

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE

USE EITHER IN
ORIGINAL OR IN
DUPLICATE

Copy to ST

Form approved.
Budget Bureau No. 42-R355.5.

LEASE DESIGNATION AND SERIAL NO.

LC 061616-A

IF INDIAN, ALLOTTEE OR TRIBE NAME

WELL COMPLETION OR RECOMPLETION REPORT AND LOG*

1a. TYPE OF WELL: ☒ OIL WELL ☐ GAS WELL ☐ OTHER
b. TYPE OF COMPLETION: ☒ NEW WELL ☐ WORK OVER ☐ WELL ☐ PLUG BACK ☐ WELL ☐ OTHER

RECEIVED

SEP 27 1978

2. NAME OF OPERATOR

PERRY R. BASS ✓

3. ADDRESS OF OPERATOR

Box 2760, MIDLAND, TX 79702

O. C. C.
ARTESIA, OFFICE

4. LOCATION OF WELL (Report location clearly and in accordance with the State Department's)

At surface 2030' FNL & 2180' FEL OF SECTION - UNIT LETTER G.

At top prod. interval reported below

At total depth

11. PERMIT NO.

DATE ISSUED

15. DATE SPUNDED

16. DATE T.D. REACHED

17. EXT. COORD. (Ready to prod.)

18. ELEVATIONS OF R.E. RT. GR. ETC.

19. ELEV. CASINGHEAD

12-8-75

12-21-75

Temporarily Abandoned

3303' GL 3316' KB

—

20. TOTAL DEPTH, MD & TVD

21. PLUG. BACK T.D. MD & TVD

22. T.D. OF TIE-BACK

23. INTERVALS DELETED BY

ROTARY TOOLS

CABLE TOOLS

4077'

4037'

—

0-4077

—

24. PRODUCING INTERVAL(S), OF THIS COMPLETION (Top, bottom, name, MD and TVD)

25. WAS DIRECTIONAL SURVEY MADE

NONE

NO

26. TYPE ELECTRIC AND OTHER LOGS RUN

27. WAS WELL CORED

SDI-MESL, DIL, BC SL

YES

28.

CASING RECORD (Report all strings set in)

OF CEMENT RECORD

AMOUNT PULLED

CASING SIZE

WEIGHT, LB/FT.

DEPTH SET (MD)

PIPE SIZE

OF CEMENT RECORD

AMOUNT PULLED

8 5/8"

24#

568.24'

12 1/4"

375 SWS Glass "C" - CIRC.

NONE

5 1/2"

15.5# + 17#

4066.60'

7 7/8"

150 SWS Glass "C"

NONE

29. LINER RECORD

30. TUBING RECORD

SIZE

TOP (MD)

BOTTOM (MD)

JOINS (FEET)

DEPTH (MD)

SIZE

DEPTH SET (MD)

PACKER SET (MD)

NONE

2-3/8"

3950'

None

31. PERFORATION RECORD (Interval, size and name)

32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

Gearhart-Owen Isolation Tools
with 3971'-4000' isolated for completion

DEPTH INTERVAL (MD)

AMOUNT AND KIND OF MATERIAL USED

3971-4000

400 gal. Acid Wash

1500 gal. 1 1/2% HCl

5000 gal. 15% HCl

33 *

PRODUCTION

DATE FIRST PRODUCTION

PRODUCTION METHOD (Flowing, lift, pumping; size and type of pump)

WELL STATUS (Producing or shut-in)

DATE OF TEST

HOURS TESTED

FLOWLINE SIZE

PROD. VOL. TEST PERIOD

OIL

GAS

WATER

WATER-BBL.

GAS-OIL RATIO

FLOW, TUBING PRESS.

CASING PRESSURE

CALC. LATED 24 HOUR RATE

OIL

GAS

WATER

WATER-BBL.

OIL GRAVITY-API (CORR.)

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)

TEST WITNESSED BY

35. LIST ATTACHMENTS

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records

SIGNED

David L. Davis

TITLE Senior Production Engineer

DATE Sept. 29, 1978

*(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 LOGS, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	IN.	GEOLOGIC MARKERS	MEAS. DEPTH	TRUE VERT. DEPTH
					NAME	ELEV. KB	33 1/2'
	No DST's Run.				T/RUSTLER	780'	+ 2536'
			CORE #1 3963' - 3990'		B/CALEERA	910'	+ 2406'
			CORE #2 3990' - 4047'		T/SALT	1050'	+ 2266'
					B/SALT	3710'	- 394'
					T/DELAWARE LN	3920'	- 604'
					T/DELAWARE SD	3966'	- 650'
					T/FOAD SHALE	4014'	- 698'
					T/OLDS SD	4031'	- 715'
					TD 4077'		
					PBTD 4039'		