

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other in-
structions on
reverse side)Form approved.
Budget Bureau No. 42-R355.6.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG*

1a. TYPE OF WELL: OIL WELL ☒ GAS WELL ☐ DRY ☐ Other ☐		12. COUNTY OR PARISH Rio Arriba		13. STATE N.M.	
b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other ☐		14. PERMIT NO. NA		DATE ISSUED NA	
2. NAME OF OPERATOR Kosai Oil & Gas, Inc.		15. DATE SPUNDED 8-16-81		16. DATE T.D. REACHED 8-20-81	
3. ADDRESS OF OPERATOR 2000 Energy Center One, 717 17th St., Denver, Co. 80202		17. DATE COMPL. (Ready to prod.) 12-21-81		18. ELEVATIONS (DF, RKB, RT, GR, ETC.) 7087' (RT)	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 2040' TSL and 340' TSL, Sec. 6 T23N-R7W		19. ELEV. CASINGHEAD same		20. FIELD AND POOL, OR WILDCAT Lybrook-Gallun Unit.	
At top prod. interval reported below same		21. PLUG BACK T.D., MD & TVD 5532' ID 5532'		22. IF MULTIPLE COMPL., HOW MANY? NA	
At total depth same		23. INTERVALS DRILLED BY Rotary		24. ROTARY TOOLS CABLE TOOLS	
5. NAME OF OPERATOR Kosai Oil & Gas, Inc.		25. WAS DIRECTIONAL SURVEY MADE No		26. TYPE ELECTRIC AND OTHER LOGS RUN Dual Induction, Compensated Neutron, Spectralog	
6. NAME OF OPERATOR Kosai Oil & Gas, Inc.		27. WAS WELL CORED No		28. CASING RECORD (Report all strings set in well)	
7. UNIT AGREEMENT NAME West Lybrook Unit		29. LINER RECORD		30. TUBING RECORD	
8. FARM OR LEASE NAME Federal-6		31. PERFORATION RECORD (Interval, size and number) perfs from 5533-5694' w/ 10 holes 1 shot per zone 0.38" holes		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
9. WELL NO. 43		33. PRODUCTION DATE FIRST PRODUCTION 12-21-81 PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) flowing WELL STATUS (Producing or shut-in) shut-in		34. DISTRIBUTION OF GAS (Sold, used for fuel, vented, etc.) vented (will be sold when connected pipeline) Lee Burton Oil Company	
10. FIELD AND POOL, OR WILDCAT Lybrook-Gallun Unit.		35. LIST OF ATTACHMENTS none (will submit complete completion history when upper Gallun complete)		36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records	
11. SEC. T. R. M., OR BLOCK AND SURVEY OR AREA Sec. 6-T23N-R7W		37. SIGNED David P. Hewell		38. TITLE District Engineer	
12. COUNTY OR PARISH Rio Arriba		39. DATE 12-23-81		40. DATE 12-23-81	

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

NMOCQ

6-63

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, 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 State office. See instructions on items 22 and 24, and 33, below regarding separate reports for separate completions.

If recorded 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:			38. GEOLOGIC MARKERS	
SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF; CORED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CUSHION (SED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES)			TOP	
FORMATION	TOP	BOTTOM	NAME	MEAS. DEPTH
Pictured Cliff Mesa Verde	1960' 3470'	2000' 4415'	Manchos	4540'
wet (no show samples) wet (no show samples)				