

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other instructions on reverse side)

Copy to SF
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 79338						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 1658' FNL x 794' FWL, Sec 18 (Unit E SW/4 NW/4) At top prod. interval reported below At total depth						9. WELL NO. 12	
14. PERMIT NO.						DATE ISSUED	
15. DATE SPUDDED 7/17/76						16. DATE T.D. REACHED 7/25/76	
17. DATE COMPL. (Ready to prod.) 8/2/76						18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 3092.55	
20. TOTAL DEPTH, MD & TVD 3450						21. PLUG, BACK T.D., MD & TVD 3405	
22. IF MULTIPLE COMPL., HOW MANY*						23. INTERVALS DRILLED BY → 0 to TD	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 3215'-3239' DELAWARE						25. WAS DIRECTIONAL SURVEY MADE No	
26. TYPE ELECTRIC AND OTHER LOGS RUN DUAL LATEROLOG MICRO - SFL, BOREHOLE COMPENSATED SONIC LOG						27. WAS WELL CORED No	
28. CASING RECORD (Report all strings set in well)						RECEIVED	
CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD			
10 3/4"	40.48 #	393'	14 3/4"	450 SK - CIRC			
5 1/2"	14 #	3450'	7 7/8"	800 SK			
29. LINER RECORD						30. TUBING RECORD	
SIZE	TOP (MD)	BOTTOM (MD)	SAFETY CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	O.C.C. AREA OFFICE
					2 3/8"	3249	
31. PERFORATION RECORD (Interval, size and number) 3215'-3239' 2 JSPP						32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
						DEPTH INTERVAL (MD)	
						3215'-3239'	
						AMOUNT AND KIND OF MATERIAL USED	
						3000 gal. BDA	
33. PRODUCTION							
DATE FIRST PRODUCTION 8/2/76		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) PUMPING				WELL STATUS (Producing or shut-in) PRODUCING	
DATE OF TEST 8/10/76	HOURS TESTED 24	CHOKE SIZE —	PROD'N. FOR TEST PERIOD →	OIL—BBL. 145	GAS—MCF. 6	WATER—BBL. 3	GAS-OIL RATIO 40
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							
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. Cox		TITLE Administrative Assistant				DATE 8/11/76	

* (See Instructions and Spaces for Additional Data on Reverse Side)

013 WGS-ART
1-DIV
1-SUSP
1-RC
2-BASS

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:			38. GEOLOGIC MARKERS			
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			NAME	MEAS. DEPTH	TOP	TRUE VERT. DEPTH
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.			
DELAWARE	3215	3239	OIL ZONE	BASE SALT	2240'	
				TOP DELAWARE SAND	2333'	
				TOP OLD INDIAN SAND	3212	