

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

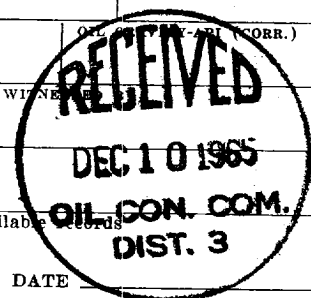
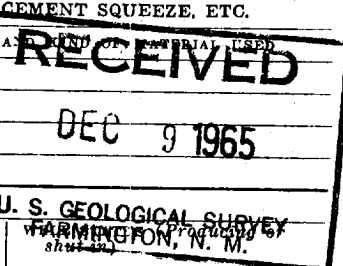
SUBMIT IN DUPLICATE*

(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 <u>Wildcat</u>		
b. TYPE OF COMPLETION:				NEW WELL ☐	WORK OVER ☐	DEEP-EN ☐	PLUG BACK ☐	DIFF. RESVR. ☐	Other <u>None</u>
2. NAME OF OPERATOR <u>Crane Drilling Company</u>									
3. ADDRESS OF OPERATOR <u>Box 1774, Farmington, New Mexico</u>									
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* <u>At 1080 FNL, 1940 FEL</u> At top prod. interval reported below At total depth <u>1080 FNL, 1940 FEL</u>									
14. PERMIT NO. <u>U.S.G.S.</u>				DATE ISSUED <u>June, 1964</u>			12. COUNTY OR PARISH <u>Sandoval</u>		13. STATE <u>N.M.</u>
15. DATE SPUDDED <u>6-22-64</u>	16. DATE T.D. REACHED <u>7-4-64</u>	17. DATE COMPL. (Ready to prod.) <u>None</u>	18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* <u>6874</u>			19. ELEV. CASING HEAD <u>None</u>			
20. TOTAL DEPTH, MD & TVD <u>1539</u>		21. PLUG, BACK T.D., MD & TVD <u>None</u>		22. IF MULTIPLE COMPL., HOW MANY* <u>None</u>		23. INTERVALS DRILLED BY <u>0-1539</u>		ROTARY TOOLS <u>None</u>	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* <u>None</u>								25. WAS DIRECTIONAL SURVEY MADE <u>Vertical Surveys</u>	
26. TYPE ELECTRIC AND OTHER LOGS RUN <u>Lane Wells Electric Logs</u>								27. WAS WELL CORED <u>None</u>	
28. CASING RECORD (Report all strings set in well)									
CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD			AMOUNT PULLED		
<u>4.5</u>	<u>9.5</u>	<u>700</u>	<u>6 1/4</u>	<u>50 sks. reg. cem. circulated to surface</u>			<u>None</u>		
<u>None</u>	<u>None</u>	<u>1539</u>	<u>3 7/8</u>	<u>25 sks. 1539 & surface 10 sks.</u>			<u>Work done by Blackmon Cementers, under supervision Mr. Burton.</u>		
29. LINER RECORD									
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	30. TUBING RECORD				
<u>None</u>	<u>None</u>				SIZE	DEPTH SET (MD)	PACKER SET (MD)		
31. PERFORATION RECORD (Interval, size and number) <u>None</u>					32. ACID, SHOT, FRACTURE CEMENT SQUEEZE, ETC.				
					DEPTH INTERVAL (MD)		AMOUNT AMOUNT OF MATERIAL USED		
					<u>None</u>		<u>None</u>		
33.* <u>None</u>					PRODUCTION				
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)							
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO		
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL—BBL. (CORR.)			
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) <u>None</u>							TEST WIRE		
35. LIST OF ATTACHMENTS <u>3 copies of log sent in.</u>									
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records									
SIGNED <u>Crane Drilling Company</u>				TITLE <u>Owner</u>			DATE <u>Dec 9 1965</u>		

(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
Mesaverde Kencos Gallup	Surface 698 1416	698 1416 1539	sand w. interbbed. shale & coal shale shale w. some sand No cores or drill stem tests, no water flows.	3. Mesaverde Kencos Gallup	698 698 1416	698 698 1416

5 copies U.S.G.S.
1 copy Crane Drilling Co.
1 copy Don Burton
1 copy Horace F. McKay, Jr.
1 copy file