

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE\*

(See other instructions on reverse side)

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

5. LEASE DESIGNATION AND SERIAL NO.

N00-C-14-20-5792

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

Navajo Allotted

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Navajo Allotted 25

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Wildcat

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

SEC. 25, T20N, R5W

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

Filon Exploration Corporation

3. ADDRESS OF OPERATOR c/o Minerals Management, Inc.

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)\*  
501 Airport Dr., Suite 105, Farmington, N.M. 87401

At surface

At top prod. interval reported below 1900' FEL, 660' FSL, SEC. 25, T20N, R5W

At total depth

14. PERMIT NO. DATE ISSUED

15. DATE SPUEDDED 2-23-76 16. DATE T.D. REACHED 2-29-76 17. DATE COMPL. (Ready to prod.) 3-11-76 PxA 18. ELEVATIONS (DF, RKB, RT, GR, ETC.)\* 6645 RT 19. ELEV. CASINGHEAD 6633

20. TOTAL DEPTH, MD & TVD 3820' 21. PLUG, BACK T.D., MD & TVD 22. IF MULTIPLE COMPL., HOW MANY\* 23. INTERVALS DRILLED BY → Yes ROTARY TOOLS CABLE TOOLS

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)\* None 25. WAS DIRECTIONAL SURVEY MADE No

26. TYPE ELECTRIC AND OTHER LOGS RUN Formation Density, Temperature, Caliper, Dual Induction, Borehole Compensated Sonic, F-Log 27. WAS WELL CORED No

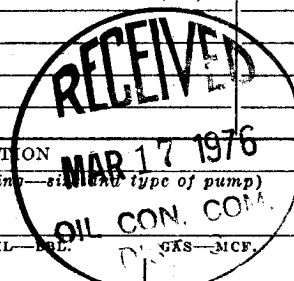
28. CASING RECORD (Report all strings set in well)

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
8 5/8"	24.00#	229'	12 1/4"	165 sx Class "B"	-
4 1/2"	10.50#	3280'	7 7/8"	75 sx Class "B"	1066'

29. LINER RECORD					30. TUBING RECORD		
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)

31. PERFORATION RECORD (Interval, size and number) 32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC. 1976

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33.\* PRODUCTION DATE FIRST PRODUCTION PRODUCTION METHOD (Flowing, gas lift, pumping—state type of pump) WELL STATUS (Producing or shut-in)

DATE OF TEST HOURS TESTED CHOKE SIZE PROD'N. FOR TEST PERIOD OIL—BBL. GAS—MCF. WATER—BBL. GAS-OIL RATIO FLOW. TUBING PRESS. CASING PRESSURE CALCULATED 24-HOUR RATE OIL—BBL. GAS—MCF. WATER—BBL. OIL GRAVITY-API (CORR.)

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 [Signature] TITLE Minerals Management, Inc. DATE 3-15-76

# 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
DST #1	3198'	3500'	Open preflow 15 min., good blow throughout. ISIP 30 min., FFP 90 min. weak blow throughout, FSIP 180 min. IHP 1527 IFP 15 min., 529/582 ISIP 30 min., 1317 FFP 90 min., 621/924 FSIP 180 min., 1422 FHP 1527 BHT 1150 Recovered 1767' drilling mud, 90' water. Bottom hole sample 2100cc water	Cliffhouse Point Lookout Mancos Gallup Massive Gallup Total Depth	575' 2430' 3582' 3208' 3578' 3820'
DST #2	3500'	3820'	IHP 1683 IFP 15 min., 53/66 ISIP 30 min., 212 FFP 90 min., 198 FHP 1683 BHT 1150 Recovered 90' drilling mud. Bottom hole sample 2200cc drilling mud. Swab total 20 1/2 hrs. (3 days). Recovered 73 Bbls. load water plus		
SWAB	3820'	3500'			