

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other instructions 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 BTA OIL PRODUCERS							
3. ADDRESS OF OPERATOR 104 South Pecos Midland, Texas 79701							
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 660' FSL & 1980' FEL At top prod. interval reported below At total depth							
14. PERMIT NO.				DATE ISSUED 8/25/80			
15. DATE SPUDDED 11/4/80	16. DATE T.D. REACHED --	17. DATE COMPL. (Ready to prod.) --	18. ELEVATIONS (DF, REB, RT, GR, ETC.)* 2913' GL		19. ELEV. CASINGHEAD 2923'		
20. TOTAL DEPTH, MD & TVD 1060'	21. PLUG, BACK T.D., MD & TVD --	22. IF MULTIPLE COMPL., HOW MANY*	23. INTERVALS DRILLED BY →	ROTARY TOOLS X	CABLE TOOLS --		
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* --					25. WAS DIRECTIONAL SURVEY MADE No		
26. TYPE ELECTRIC AND OTHER LOGS RUN None					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			
None Lost Circ. & P&A		11/7/80					
29. LINER RECORD							
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)			
30. TUBING RECORD							
SIZE	DEPTH SET (MD)	PACKER SET (MD)					
31. PERFORATION RECORD (Interval, size and number)					32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.		
					DEPTH INTERVAL (MD)		
					AMOUNT AND KIND OF MATERIAL USED MAY 29 1981		
					U.S. GEOLOGICAL SURVEY ROSWELL NEW MEXICO		
33.* PRODUCTION							
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)			WELL STATUS (Producing or shut-in)		
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD →	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE →	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)					TEST WITNESSED BY		
35. LIST OF ATTACHMENTS Form 9-331, Inclination Survey							
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records							
SIGNED Bob K. Newland		TITLE Regulatory Administrator			DATE 5/26/81		

*(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 83, 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 83. 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

DESCRIPTION, CONTENTS, ETC.

BOTTOM

TOP

FORMATION

38.

GEOLOGIC MARKERS

NAME

TOP

MEAS. DEPTH

TRUE VERT. DEPTH

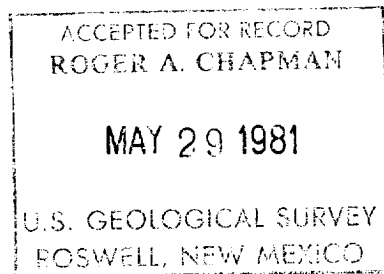
N/A

RECEIVED
JUN 9 1987
OIL CONSERVATION DIV

INCLINATION REPORT

OPERATOR BTA Oil Producers ADDRESS 104 S. Pecos, Midland, TX 79702LEASE NAME 7406 JVS Lea 21 WELL NO. #4 FIELD LOCATION 1980' FEL, 660' FSL, Sec. 21, T-26S-R-36 E

DEPTH	ANGLE INCLINATION DEGREES	DISPLACEMENT	DISPLACEMENT ACCUMULATED
591	1	3.3771	3.3771
804	3/4	2.7903	6.1674
1021	3/4	2.8427	9.0101



RECEIVED
MAY 29 1981
U.S. GEOLOGICAL SURVEY
HOUSTON, TEXAS

I hereby certify that the above data as set forth is true and correct to the best of my knowledge and belief.

CACTUS DRILLING COMPANY

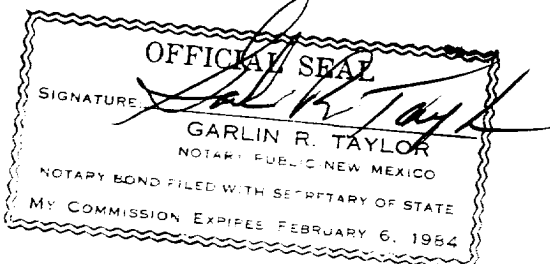
Denise Leake
TITLE OFFICE MANAGER

AFFIDAVIT:

Before me, the undersigned authority, appeared DENISE LEAKE
known to me to be the person whose name is subscribed herebelow, who, on making
depositor, under oath states that he is acting for and in behalf of the operator
of the well identified above, and that to the best of his knowledge and belief such
well was not intentionally deviated from the true vertical whatsoever.

Denise Leake
AFFIANT'S SIGNATURE

Sworn and subscribed to in my presence on this the 10 day of November, 1980



SEAL

Notary Public in and for the County
of Lea, State of New Mexico