

Operator Name Murfin Drilling Co. Inc.

Lease Name ELVIN Well # 4

Sec. 14 Twp. 3S Rge. 27 W

East
 West

County DECATUR

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all drill stem tests giving interval tested, time tool open and closed, flowing and shut-in pressures, whether shut-in pressure reached static level, hydrostatic pressures, bottom hole temperature, fluid recovery, and flow rates if gas to surface during test. Attach extra sheet if more space is needed. Attach copy of log.

Drill Stem Tests Taken Yes No
(Attach Additional Sheets.)
Samples Sent to Geological Survey Yes No
Cores Taken Yes No
Electric Log Run Yes No
(Submit Copy.)
List all E.Log

Log Formation (Top), Depth and Datums			Sample
Name	Top	Datum	

CASING RECORD New Used
Report all strings set-conductor, surface, intermediate, production, etc.

Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weight Lbs./Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives
Surface	12 1/4"	8 5/8"	24#	226'		225	
Production		4 1/2"	10.5#0	3845		125	

ADDITIONAL CEMENTING/SQUEEZE RECORD

Purpose:	Depth Top/Btm	Type of Cement	# Sacks Used	Type and Percent Additives
<input checked="" type="checkbox"/> Perforate	1500	Swift multi Density	150	3% Calcium Chloride + .25lb/sk flo-cel
<input type="checkbox"/> Protect Csg	950	"	150	"
<input type="checkbox"/> Plug Back TD	725	"	125	"
<input type="checkbox"/> Plug Off Zone				

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	Depth
4	3663-64(F), 3577-80(TOR) & 3522-26 (OREAD)	Perf 4 spf (New Perforations)	
4	3675-78(G), 3663-64(F), 3627-31(D)	A500 15%FE	
4	3577-80(Tor)	A250 15% MCA	
4	3522-26 (Oread)	A500 15% MCA	

TUBING RECORD	Size	Set At	Packer At	Liner
				<input type="checkbox"/> Yes <input type="checkbox"/> No

Date of First, Resumed Production, SWD or Inj. WAITING KCC APPROVAL TO START INJECTION	Producing Method <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other
Estimated Production Per 24 Hours	Oil Bbls Gas Mcf Water Bbls Gas-Oil Ratio Gravity

Disposition of Gas: Vented Sold Used on Lease (If vented, submit ACO-18.)

METHOD OF COMPLETION
 Open Hole Perf. Dually Comp. Commingled
 Other (Specify) _____

Production Interval _____