

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.

NM-8269

5. LEASE DESIGNATION AND SERIAL NO.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG*

1a. TYPE OF WELL:		OIL WELL ☒	GAS WELL ☐	DRY ☐	Other ☐					
1b. TYPE OF COMPLETION:		NEW WELL ☒	WORK OVER ☐	DEEP-EN ☐	PLUG BACK ☐	DIFF. RESVR. ☐	Other ☐			
2. NAME OF OPERATOR Tenneco Oil Company										
3. ADDRESS OF OPERATOR Suite 1200 Lincoln Tower Building - Denver, Colo. 80203										
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 900' F/NL, 2630' F/EL At top prod. interval reported below At total depth										
14. PERMIT NO.			DATE ISSUED							
15. DATE SPUDDED 8-29-69						16. DATE T.D. REACHED 9-3-69	17. DATE COMPL. (Ready to prod.) 9-7-69	18. ELEVATIONS (DF, REB, RT, GR, ETC.)* 7016 GR	19. ELEV. CASINGHEAD	
20. TOTAL DEPTH, MD & TVD 1635		21. PLUG, BACK T.D., MD & TVD		22. IF MULTIPLE COMPL., HOW MANY*		23. INTERVALS DRILLED BY Rotary		ROTARY TOOLS CABLE TOOLS		
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 1624-1635 Lower Hospah								25. WAS DIRECTIONAL SURVEY MADE Yes		
26. TYPE ELECTRIC AND OTHER LOGS RUN Gamma Ray-Density								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
10-3/4		32.75		78		13-3/4		60 SKS		
7		20		1624		9-7/8		125 SKS		
29. LINER RECORD										30. TUBING RECORD
Size	Top (MD)	Bottom (MD)	Sacks Cement*	Screen (MD)	Size	Depth Set (MD)	Packer Set (MD)			
					2-7/8"	1604	NONE			
31. PERFORATION RECORD (Interval, size and number) Open hole					32. ACID, SHOT, FRACTURE, CEMENT, ETC. DEPTH INTERVAL (MD) AMOUNT AND OF MATERIAL USED NONE					
33.* PRODUCTION										
DATE FIRST PRODUCTION 9-7-69		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Pumping 2 1/4" Tubing Pump								
DATE OF TEST 9-7-69	HOURS TESTED 24	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO			
				96	TSTM	0	TSTM			
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)				
						24				
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)							TEST WITNESSED BY			
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>S. A. Jank</u>		TITLE <u>SR. PRODUCTION CLERK</u>				DATE <u>9-10-69</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 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 identifying 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.)

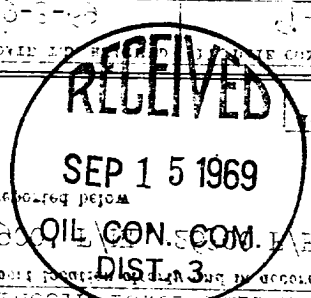
37. SUMMARY OF POROUS ZONES:

SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF; CORED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CUSHION USED, KIESE TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.
Point Lookout	315	541	
Upper Hospah	1554	1602	
Lower Hospah	1626	TD	
			Sandstone - water
			Sandstone - oil
			Sandstone - oil

38. GEOLOGIC MARKERS

NAME	MEAS. DEPTH	TOP
Mancos Shale	541	
Crevasse Canyon	877	



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