

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY(See other in-
structions 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. DESVR. ☐	Other _____
2. NAME OF OPERATOR MR Oil Company							
3. ADDRESS OF OPERATOR P. O. Box 685, Monahans, Texas 79756							
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 330' FNL & 990' FEL of Section At top prod. interval reported below Same At total depth							
14. PERMIT NO.				DATE ISSUED 4/27/84			
15. DATE SPUDDED 7/18/84		16. DATE T.D. REACHED 7/21/84		17. DATE COMPL. (Ready to prod.) 7/31/84		18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 4429 GR	
20. TOTAL DEPTH, MD & TVD 3114'		21. PLUG BACK T.D., MD & TVD 3041'		22. IF MULTIPLE COMPL., HOW MANY* N/A		23. INTERVALS DRILLED BY ROTARY TOOLS X CABLE TOOLS	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 2989-3003 Queen						25. WAS DIRECTIONAL SURVEY MADE Yes	
26. TYPE ELECTRIC AND OTHER LOGS RUN LDT-CNL-DLL-MSFL-GR						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	
8 5/8"	24#	554'	11"	125 Pacesetter lite 2%		CAC1	
				100SX-Halco 2%		CAC1	
5 1/2"	15.5#	3050	7 7/8"	600SX-H Lite & 100SX-H		neat	
29. LINER RECORD				30. TUBING RECORD			
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
N/A	N/A	N/A	N/A	N/A	2 3/8	2918	
31. PERFORATION RECORD (Interval, size and number) 2989-3001 12 shots with one hole per foot				32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
				DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED	
				2989-3001		Frac w/20,000 Gal (75% Gelled 2% KCL & 25% CO2) 18000	
						20/40SD and 10,000 12/20SD	
33.* PRODUCTION							
DATE FIRST PRODUCTION 8/1/84		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Pump				WELL STATUS (Producing or shut-in) POW	
DATE OF TEST 8/1/74	HOURS TESTED 24 hrs	CHOKE SIZE None	PROD'N. FOR TEST PERIOD →	OIL—BBL. 102	GAS—MCF. 46	WATER—BBL. 1	GAS-OIL RATIO
FLOW. TUBING PRESS. 40	CASING PRESSURE 40	CALCULATED 24-HOUR RATE →	OIL—BBL. 102	GAS—MCF. 46	WATER—BBL. 1	OIL GRAVITY-API (CORR.) 34.1	
34. DISPOSITION OF GAS (Solid, used for fuel, vented, etc.) Vented				ACCEPTED FOR RECORD PETER [Signature] AUG 16 1984		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 [Signature]		TITLE [Signature]		DATE 8/1/84			

(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.

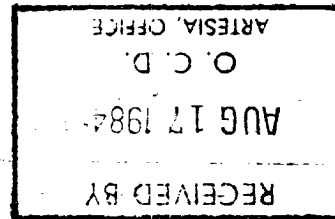
Item 29: "Sacks Cement": Attached supplemental records for this well should show the details of any multiple stage cementing and the location of the cementing tool.

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, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	38. GEOLOGIC MARKERS		
				NAME	MEAS. DEPTH	TOP TRUE VERT. DEPTH
				Salt	1428'	1428'
				Yates Sand	2233'	2233'
				Queen Sand	2988'	2988'



AUG 8 0 1984

O. C. D.
ARTESIA OFFICE