

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

(See other instructions on reverse side)

WELL COMPLETION OR RECOMPLETION REPORT AND LOG*

1a. TYPE OF WELL: OIL ☐ GAS ☒ DRY ☐ Other _____

b. TYPE OF COMPLETION:

NEW WELL ☒	WORK OVER ☐	DEEP-EN ☐	PLUG BACK ☐	DIFF. RESVR. ☐	Other ☐
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2. NAME OF OPERATOR

~~3. ADDRESS OF ORIGIN~~ **D E FLORANCE**

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)

At surface

1650' SL & 1850' EL

At top prod. interval reported below

At total depth

14. PERMIT NO.

DATE ISSUED

12. COUNTY OR
PARISH

13. STATE

15. DATE SPUDDED	16. DATE T.D. REACHED	17. DATE COMPL. (<i>Ready to prod.</i>)	18. ELEVATIONS (DE RKB RT GR ETC) *	19. ELEV. CASINGHEAD
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12/04/70	12/07/70	12/23/70	7522 KB	7511
20. TOTAL DEPTH, MD & TVD	21. PLUG, BACK T.D., MD & TVD	22. IF MULTIPLE COMPL.,	23. INTERVALS	ROTARY TOOLS
				CABLE TOOLS

3351	3316	→	0-3351	0
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*				25. WAS DIRECTIONAL

3188-3288 Pictured Cliffs		No
26. TYPE ELECTRIC AND OTHER LOGS RUN		27. WAS WELL CORED

28. ~~IES Gamma Ray Caliper - Density~~ ~~No~~

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
8 5/8	20 lb.	100	12 1/4	80 sacks	0
4 1/2	9.5 lb.	3335	6 3/4	125 sacks	0

29. LINER RECORD					30. TUBING RECORD		
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					1 1/4"	3280	

31. PERFORATION RECORD (*Interval, size and number*)

3188-94)
3209-13) 2 1/2" hole/foot
3225-32)
3278-88)

32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
3188-3278	40,000 lb. sand and 53,700 gallons of water

33.* PRODUCTION

DATE FIRST PRODUCTION	PRODUCTION METHOD (<i>Flowing, gas lift, pumping—size and type of pump</i>)	WELL STATUS (<i>Producing or shut-in</i>)
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DATE OF TEST	HOURS TESTED	WELL NO.	PROD'N. FOR	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS/OIL RATIO
12/23/70		Flowing					SI

07/26/71	3	3/4					
FLOW PRESS.	CASING PRESSURE	CALCULATED	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)	

34. DISPOSITION OF GAS (Specify use for fuel, vented, etc.)	1508	TEST WITNESSED BY
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35. ~~Verbal~~ ATTACHMENTS

36. ~~False~~ ~~for~~ ~~to~~ ~~the~~ ~~fore~~ ~~and~~ ~~attached~~ ~~information~~ ~~is~~ ~~complete~~ ~~and~~ ~~correct~~ ~~as~~ ~~determined~~ ~~from~~ ~~all~~ ~~available~~ ~~records~~

SIGNED [Signature] TITLE Agent DATE 08/19/71

*** (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
Pictured Cliffs	3190	3314	Sand and shale - gas	Ojo Alamo Kertland Pictured Cliffs	2901 3082 3190	