

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

Jack A. Cole

3. ADDRESS OF OPERATOR

P. O. Box 191, Farmington, New Mexico 87401

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

At surface 1770/S & 1850/W Sec. 17-T23N-R3W

At top prod. interval reported below

At total depth

Same

Same

14. PERMIT NO.

DATE ISSUED

5. LEASE DESIGNATION AND SERIAL NO.

Contract 396

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

Jicarilla Apache

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Apache Hills

9. WELL NO.

5

10. FIELD AND POOL, OR WILDCAT

Ballard PC

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

Sec. 17-T23N-R3W

12. COUNTY OR

PARISH

Rio Arriba N. M.

13. STATE

15. DATE SPUDDED 2-17-79 16. DATE T.D. REACHED 2-19-79 17. DATE COMPL. (Ready to prod.) 4-27-79 18. ELEVATIONS (DF, REB, RT, GR, ETC.)* 7360 Gr. 19. ELEV. CASINGHEAD 7364

20. TOTAL DEPTH, MD & TVD 3195 21. PLUG, BACK T.D., MD & TVD 3149 22. IF MULTIPLE COMPL., HOW MANY* 23. INTERVALS DRILLED BY → All 24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 3072-3116 Pictured Cliffs 25. WAS DIRECTIONAL SURVEY MADE Yes

26. TYPE ELECTRIC AND OTHER LOGS RUN

ES-Induction and GR-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	CEMENTING RECORD	AMOUNT PULLED
8 5/8	24.0	130	12 1/4	100 sacks	None
4 1/2	9.5	3189	7 7/8	200 sacks	None

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					1 1/4	3065	No

31. PERFORATION RECORD (Interval, size and number)

3072-78
3107-3116 Total 28 holes

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
3072-3116	40,000 lbs. sand
	40,000 gals. H ₂ O

33.*

PRODUCTION

DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)				WELL STATUS (Producing or shut-in) Shut in	
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
4-27-79	3	3/4	→				
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OTHER FLUIDS (GAL.)	
	770	→		1200	None		

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)

Vented

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

TITLE

Operator

DATE May 1, 1979

*(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

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	38. GEOLOGIC MARKERS	
				NAME	MEAS. DEPTH
					TOP
					TRUE VERT. DEPTH
Ojo Alamo	2720	2825	Sand		
Kirtland	2825	2955	Shale		
Fruitland	2955	3070	Shale and Coal		
Pictured Cliffs	3070	3120	Sand and Shale		
Crews	3120	TD	Shale		