

5 USGS 1 Nav. 1 Kennedy 1 File
 UNITED STATES
 DEPARTMENT OF THE INTERIOR
 GEOLOGICAL SURVEY

HOLD ALL REPORTS CONFIDENTIAL
 SUBMIT IN DUPLICATE*
 (See other instructions on reverse side)
 Budget Bureau No. 42-R355.5.

5. LEASE DESIGNATION AND SERIAL NO.
MOO-C-14-20-4305

6. IF INDIAN, ALLOTTEE OR TRIBE NAME
Navajo Allotted

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
BSK Edna #1

9. WELL NO.
1

10. FIELD AND POOL, OR WILDCAT
Lone Pine Dakota

11. SEC. T., R., M., OR BLOCK AND SURVEY OR AREA
Sec. 8, T17N, R9W

12. COUNTY OR PARISH
McKinley

13. STATE
N. M.

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
C. C. Kennedy

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 **2200' fml 1650' fml**
 At total depth

14. PERMIT NO. DATE ISSUED
JAN 11 1972

15. DATE SPUDDED **12/23/71** 16. DATE T.D. REACHED **1/5/72** 17. DATE COMPL. (Ready to prod.) **1/9/72** 18. ELEVATIONS (DF, REB, BT, GR, ETC.)* **7045' B.K.B.** 19. ELEV. CASINGHEAD

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'** ROTARY TOOLS CABLE TOOLS

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*
Dakota 2819' - 2823'

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)

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
8 5/8"	24#	78'	11'	40 sx.	---
5 1/2"	14#	2881'	7 7/8"	225 sx.	---

29. LINER RECORD

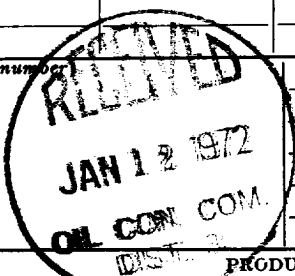
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)

30. TUBING RECORD

SIZE	DEPTH SET (MD)	PACKER SET (MD)
2 3/8"	2830'	

31. PERFORATION RECORD (Interval, size and number)

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
2819' - 2823'	750 gal. 15% HCl.



33.* PRODUCTION

DATE FIRST PRODUCTION **1/8/72** PRODUCTION METHOD (*Flowing, gas lift, pumping—size and type of pump*) **flowing** WELL STATUS (*Producing or shut-in*) **Producing**

DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
1/9/72	16	---	→	118	Not measured	2	---

FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORE.)
53	265	→	177	---	3	53°

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

SIGNED Original signed by 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.)

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	GEOLOGIC MARKERS
			Lowr		38.
				LOG TOPS	
				ATTison-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"	2808'
				Total Depth	2885'