

NM000 - ARTESIA
NM000 - HODDS
BLM - SANTA FEUNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE

(See other in-
structions on
reverse side)Form approved.
Budget Bureau No. 42-555.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1. TYPE OF WELL: OIL WELL ☒ GAS WELL ☐ DRY ☐ Other ☐		2. NAME OF OPERATOR SunOil Company	
3. ADDRESS OF OPERATOR P.O. Box 2792, Odessa, Texas		4. LOCATION OF WELL (Report location clearly and in accordance with State requirements) At surface 660' FNL and 660' FNL of S. 28, T. 8S, R. 30E At top prod. interval reported below At total depth	
5. DATE SPUDDED 12-27-67		6. DATE T.D. REACHED 1-6-68	
7. DATE COMPL. (Ready to prod.) 1-11-68		8. ELEVATIONS (DF, RKB, RT, GR, ETC.) DF 4137, KB 4138, GR 4126	
9. TOTAL DEPTH, MD & TVD 3600		10. PLUG, BACK T.D., MD & TVD 3576	
11. IF MULTIPLE COMPL., HOW MANY*		12. INTERVALS DRILLED BY 0	
13. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* Milnesand & Cuto San Andres 3342 - 3499		14. TYPE ELECTRIC AND OTHER LOGS RUN Th - caliper - densilog - corr.	
25. CASING RECORD (Report all strings set in well)			
CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE
8 5/8"	20	334	12 1/4"
4 1/2"	9.5	3600	7 3/4"
26. CEMENTING RECORD			
225 sks			
300 sks			
29. LINER RECORD			
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*
30. TUBING RECORD			
SIZE	DEPTH (MD)	TRACES (MD)	
2 3/8"	3519	1050	
31. PERFORATION RECORD (Interval, size and number)			
3/8" holes 3364-73-81-82-83-90-94-3403-04 05-31-33-35 (13 holes)			
32. ACID, SHOT, FRACTURE, CEMENT, SQUEEZE, ETC.			
DEPTH INTERVAL (MD)		AMOUNT AND TYPE OF MATERIAL USED	
3364-3435		8000	
33. PRODUCTION			
DATE FIRST PRODUCTION 1-14-68		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Pump 2" x 1 1/4" insert	
DATE OF TEST 1-23-68		HOURS TESTED 24	
CHOKE SIZE -		PROD'N. FOR TEST PERIOD 21	
OIL—BBL. 21		GAS—MCF. 8.2	
WATER—BBL. 38			
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Fuel & vented			
35. LIST OF ATTACHMENTS Electric logs, and Form 9-331			
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records.			
SIGNED J. E. Edison		TITLE Area Superintendent	
ACCEPTED FOR RECORD (See Instructions and Spaces for Additional Data on Reverse Side) J. N. Sathalan District Engineer			

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 36.

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, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES				38. GEOLOGIC MARKERS	
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH TRUE VERT. DEPTH
Red Bed Anhydrite Lime Dolomite	0 339 2796 3367	339 2796 3367 3600		Milnesand Cato	3342 3428