

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.

5. LEASE DESIGNATION AND SERIAL NO.

N00-C-14-20-3007

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

Navajo Allotted

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Maxwell Bah-e

9. WELL NO.

2

10. FIELD AND POOL, OR WILDCAT

Lone Pine Dakota

11. SEC., T., R., M., OR BLOCK AND SURVEY
OR AREA

Sec. 18, T17N, R8W

12. COUNTY OR
PARISH

McKinley

13. STATE

N. M.

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

Gilbert Maxwell

3. ADDRESS OF OPERATOR

Box 234, Farmington, N. M. 87401

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

At surface

At top prod. interval reported below

1980' fs1 1980' fw1

At total depth

14. PERMIT NO.

DATE ISSUED

JAN 5 1971
OIL CON. COM.
DIST. 3

15. DATE SPUDDED

12/16/70

16. DATE T.D. REACHED

12/22/70

17. DATE COMPL. (Ready to prod.)

12/28/70

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

6929'

19. ELEV. CASINGHEAD

20. TOTAL DEPTH, MD & TVD

2780' Gr.

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

2741'

22. IF MULTIPLE COMPL.,

HOW MANY*

Single

23. INTERVALS

DRILLED BY

ROTARY TOOLS

O-T.D.

CABLE TOOLS

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*

Dakota 2708' - 13'

25. WAS DIRECTIONAL
SURVEY MADE

Yes

26. TYPE ELECTRIC AND OTHER LOGS RUN

Dual Induction-Laterolog, Induction Electrical, Gamma Ray-Caliper Density No

27. WAS WELL CORED

28. CASING RECORD (Report all strings set in well)

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
8 5/8"	24#	109'	12 1/4"	75 sx.	---
5 1/2"	14#	2779'	7 7/8"	275 sx.	---

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					2 3/8"	2721'	

31. PERFORATION RECORD (Interval, size and number)

2708' - 13'

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
2708'-13'	750 gal. 15% HCl

33.* PRODUCTION

DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)				WELL STATUS (Producing or shut-in)	
12/28/70		Flowing				Shut In	
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
12/28/70	21	3/4"	————→	480	480 est.	---	1000-1 est.
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)	
100 psi	220 psi	————→	549	549	---	52 ⁰	

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

Vented

TEST WITNESSED BY

T. A. Dugan

35. LIST OF ATTACHMENTS

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

Original signed by T. A. Dugan

SIGNED

TITLE

Engineer

DATE

12/31/70

*(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 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	TOP TESTED DEPTH
				LOG TOPS		
				UPPER XXXXXXXX	1025'	
				LOWER XXXXXXXX	1730'	
				XXXXXXXXXXXX	1800'	
				XXXXXXXXXXXX	2200'	
				ALLISON-GIBSON	Surface	
				Hosta	419'	
				Cravasse Canyon	619'	
				Upper Hospah	1625'	
				Lower Hospah	1710'	
				Lower Gallup	1806'	
				Lower Mancos	2100'	
				Dakota	2547'	
				Total Depth	2789'	