

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYHOLD ALL REPORTS
SUBMIT IN DUPLICATE
(See other in-
reverse side)

CONFIDENTIAL

Form approved.
Bureau No. 42-R355.5.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL: OIL WELL ☒ GAS WELL ☐ DRY ☐ Other ☐		5. LEASE DESIGNATION AND SERIAL NO. N00-C-14-20-4305	
b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other JAN 11 1972		6. IF INDIAN, ALLOTTEE OR TRIBE NAME Navajo Allotted	
2. NAME OF OPERATOR C. C. Kennedy		7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR Box 234, Farmington, N. H. 87401		8. FARM OR LEASE NAME BSK Edna #1	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface At top prod. interval reported below 2200' fnl 1650' fnl At total depth		9. WELL NO. 1	
14. PERMIT NO.		DATE ISSUED	
15. DATE SPUDDED 12/20/71		16. DATE T.D. REACHED 1/5/72	
17. DATE COMPL. (Ready to prod.) 1/9/72		18. ELEVATIONS (DF, REB, RT, GR, ETC.)* 7045' R.K.B.	
20. TOTAL DEPTH, MD & TVD 2885'		21. PLUG, BACK T.D., MD & TVD 2840'	
22. IF MULTIPLE COMPL., HOW MANY* Single		23. INTERVALS DRILLED BY 0-2885'	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* Dakota 2819' - 2823'		25. WAS DIRECTIONAL SURVEY MADE Yes	
26. TYPE ELECTRIC AND OTHER LOGS RUN Gamma Ray-Caliper-Compensated Density, & Sonic - Dual Induction-Lat.		27. WAS WELL CORED No	
28. CASING RECORD (Report all strings set in well)			
CASINO SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE
8 5/8"	24#	78'	11"
5 1/2"	14#	2881'	7 7/8"
29. LINER RECORD			
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*
30. TUBING RECORD			
SIZE	DEPTH SET (MD)	PACKER SET (MD)	
2 3/8"	2830'		
31. PERFORATION RECORD (Interval, size and number)			
2819' - 2823'			
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED	
2819' - 2823'		750 gal. 15% HCl.	
33.* PRODUCTION			
DATE FIRST PRODUCTION 1/6/72	PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) flowing		WELL STATUS (Producing or shut-in) Producing
DATE OF TEST 1/9/72	HOURS TESTED 16	CHOKE SIZE ---	PROD'N. FOR TEST PERIOD ---
FLOW, TUBING PRESS.	CASING PRESSURE 265	CALCULATED 24-HOUR RATE ---	OIL—BBL. 118
			GAS—MCF. Not measured
			WATER—BBL. 2
			OIL GRAVITY-API (CORR.) 53°
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Vented			
35. LIST OF ATTACHMENTS T. A. Dugan			
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records			
SIGNED T. A. Dugan TITLE Engineer DATE 1/10/72			

*(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

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	GEOLOGIC MARKERS		
				NAME	MEAS. DEPTH	TRUE VERT. DEPTH
				LOG TOPS		
				Allison-Gibson	Surface	
				Hosta	602'	
				Crevasse Canyon	797'	
				Upper Hospah	1775'	
				Lower Hospah	1872'	
				Lower Gallup	1968'	
				Lower Mancos	2311'	
				Dakota "A"	2673'	
				Dakota "B"	2760'	
				Dakota "D"	2803'	
				Total Depth	2895'	