

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 _____		5. LEASE DESIGNATION AND SERIAL NO. LC-031736 (6)	
b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR ☐ Other _____		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
2. NAME OF OPERATOR AMOCO PRODUCTION COMPANY		7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR BOX 367, ANDREWS, TEXAS 79714		8. FARM OR LEASE NAME GILLULY B' FED R/A B	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 1980' FNL x 660' FEL Sec. 33 (Unit H, SE 1/4 SW 1/4) At top prod. interval reported below At total depth		9. WELL NO. 15	
14. PERMIT NO.		DATE ISSUED	
15. DATE SPELLED 12-13-74		16. DATE T.D. REACHED 12-24-74	
17. DATE COMPL. (Ready to prod.) 1-9-75		18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 3521 RDB 3515 GL	
19. ELEV. CASINGHEAD —		20. TOTAL DEPTH, MD & TVD 3760'	
21. PLUG BACK T.D., MD & TVD 3714'		22. IF MULTIPLE COMPL., HOW MANY*	
23. INTERVALS DRILLED BY —		24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 3521'-3640' GULLEY (Purpos)	
25. WAS DIRECTIONAL SURVEY MADE No		26. TYPE ELECTRIC AND OTHER LOGS RUN Normal log, L.R.	
27. WAS WELL CORED No		28. CASING RECORD (Report all strings set in well)	
Casing Size		Weight, lb./ft.	
8 5/8"		29.35 #	
5 1/2"		35.5 #	
Depth Set (MD)		Hole Size	
357'		17 1/4"	
3760'		7 7/8"	
Cementing Record		Amount Pulled	
250 Sx		425 Sx	
29. LINER RECORD		30. TUBING RECORD	
Size		Top (MD)	
Bottom (MD)		Sacks Cement*	
Screen (MD)		Size	
Depth Set (MD)		Packer Set (MD)	
2 3/8		3421	
3421		3421	
31. PERFORATION RECORD (Interval, size and number)		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
3521, 22, 36, 40, 45, 46, 53, 55, 60, 61, 67, 69, 73, 74, 83, 88, 89, 3605, 06, 11, 25, 28, 30, 35, 39, 40'		Depth Interval (MD)	
3521-3640		Amount and Kind of Material Used	
3000 gal 15% Acid		Fract-30,000 gal Poly U/S	
+46000 # SN.			
33.* PRODUCTION		WELL STATUS (Producing or shut-in)	
Date First Production		Production Method (Flowing, gas lift, pumping—size and type of pump)	
1-6-75		FLW	
Date of Test		Hours Tested	
1-9-75		24	
Flow, tubing pressure		Casing pressure	
50		PKB	
Calc. based 24-hour rate		Oil—BBL.	
—		Gas—MCF.	
—		Water—BBL.	
—		Oil Gravity-API (Core.)	
—		—	
34. DISPOSITION OF GAS (Solid, used for fuel, vented, etc.)		TEST WITNESSED BY	
TO BE SOLD TO NNG			
35. LIST OF ATTACHMENTS			
NONE			
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records			
Signed		Typed	
[Signature]		[Signature]	
TITLED		DATE	
TITLED		DATE	

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

mp

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 15: 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 23. 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: "Stacks 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
Queen Anne	3521	3640	Gas Prod. zone	Tops Anchovy B. SALT YATES 7-12 Queen Pinnock GSA	1250 2522 2666 2912 3389 3518 3700	