

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE

(See 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 ☐ DEPT ☐ Other _____				5. LEASE DESIGNATION AND SERIAL NO. NM 051845-A																									
b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEPEN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other _____				6. IF INDIAN, ALLOTTEE OR TRIBE NAME _____																									
2. NAME OF OPERATOR BTA Oil Producers				7. UNIT AGREEMENT NAME _____																									
3. ADDRESS OF OPERATOR 104 South Pecos, Midland, Texas				8. FARM OR LEASE NAME Pecan 688 Ltd.																									
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 1980' FNL & 1980' FEL, Sec. 31, T-8-S, R-36-E At top prod. interval reported below _____ At total depth _____				9. WELL NO. 2																									
14. PERMIT NO. _____ DATE ISSUED _____				10. FIELD AND POOL, OR WILDCAT Middle Allison Pen																									
15. DATE SPUDDED 11-27-68 16. DATE T.D. REACHED 12-25-68 17. DATE COMPL. (Ready to prod.) 12-30-68				11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA Sec. 31, T-8-S, R-36-E																									
18. ELEVATIONS (OF. RKB, RT. GR. ETC.)* 4133' R.D.				12. COUNTY OR PARISH Lea																									
19. ELEV. CASINGHEAD 4133'				13. STATE New Mexico																									
20. TOTAL DEPTH, MD & TVD 9833'		21. PLUG BACK T.D., MD & TVD 9833'		22. IF MULTIPLE COMPLET. HOW MANY* _____																									
23. INTERVALS DRILLED BY T.D.		24. PRODUCING INTERVAL(S) OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 9811 - 9833' w/2JSPF 10450' 10"		25. WAS DIRECTIONAL SURVEY MADE No																									
26. TYPE ELECTRIC AND OTHER LOGS RUN GR-1				27. WAS WELL CORED No																									
28. CASING RECORD (Report all strings set in well)																													
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32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.																													
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34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Vent																													
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 [Signature]		TITLE Production Supt.		DATE 1-10-69																									

*(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 USED, FLUID TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	SS.	GEOLOGIC MARKERS		
					NAME	MEAS. DEPTH	TRUE VERT. DEPTH
Bo C	9775	9640	Tool Open 1' 10" STD 5" Rev. 52 SO&GCDM 5% OIL, 23B SW 90" ISIP-2231 IFF-910 180" PSIF-2231 FFP-1401		Rustler	2234	+1899
					Yates	2775	+1357
					San Andres	4142	-9
					Glorietta	5494	-1361
					Tubb	6954	-2821
					Aleo	7758	-3625
					Wolf	9046	-4913
					BOC	9808	-5675