

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 _____	7. UNIT AGREEMENT NAME 			
b. TYPE OF COMPLETION:				8. FARM OR LEASE NAME Federal 15			
NEW WELL ☒	WORK OVER ☐	DEEP-EN ☐	PLUG BACK ☐	DIFF. RESVR. ☐	Other _____		
2. NAME OF OPERATOR Dome Petroleum Corporation				9. WELL NO. 2			
3. ADDRESS OF OPERATOR % Minerals Management Inc., Suite 105, 501 Airport Drive, Farmington, New Mexico 87401				10. FIELD AND POOL, OR WILDCAT Undesignated Entrada			
4. LOCATION OF WELL (<i>Report location clearly and in accordance with any State requirements</i>) At surface 990' FWL, 1780' FNL, SEC. 15, T19N, R5W At top prod. interval reported below At total depth				11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA SEC. 15, T19N, R5W			
14. PERMIT NO.				DATE ISSUED			
15. DATE SPUDDED 2-18-77		16. DATE T.D. REACHED 2-26-77		17. DATE COMPL. (Ready to prod.)		18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 6604' GR, 6617' KB	
19. ELEV. CASINGHEAD 6604'		20. TOTAL DEPTH, MD & TVD 5428'					
21. PLUG BACK T.D., MD & TVD 5370'		22. IF MULTIPLE COMPL., HOW MANY*		23. INTERVALS DRILLED BY →		ROTARY TOOLS CABLE TOOLS 0-5428'	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 5183'-5380' Entrada							25. WAS DIRECTIONAL SURVEY MADE no
26. TYPE ELECTRIC AND OTHER LOGS RUN Dual Induction-Laterolog, CNL-Density							27. WAS WELL CORED no
CASING RECORD (Report all strings set in well)							
CASINO SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD		AMOUNT PULLED	
10 3/4"	32.75	203'	15"	200 sx			
7"	23	5426'	8 3/4"	328 sx & 355 sx			
				2 stage w/DV @ 2785'			
LINER RECORD				TUBING RECORD			
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					2 7/8	3030'	
31. PERFORATION RECORD (Interval, size and number) 5184'-5192' w/2 SPF				32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
				DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED	
33.* PRODUCTION							
DATE FIRST PRODUCTION 3-15-77		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Flowing				WELL STATUS (Producing or shut-in)	
DATE OF TEST 3-16-77	HOURS TESTED 24	CHOKE SIZE Open	PROD'N. FOR TEST PERIOD →	OIL—BBL. 276	GAS—MCF. TSTM	WATER—BBL. 0	GAS-OIL RATIO ---
FLOW. TUBING PRESS. 45	CASING PRESSURE 45	CALCULATED 24-HOUR RATE →	OIL—BBL. 276	GAS—MCF. TSTM	WATER—BBL. 0	OIL GRAVITY-API (CORR.) 32.4	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) No gas						TEST WITNESSED BY W. E. Landry	
35. LIST OF ATTACHMENTS None							
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records							
SIGNED [Signature]				TITLE Area Manager			
				DATE 3-31-77			

*** (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	TRUE VERT. DEPTH
				La Ventana	522'	
				Pt. Lookout	2025'	
				Mancos Shale	2115'	
				Gallup	2945'	
				Sanostee	3608'	
				Greenhorn	3920'	
				Graneros	4010'	
				Dakota	4142'	
				Morrison	4260'	
				Summerville	5115'	
				Todilto	5151'	
				Entrada	5182'	
				Carmel	5407'	