

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 Burleson & Huff							
3. ADDRESS OF OPERATOR P. O. Box 935, Midland, Texas 79701							
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 1650' from South & 990' from West Lines of At top prod. interval reported below Section 27, T-18-S, R-32-E At total depth							
14. PERMIT NO.				DATE ISSUED			
15. DATE SPUDDED 9-26-73				16. DATE T.D. REACHED 2-5-74		17. DATE COMPL. (Ready to prod.) 2-8-74	
18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 3721.2 GR				19. ELEV. CASINGHEAD 3723			
20. TOTAL DEPTH, MD & TVD 4060'				21. PLUG, BACK T.D., MD & TVD none		22. IF MULTIPLE COMPL., HOW MANY*	
23. INTERVALS DRILLED BY ROTARY TOOLS				CABLE TOOLS X			
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* Open hole from Queen 3875 to 4015'							
25. WAS DIRECTIONAL SURVEY MADE No							
26. TYPE ELECTRIC AND OTHER LOGS RUN Accoustilog							
27. WAS WELL CORED no							
29. CASING RECORD (Report all strings set in well)							
CASING SIZE		WEIGHT, LB./FT.		DEPTH SET (MD)		HOLE SIZE	
10-3/4"		9.5		717'		13-3/8"	
7"		20		3830'		10-3/4"	
						CEMENTING RECORD	
						525- circ	
						225- circ	
						AMOUNT PULLED	
30. LINER RECORD							
SIZE		TOP (MD)		BOTTOM (MD)		SACKS CEMENT*	
						GREEN	
31. TUBING RECORD							
SIZE		DEPTH SET (MD)		PACKER SET (MD)			
2		3780		no			
32. PERFORATION RECORD (Interval, size and number)							
Open hole from 3830 to 4060				ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
DEPTH INTERVAL (MD)				AMOUNT AND KIND OF MATERIAL USED			
3875 to 4075				10,000 gal water			
				20,000 # sand			
33. PRODUCTION							
DATE FIRST PRODUCTION 2-8-74		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) flowing				WELL STATUS (Producing or shut-in) Producing	
DATE OF TEST 2-8-74		HOURS TESTED 24		CHOKE SIZE 16/64		PROD'N. FOR TEST PERIOD	
						OIL—BBL. 51	
						GAS—MCF. 56.1	
						WATER—BBL. 0	
						GAS-OIL RATIO 1100	
FLOW. TUBING PRESS. 50#		CASING PRESSURE 325#		CALCULATED 24-HOUR RATE		OIL—BBL. 51	
						GAS—MCF. 56.1	
						WATER—BBL. 0	
						OIL GRAVITY-API (CORR.) 37	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Sold to Phillips Petroleum Company							
35. LIST OF ATTACHMENTS Logs							
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records							
SIGNED		TITLE				DATE	
[Signature]		Partner				2-15-74	

*(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				38. GEOLOGIC MARKERS		
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH	TOP TRUCK VERT. DEPTH
Red Beds	0	1080	Red Shale & Anhydrite	Anhydrite	1080	
Anhydrite	1080	1150	Anhydrite	Yates	2510	
Salt	1150	2450	Salt	Queen	3860	
Dolomite	2450	2510	Dolomite			
Yates	2510	3400	Sand, Dolomite & Anhydrite			
Seven Rivers	3400	3860	Dolomite & Anhydrite			
Queen	3860	4060				
			No Cores or DSTs			