

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE

(See other in-
structions 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						3. ADDRESS OF OPERATOR	
4. LOCATION OF WELL (Report location clearly and indicate distance from any State requirements)*						5. LEASE DESIGNATION AND SERIAL NO.	
At surface Well is located 1980' from the North Line and						6. UNIT AGREEMENT NAME	
At top prod. interval reported below 660' from the West Line of Section						7. FARM OR LEASE NAME	
At total depth 26, T-7-S, R-35-E, Unit Letter E						8. A. Cunningham Federal NCT-1	
14. PERMIT NO.						DATE ISSUED	
15. DATE SPUNDED						16. DATE T.D. REACHED	
17. DATE COMPLETED (to prod.)						18. DATE OF WELL (to prod.)	
19. ELEVATION (to prod.)						20. FIELD AND POOL, OR WILDCAT	
21. TOTAL DEPTH, MD & TVD						22. PLUG, BACK T.D., MD & TVD	
23. INTERVALS DRILLED BY						24. ROTARY TOOLS	
25. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*						26. WAS DIRECTIONAL SURVEY MADE	
27. TYPE ELECTRIC AND OTHER LOGS RUN						28. WAS W.C. CORED	

29. CASING RECORD (Report all strings set in well)						30. TUBING RECORD	
CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED		
11 3/4"	42#	366'	15"	380 sx Class C	0		
8 5/8"	24# & 32#	4800'	11"	240 sx TLW - 300 sx Class C	0		
5 1/2"	14, 15.5 & 17#	7625'	7 7/8"	400 sx TLW - 200 sx Chem	comp 0		
31. PERFORATION RECORD (Interval, size and number)				32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
Perforated 5 1/2" OD casing w/2 JSPF @ 7580', 7584', 7587' - 89', 7592' - 98' and 7601' - 05'.				DEPTH INTERVAL (MD)			
				AMOUNT AND KIND OF MATERIAL USED			
				7580' - 7605' 1000 gals 15% NE Acid			

33. PRODUCTION							
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flooding, gas lift, pumping—size and type of pump)				WELL STATUS (Producing or shut-in)	
January 16, 1971		Pumping				Producing	
DATE OF TEST	HOURS TESTED	CHOKED SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY (API)
1-19-71	24			176	TSTM	3	29.4
FLOW TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY (API) CORR.	
			176	TSTM	3		
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)							
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

TITLE

Assistant District Superintendent

DATE

1-20-71

*(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:		38. GEOLOGIC MARKERS	
SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF; CORED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CUSHION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES		NAME	
FORMATION	TOP	MEAS. DEPTH	TRUE VERT. DEPTH
	BOTTOM		
Yates	2310		
Arapahoe	2718		
San Andres	3440		
Tubb	6010		
Wolfcamp	6700		

RECEIVED
JAN 23 1971