UNIT) STATES

SUBMIT IN DUPLICATE

Form approved. Budget Bureau No. 42-R355.5.

DEPARTMENT OF THE INTERIOR GEOLOGICAL SURVEY (See offictions of the structions of the struction of	
WELL COMPLETION OR RECOMPLETION REPORT AND LOG*	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
b. TYPE OF COMPLETION: NEW WORK DEEP PLUG DIFF.	7. UNIT AGREEMENT NAME MCA 8. FARM OR LEASE NAME
2. NAME OF OPERATOR Continuated all Compony	9. WELL NO.
3. ADDRESS OF OPERATOR BOX 460 Holle New Mell (Report location clearly and in accordance with any State requirements)*	10. FIELD AND POOL, OR WILDCAT WAS DE G - SIA Rese
At surface FIL and 125' FEL of See 22. At top prod. interval reported below	11. SEC., T., O., M., OR BLOCK AND SCRVE
At total depth 50	5 ec 22,7-175,R-3;
5. DATE SPUDDED 16. DATE T.D. REACHED 17. DATE COMPL. (Ready to prod.) 18. ELEVATIONS (DF. RKB.	Lea Willexic
20. TOTAL DEPTH, MD & TVD 21. PLUG, BACK T.D., MD & TVD 22. IF MULTIPLE COMPL., HOW MANY WAY	ROTARY TOOLS CABLE TOOLS
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD). Top - 3814' Bottom - 4120' Maybery	25. WAS DIRECTIONAL SURVEY MADE
26. TYPE ELECTRIC AND OTHER LOGS RUN SUP and LL-9	27. WAS WELL CORED
CASING SIZE WEIGHT, LB./FT. DEPTH SET (MD) HOLE SIZE CEMENTING	RECORD AMOUNT PULLED
858" 20# 936 124" Cic-4	75 socks
5-2" 14# 4250' 728" 300 soc	ks
29. LINER RECORD 30.	TUBING RECORD
SIZE TOP (MD) BOTTOM (MD) SACKS CEMENT* SCREEN (MD) SIZE	DEPTH SET (MD) PACKER SET (MD)
N/A 228	4001 NIA
10006 2001 2010 3006 93	TURF, CEMENT SQUEEZE, ETC. MOUNT AND KIND OF MATERIAL USED
	ocals 28/3 HCL-NE oc
3813'-3438' 150	ogols 1510 NE out
38/6 - 38/8 , 40	o is 15% IF aced
PRODUCTION	40 000 th 20140 50nd
PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)	WELL STATUS (Producing or
ATE OF TEST HOURS TESTED CHOKE SIZE PROD'N. FOR OIL- BBL. GAS VICE	WATER BBL. GAS-OIL BATU
5-30-72 24 TEST PERIOD 180 33	76 1833
LOW. TUBING PRESS. CASING PRESSURE CALCULATED OIL.—BBL. GAS-MCF. WAILE 24-HOUR RATE	BBL. OIL GRAVITY-API (CORR.)
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)	
	TEST WITNESSED BY
Sold	Mr. J.R. Cook
5 old 5. LIST OF ATTACHMENTS	Mr. J.R. Cook

*(See Instructions and Spaces for Additional Data on Reverse Side)

General: This form is designed for submitting a complete and correct well completions and 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, other are shown below or will be issued by, or may be obtained from, the local Federal of the completions.

If not filed prior to the time this summary record is submitted, copies of all currently are table but for submitted, geologists, sample and core analysis, all types electric, etc.), formatically are table but to be supplied to be a submitted and core analysis, all types electric, etc.), formatically are table but to be submitted. tion 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.

Hem 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.

Hems 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 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 pertunent to such interval to be separated supplemental records for this well should show the details of any multiple stage cementing and the location of the cementing tool.

Hem 33: Submit a separate completion report on this form for each interval to be separately produced. (See instruction for items 22 and 24 above.)

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	2	TOP
-				7	MEAS. DEPTH TRUE VERT. DEPTH
				Queen	3162
				Grayburg	35 35
				San Andres	3950
				Louinaton	1001
				(VED
					l .