

DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

Instructions on
reverse side

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
KERN COUNTY LAND CO.

3. ADDRESS OF OPERATOR
418 FIRST STATE BANK BLDG., MIDLAND, TEXAS

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*
At surface
1980' FWL: 660' FSL. SEC. 23-75-33E UNIT N SE 1/4 SW 1/4
At top prod. interval reported below

At total depth

14. PERMIT NO. DATE ISSUED

15. DATE SPUNDED 8-31-66 16. DATE T.D. REACHED 9-1-66 17. DATE COMPL. (Ready to prod.) 9-16-66 18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 4364' KB

20. TOTAL DEPTH, MD & TVD 4580 21. PLUG, BACK T.D., MD & TVD 4344 22. IF MULTIPLE COMPL., HOW MANY* 23. INTERVALS DRILLED BY X

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*
4130, 34, 87, 90, 92, 94; 4204, 08, 16, 23, 31, 35; 43' SAN ANDRES

26. TYPE ELECTRIC AND OTHER LOGS RUN
CR. NEUTRON

28. CASING RECORD (Report all strings set in well)

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
13 3/8"	4.8	505	17 1/2"	400 SY (CASING ALREADY SET)	
11"	24 3/32	3439	8 5/8"	800 SY (CASING ALREADY SET)	
4 1/2"	9.5	4384	7 7/8"	300 SY (NEW CASING)	

29. LINER RECORD					30. TUBING RECORD		
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					2 3/8	4130	NONE

31. PERFORATION RECORD (Interval, size and number)		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED		
4130-4243	A/2000 gal. 15% N.E. ACID		
	F/30,000 gal. LEASE CRACK		
	45,000# 20-40 SAND		

33. PRODUCTION							
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)				WELL STATUS (Producing or shut-in)	
9-16-66		PUMP				PRODUCING	
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—EDL.	GAS-OIL RATIO
9-19-66	7	-	→	43	NA	8	NA
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)	
NA	NA	→	165	NA	27	NA	

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

35. LIST OF ATTACHMENTS

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records
SIGNED Gay L. Arseny TITLE PRODUCTION SECRETARY DATE 9-21-66

*(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 23, 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 24: 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 25: 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 identifying 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; CORRELATE INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CUSHION USED, TIME TOOL DOWN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES

38. GEOLOGIC MARKERS

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	TOP	
					MEAS. DEPTH	TRUE VERT. DEPTH
SAN ANDRES	4130	4243	0.1 % GAS PRODUCING ZONE	YATES SAN ANDRES PL	2224 3377 3943	