

UNITED STATES
DEPARTMENT OF THE INTERIOR

GEOLOGICAL SURVEY
JUN 28 11 03 AM '66

DO NOT IN DUPLICATE*

(See other instructions on reverse side)

Form approved
Budget Bureau No. 42-23555

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 K-11 County Land Company					
3. ADDRESS OF OPERATOR 115 First State Bank Bldg. Mil. 312, Texas					
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface SEC 7 S 34 T 30 N R 36 E 26 (BUILT 11/5/43) At top prod. interval reported below At total depth					
14. PERMIT NO.		DATE ISSUED			
15. DATE SPUDDED 6-9-66		16. DATE T.D. REACHED 6-17-66		17. DATE COMPL. (Ready to prod.) 6-22-66	
18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 4581 GL		19. ELEV. CASINGHEAD -			
20. TOTAL DEPTH, MD & TVD 1100		21. PLUG, BACK T.D., MD & TVD 4365		22. IF MULTIPLE COMPL., HOW MANY*	
23. INTERVALS DRILLED BY 10-TD		ROTARY TOOLS		CABLE TOOLS	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 4108 - 4234 S.S. D. 100' 100'					25. WAS DIRECTIONAL SURVEY MADE NO
26. TYPE ELECTRIC AND OTHER LOGS RUN Gamma Ray Density; Log gamma; Microlog; etc.					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
7"	20	1325	5 1/4"	390	
4 1/2"	32	4400	6 7/8"	350	
29. LINER RECORD					
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	
30. TUBING RECORD					
SIZE	DEPTH SET (MD)	PACER SET (MD)			
2 3/8"	4110				
31. PERFORATION RECORD (Interval, size and number) 4108; 10; 21; 36; 4223; 52; 57; 61; 64; 72; 84					
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.					
DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED			
4108-4234		2000 GALS 15% HCL			
		30000 LBS 20-40 S.S. 100			
		45000 LBS 20-40 S.S. 100			
33. PRODUCTION					
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)			WELL STATUS (Producing or shut-in)
6-22-66		Flowing			Producing
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.
6-22-66	2 1/2	22/64	→	46.4	11.5
FLOW, TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.
130	110	→	516	121	0
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) VENTED					TEST WITNESSED BY
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 Harold K. Karpinski TITLE District Accountant DATE 6-21-66

*(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 or State 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 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 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 secondary record is submitted, copies of all currently available logs (drill-log, geologists, sample and core analysis, all type tests, and pressure tests, and directional surveys, should be attached hereto, to the extent required by applicable Federal and/or State laws and regulations, should be listed on this form, see item 33.

Item 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult 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 other 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 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, adequate for each additional interval to be separately produced, showing the additional data pertinent to such interval.

Item 29: "Sacks Content": Attached supplemental records for this well should show the details of any multiple stage cementing and the location of the cementing.

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 INTERVALS ZONES OF POROSITY AND CONTENTS THEREOF; CORED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, GRAIN SIZE, FLOWING AND SUCTIN PRESSURES, AND RECOVERIES			38. GEOLOGIC MATTERS	
FORMATION	TOP	BOTTOM	NAME	MEAS. DEPTH
SAN ANDRES	4100	4200	YATES SAN ANDRES PI	2221 3440 4005