

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. RESVR. ☐ Other _____

2. NAME OF OPERATOR

Amoco Production Company

3. ADDRESS OF OPERATOR

P. O. Drawer A, Levelland, Texas 79336

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*

At surface

660' FNL X 810' FWL (Unit D, Sec. 15)

At top prod. interval reported below

At total depth

14. PERMIT NO.

DATE ISSUED

15. DATE SPUDDED

12-2-77

16. DATE T.D. REACHED

12-11-77

17. DATE COMPL. (Ready to prod.)

12-24-77

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

3269.7 RDB

19. ELEV. CASINGHEAD

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20. TOTAL DEPTH, MD & TVD

3600'

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

3558'

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)*

3187' - 3317' Queen

25. WAS DIRECTIONAL SURVEY MADE

No

26. TYPE ELECTRIC AND OTHER LOGS RUN

Comp. Neutron - Form Density, Dual Laterolog Micro - SFL

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#	1025'	12-1/4"	475 SX Class C	
7"	23#	3600'	8-3/4"	700 SX Dowfiller + Incor	

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"
					3330'
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31. PERFORATION RECORD (Interval, size and number)

3187'-3202', 3225'-38', 3243'-63',
3270'-76', 3301'-04', 3311'-17'

2 DPJSPF

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
3187'-3317'	3,500 Gal 15% Acid
3187'-3317'	40,000 Gas Titan + 10,000 Gal CO ₂ + 60,875# Sand

33.*

DATE FIRST PRODUCTION

12-24-77

PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)

Flowing

WELL STATUS (Producing or shut-in)

Shut-in

DATE OF TEST

12-24-77

HOURS TESTED

24

CHOKE SIZE

48/64"

PROD'N. FOR TEST PERIOD

OIL—BBL.

0

GAS—MCF.

912

WATER—BBL.

0

GAS-OIL RATIO

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FLOW. TUBING PRESS.

45

CASING PRESSURE

200

CALCULATED 24-HOUR RATE

OIL—BBL.

0

GAS—MCF.

912

WATER—BBL.

0

OIL GRAVITY-API (CORR.)

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

Sold

TEST WITNESSED BY

J. T. Crawford

35. LIST OF ATTACHMENTS

Logs per Item No. 26

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

SIGNED

Randy Atkins

TITLE

Staff Assistant (SG)

DATE

12-30-77

0+4 USGS - H
1 Div
1 Susp
1 RC

*(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 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 13: 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 (SEED), TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES

FORMATION	TOP	BOTTOM	DESCRIPTIO , CONTENTS, ETC.	38. GEOLOGIC MARKERS
Queen	3187	3317	Gas Zone	<div> <div>NAME</div> <div>Yates</div> <div>Seven Rivers</div> <div>Queen</div> <div>Grayburg</div> </div> <div> <div>MEAS DEPTH</div> <div>2472'</div> <div>3162'</div> <div>3176'</div> <div>3448'</div> </div> <div> <div>TOP</div> <div>FACE WEST DEPTH</div> </div>