

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE

(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 _____	
b. TYPE OF COMPLETION:		NEW WELL ☒		WORK OVER ☐		DEEP-EN ☐		PLUG BACK ☐	
				DIFF. RESVR. ☐				Other _____	
2. NAME OF OPERATOR Bell Petroleum Company									
3. ADDRESS OF OPERATOR P.O. Box 1538 Midland, Texas 79701									
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements) At surface 660' FSL & 760' FEL At top prod. interval reported below At total depth Same									
14. PERMIT NO.				DATE ISSUED NOV 26 1973					
15. DATE SPUDDED 10-31-73		16. DATE T.D. REACHED 11-10-73		17. DATE COMPL. (Ready to prod.)		18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 2933 GR		19. ELEV. CASINGHEAD	
20. TOTAL DEPTH, MD & TVD 3000'		21. PLUG, BACK T.D., MD & TVD		22. IF MULTIPLE COMPL., HOW MANY*		23. INTERVALS DRILLED BY → 25'-3000'		CABLE TOOLS 0-25'	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* Prep to P & A								25. WAS DIRECTIONAL SURVEY MADE No	
26. TYPE ELECTRIC AND OTHER LOGS RUN Gamma-ray Sonic								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		
8-5/8"	24	338'	12-1/4	275 sx Class "C" 2% CaCl.					
29. LINER RECORD									
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	30. TUBING RECORD				
					SIZE	DEPTH SET (MD)	PACKER SET (MD)		
31. PERFORATION RECORD (Interval, size and number)					32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.				
					DEPTH INTERVAL (MD)				
					MATERIAL AND KIND OF MATERIAL USED				
					NOV 26 1973				
					U. S. GEOLOGICAL SURVEY				
					ARTESIA, NEW MEXICO				
33.* PRODUCTION									
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)							
DATE OF TEST		HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO	
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.)								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 <u>J.O. Payne</u>				TITLE <u>Production Supervisor</u>			DATE <u>11-12-73</u>		

*(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 33.

Item 4: If there are any 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. **Item 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: "Seals 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 FORMER ZONES:

SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF; CORDED 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.	NAME	MEAS. DEPTH	TRUE VERT. DEPTH
Tertiary Russler Salado Lamar Delaware	0 982 2060 2804 2830	982 2060 2804 2830 3000	Undifferentiated Anhyd Salt Lime Sand	T-Lamar Lime	2804	+141

38. GEOLOGIC MARKERS