

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 ☐		7. UNIT AGREEMENT NAME	
b. TYPE OF COMPLETION:		NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RES'VE. ☐ Other ☐		8. FARM OR LEASE NAME	
2. NAME OF OPERATOR		UNION TEXAS PETROLEUM CORPORATION		Stuart	
3. ADDRESS OF OPERATOR		1300 Wilco Building, Midland, Texas 79701		9. WELL NO.	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)		At surface 330' FNL & 1650' FWL		1	
At top prod. interval reported below		Same		10. FIELD AND POOL, OR WILDCAT	
At total depth		Same		Langlie-Mattix (Queen)	
14. PERMIT NO.		DATE ISSUED		11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA	
		7-26-77		Sec. 9, T-25-S, R-37-E	
15. DATE SPUDDED		16. DATE T.D. REACHED		12. COUNTY OR PARISH	
9-7-77		9-13-77		Lea	
17. DATE COMPL. (Ready to prod.)		18. ELEVATIONS (DF, REB, ET, GR, ETC.)*		13. STATE	
10-2-77		3174.2' GR		New Mexico	
19. ELEV. CASINGHEAD		20. TOTAL DEPTH, MD & TVD		21. PLUG, BACK T.D., MD & TVD	
---		3739		3698	
22. IF MULTIPLE COMPL., HOW MANY*		23. INTERVALS DRILLED BY		ROTARY TOOLS	
--		0-3739		CABLE TOOLS	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*		25. WAS DIRECTIONAL SURVEY MADE			
3432' to 3607' - Queen		No			
26. TYPE ELECTRIC AND OTHER LOGS RUN		Compensated Neutron-Formation Density		27. WAS WELL CORED	
Microlaterolog-Microlog & Dual Laterolog.				No	
28. CASING RECORD (Report all strings set in well)		31. PERFORATION RECORD (Interval, size and number) w/1 JSPF		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
Casing Size		Weight, lb./ft.		Depth Interval (MD)	
8 5/8"		24#		3432-3607	
5 1/2"		14#		3432-3607'	
Depth Set (MD)		Hole Size		Amount and Kind of Material Used	
782		12 1/2"		Acidized w/3000 gal. 15% NE acid.	
3738		7 7/8"		Frac'd w/40,000 gal. PV-8 low	
				residue Jel + 62,000# 20/40 sand	
				and 3600# rock salt.	
29. LINER RECORD		30. TUBING RECORD			
Size		Top (MD)		Size	
--		--		2 3/8	
Bottom (MD)		Sacks Cement*		Depth Set (MD)	
--		--		3544'	
Screen (MD)		Packer Set (MD)			
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33. PRODUCTION		34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)		35. LIST OF ATTACHMENTS	
Date First Production		Production Method (Flowing, gas lift, pumping—size and type of pump)		Inclination Report, Dual Laterolog, Compensated Neutron	
10-2-77		Pumping		Formation Density, Microlaterolog, Form C-104	
Date of Test		Hours Tested		TEST WITNESSED BY	
10-10-77		24		Henry P. Norton	
Choke Size		Prod'n. for Test Period			
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Flow. Tubing Press.		Oil—BBL.		GAS—MCF.	
--		38		16	
Casing Pressure		GAS—MCF.		WATER—BBL.	
18#		16		108	
Calculated 24-hour Rate		WATER—BBL.		GAS-OIL RATIO	
38		108		421	
Oil Gravity-API (corr.)					
34.8					
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records		SIGNED		DATE	
		Sr. Prod. Analyst		10-12-77	

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	TRUE VERT. DEPTH
Redbed & Sand	0'	470'		Yates	2899'	Same
Anhydrite	470'	1625'		Seven Rivers	3143'	Same
Anhydrite & Salt	1625'	2345'		Queen	3467'	Same
Anhydrite	2345'	3260'		Grayburg	3709'	Same
Lime & Shale	3260'	3739'				
	3432'	3607'	Perforated and tested Queen zone (Potential 38 BOPD + 108 BWPD + 16 MCFGPD)			