

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.

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 Dome Petroleum Corporation							
3. ADDRESS OF OPERATOR c/o Minerals Management Inc. 501 Airport Dr., Suite 105, Farmington, N.M. 87401							
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 2210' FNL, 1650' FWL, SEC. 15, T19N, R5W At top prod. interval reported below At total depth							
14. PERMIT NO.				DATE ISSUED			
15. DATE SPUDDED 9-28-76							
16. DATE T.D. REACHED 10-14-76							
17. DATE COMPL. (Ready to prod.) 10-31-76							
18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 6588' GR 6600' KB							
19. ELEV. CASINGHEAD -							
20. TOTAL DEPTH, MD & TVD 5390'		21. PLUG, BACK T.D., MD & TVD 5214'		22. IF MULTIPLE COMPL., HOW MANY* -		23. INTERVALS DRILLED BY ROTARY TOOLS Yes	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 5160'-5169' Entrada							
25. WAS DIRECTIONAL SURVEY MADE No							
26. TYPE ELECTRIC AND OTHER LOGS RUN Gamma Ray-Sonic Dual Induction-Laterolog, Compensated Neutron-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	
10 3/4"		40.5#		224'		15"	
7"		23.#		5242'		8 3/4"	
29. LINER RECORD		30. TUBING RECORD		31. PERFORATION RECORD (Interval, size and number of holes)			
SIZE		TOP (MD)		BOTTOM (MD)		SACKS CEMENT	
2 7/8"		3002'		ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
32. PRODUCTION		33. TEST PERIOD		34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)			
DATE FIRST PRODUCTION 11-1-76		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Pumping-2 1/2"x2"x16"		WELL STATUS (Producing or shut-in) Producing			
DATE OF TEST 11-14-76		HOURS TESTED 24		CHOKE SIZE Open		PROD'N. FOR TEST PERIOD 360	
FLOW. TUBING PRESS. TSTM		CASING PRESSURE TSTM		CALCULATED 24-HOUR RATE 360		OIL GRAVITY-API (CORR.) 33.6°	
35. LIST OF ATTACHMENTS Vented							
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records							
SIGNED J. Arnold Smith TITLE Area Manager DATE 11-15-76							

*(See Instructions and Spaces for Additional Data on Reverse Side)

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	TRUE VERT. DEPTH
DST #1				Lower Menefee	1134'		
Entrada	5155'	5170'	Preflow 45 min., ISIP 60 min., Tool Open 60 min., FSIP 2 hrs. Recovered 2326' fluid; 2321' oil, 5' mud. IHH 2422 psi IFP 184-425 psi ISIP 2074 psi FFP 447-895 psi FSIP 2103 psi FHH 2378 psi BHT 156° F	Point Lookout Mancos Gallup Greenhorn Graneros Dakota Morrison Summerville Entrada	1994' 2112' 2928' 3917' 4004' 4140' 4257' 5089' 5161'		