

COPY TO O. C.

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. RESV. ☐ 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' FNL & 660' FEL

At top prod. interval reported below

At total depth

14. PERMIT NO.
 U. S. GEOLOGICAL SURVEY
 ROSWELL, NEW MEXICO

DATE ISSUED 12/7/80

15. DATE SPUDDED

11/8/80

16. DATE T.D. REACHED

11/19/80

17. DATE COMPL. (If not same as 16)

12/3/80

18. ELEVATIONS (DF, REB, RT, GR, ETC.) *

2926'

GR

19. ELEV. CASINGHEAD

2936'

20. TOTAL DEPTH, MD & TVD

3660'

21. PLUG, BACK T.D., MD & TVD

3453'

22. IF MULTIPLE COMPL., HOW MANY *

23. INTERVALS DRILLED BY

ROTARY TOOLS

CABLE TOOLS

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD) *

3194' - 3383' Tansill - Yates

25. WAS DIRECTIONAL SURVEY MADE

No

26. TYPE ELECTRIC AND OTHER LOGS RUN

Compensated Neutron and Gamma Ray

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	AMOUNT PULLED
8-5/8"	23#	1404'	12-1/4"	1000 sx Circ.	
5-1/2"	14 & 15.5#	3660'	7-7/8"	250 sx	

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
				10	2-7/8"	3086'	

31. PERFORATION RECORD (Interval, size and number)

3194' - 3383'

(.500" - 18 holes)

32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
3194' - 3383'	A/2700 gal. 15% HCL
3194' - 3383'	Frac - 490 bbls gel wtr.
	& 24 tons sd.

33. PRODUCTION

DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)				WELL STATUS (Producing or shut-in)	
12/12/80		Pump HF 2-1/2" x 1-1/2" x 16'				Producing	
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
12/20/80	24		→	58	60	60	1034
FLOW, TUBING PRES.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)	
		→	58	60	60	30.6	

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)

Sold

35. LIST OF ATTACHMENTS

Log, Inclination report, Form 9-331

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records

SIGNED

Bob K. Newland
BOB K. NEWLAND

TITLE

Regulatory Administrator

DATE

12/23/80

*(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.

Item 1: This summary record is submitted, copies of all currently available logs (drillers, geologists, sample and core analysis, all types electric, etc.), formations 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 2: 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 3: 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. 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 4: "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 5: Submit a separate completion report on this form for each interval to be separately produced. (See instruction for items 22 and 24 above.)

FORMATION		DEPTH INTERVAL TESTED, CUSHION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES		DESCRIPTION, COMMENTS, ETC.		LOG		WELL COMPLETION OR RECOMPLETION REPORT AND LOG	
TOP	BOTTOM	TESTED	RECOVERIES	DESCRIPTION, COMMENTS, ETC.	LOG	MEAS. DEPTH	TRUE VERT. DEPTH	DATE	WELL NO.
3172'	3347'	3172'	3347'	No Tests on Cores		2083'	2083'	1/1/80	871-233
3347'	3390'	3347'	3390'			3172'	3172'		
3484'		3484'				3347'	3347'		
						3390'	3390'		

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