SFL, BOREHOLE COMPENSATED SONIC LOG						27. WAS WELL CORED SIDE CORE	
28. CASING RECORD (Report all strings set in well)							
CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD			
10 3/4"	40.48 #	402'	14 3/4"	450 SX - CIRC.			
5 1/2"	14 #	3450'	7 7/8"	800 SX			
29. LINER RECORD							
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT	GREEN (MD)	TUBING RECORD		
					SIZE	DEPTH SET (MD)	ARTESIAN OFFICE
					2 3/8"	3403'	
31. PERFORATION RECORD (Interval, size and number) 3295'-3303' 2 JSPF				32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED					
3295'-3303'		3000 gal. 15% BDA					
33. PRODUCTION							
DATE FIRST PRODUCTION 8/1/76		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) PUMPING				WELL STATUS (Producing or shut-in) PRODUCING	
DATE OF TEST 8/9/76	HOURS TESTED 24	CHOKE SIZE -	PROD'N. FOR TEST PERIOD →	OIL—BBL. 27	GAS—MCF. 10	WATER—BBL. 46	GAS-OIL RATIO 370
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE →	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Used for fuel						TEST WITNESSED BY	
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

Ray W. Cop

TITLE Administrative Assistant

DATE

8/11/76

043 USGS-ART
1-DIV
1-SUSP
1-RC
1-ACC

*(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
DELAWARE	3295'	3303'	OIL ZONE	BASE SALT	2338'	
				TOP DELAWARE SAND	2422'	
				TOP OLD INDIAN SAND	3286'	