

WELL COMPLETION OR RECOMPLETION REPORT AND LOG*

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FEB 11 1983

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					
Petroleum Corporation of Texas					
3. ADDRESS OF OPERATOR					
P. O. Box 911, Breckenridge, Texas 76024					
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*					
At surface 660' FSL & 1650' FEL					
At top prod. interval reported below					
At total depth					
14. PERMIT NO.		DATE ISSUED			
		11-22-82			
15. DATE SPUDDED		16. DATE T.D. REACHED		17. DATE COMPL. (Ready to prod.)	
12-18-82		12-29-82		1-12-83	
18. ELEVATIONS (DF, RKB, FT, GR, ETC.)*		19. ELEV. CASINGHEAD			
3754.9' GR		N/A			
20. TOTAL DEPTH, MD & TVD		21. PLUG, BACK T.D., MD & TVD		22. IF MULTIPLE COMPL., HOW MANY*	
4302'					
23. INTERVALS DRILLED BY		ROTARY TOOLS		CABLE TOOLS	
Rotary					
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*					25. WAS DIRECTIONAL SURVEY MADE
Upper Queen 3872-3908'					No
Lower Queen 4110-4138'					No
26. TYPE ELECTRIC AND OTHER LOGS RUN					27. WAS WELL CORED
DLL, CNL/LDT/GR, Cyberlook					No
28. CASING RECORD (Report all strings set in well)					
CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
13-3/8"	54.7	20'	17 1/2"	4 yds ready mix	0
8-5/8"	24	1202'	11"	600 sx. C w/2% CC	0
5-1/2"	15.5	4201'	7-7/8"	450 sx. C, 325 sx. Hal.Lite	0
29. LINER RECORD					
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	
30. TUBING RECORD					
SIZE	DEPTH SET (MD)	PACKER SET (MD)			
2-3/8"	4843' 3843'	4813'			
31. PERFORATION RECORD (Interval, size and number)					
4110-4138' (1 spf) .40					
3872-3908' (1 spf) .40					
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.					
DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED			
4110-4138'		A w/2000 gal 15%			
3872-3908'		A w/2500 gal NE			
		F w/644 bbl. gel, 16,500# 20/40 sd.			
		17,500# 12/20 sd.			
33. PRODUCTION					
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)			WELL STATUS (Producing or shut-in)
1-20-83		Flowing			Producing
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.
2-4-83	24	32/64"		205	365
WATER—BBL.	GAS-OIL RATIO				
10	1780				
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.
42 psi	-		205	365	10
					OIL GRAVITY-API (CORR.)
					32
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)					
Sold					
35. LIST OF ATTACHMENTS					
CNL/LTD; DLL/MSFL					
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records					
SIGNED		TITLE		DATE	
J. Wainwright		Asst. Production Manager		2-7-83	
		ROSWELL, NEW MEXICO			

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

(Rogers Reid)

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 38, 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	TRUE VERT. DEPTH
Upper Queen	3872	3908	Sand & Oil			
Lower Queen	4110	4138	Sand & Oil			

RECEIVED
FEB 17 1983
O.C.D.
HOBBS OFFICE