

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 <u>Dual-Same Resvr.</u>	
b. TYPE OF COMPLETION:		NEW WELL ☐	WORK OVER ☒	DEEP-EN ☐	PLUG BACK ☐	DIFF. RESVR. ☐
		Other <u>Reperforate and Treat</u>				
2. NAME OF OPERATOR UNION TEXAS PETROLEUM CORPORATION						
3. ADDRESS OF OPERATOR 1300 Wilco Building, Midland, Texas						
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 1650' FSL and 330' FEL At top prod. interval reported below Same At total depth Same						
14. PERMIT NO.		DATE ISSUED				
15. DATE SPUNDED 1/13/66		16. DATE T.D. REACHED		17. DATE COMPL. (Ready to prod.) 2/1/66		18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 3068 DF
19. ELEV. CASINGHEAD 3056		20. TOTAL DEPTH, MD & TVD 5950		21. PLUG, BACK T.D., MD & TVD 5914		22. IF MULTIPLE COMPL., HOW MANY* 2
23. INTERVALS DRILLED BY → 0-5950		ROTARY TOOLS		CABLE TOOLS		
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* Tubb-Drinkard 5772-5900½						25. WAS DIRECTIONAL SURVEY MADE NO
26. TYPE ELECTRIC AND OTHER LOGS RUN GR-N, Guard, FORXO, GR Correlation						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
9-5/8"	36	853	12½	300 sax		
7"	20 & 23	5949	8-3/4	253 sax		
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	5869	5675				
31. PERFORATION RECORD (Interval, size and number) 5772, 5776, 5782, 5798, 5802, 5806, 5816, 5832, 5855, 5872, 5876, 5894, 5900½ 13 - ½" holes						
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.						
DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED				
5772-5900½		20000 gal Brine, 30,000# sand				
33. PRODUCTION						
DATE FIRST PRODUCTION 2/1/66		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Pumping				WELL STATUS (Producing or shut-in) Producing
DATE OF TEST 2/9/66	HOURS TESTED 24	CHOKE SIZE	PROD'N. FOR TEST PERIOD →	OIL—BSL. 53.7	GAS—MCF. 33.5	WATER—BSL. 18
FLOW. TUBING PRESS.		CASING PRESSURE	CALCULATED 24-HOUR RATE →	OIL—BSL. 53.7	GAS—MCF. 33.5	WATER—BSL. 18
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Vented during test - Sold normally						TEST WITNESSED BY J. T. Berry
35. LIST OF ATTACHMENTS						
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records.						
SIGNED <u>R. D. Swenther</u>		TITLE <u>Agent</u>			DATE <u>2/15/66</u>	

*(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 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 33.

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.)

27. 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

28. GEOLOGIC MARKERS

FORMATION		TOP		BOTTOM		DESCRIPTION, CONTENTS, ETC.	
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