

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 ☐	DEE-EN ☐	PLUG BACK ☐	DIFF. RESER. ☐	Other _____
2. NAME OF OPERATOR CHACE OIL COMPANY, INC.							
3. ADDRESS OF OPERATOR 313 Washington S.E., Albuquerque, New Mexico 87108							
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface: Unit "A" 790' NL 800' EL At top prod. interval reported below At total depth							
14. PERMIT NO. _____							
15. DATE SET DOWN		16. DATE T.D. REACHED		17. DATE COMPLE. (Ready to prod.)		18. ELEVATION OF SURF. REL. GR. ETC.*	
1-31-76		2-8-76		2-25-76		6850' GR	
20. TOTAL DEPTH, MD & TVD		21. PLUG BACK T.D., MD & TVD		22. DEPTH THICK COMPI HOW MANY*		23. INTERVALS (FEET) TO TOP OF PROD. INTERVAL	
1931		1850				10-1931	
24. PRODUCTION INTERVALS OF THIS COMPLETION (TOP, BOTTOM, NAME (MD AND TVD)*) 1667-1763 Upper Chacra (La Ventana?)							
25. TYPE OF LOGS AND OTHER LOGS RUN Induction & Gamma Density							
27. WAS WELL CURED NO'							
CASING RECORD (Report all strings set in well)							
CASING SIZE	WEIGHT LB/FT.	DEPTH SET (MD)	HOSE SIZE	AMOUNT OF RECORD	AMOUNT PULLED		
8 5/8"	24	92'	13 1/2"	80 SXS	NONE		
4 1/2"	10.5	1877	7 7/8"	260 SXS	NONE		
29. LINER RECORD							
SIZE	TOP (MD)	BOTTOM (MD)	SAKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACER SET (MD)
					1 1/2"	1765'	NONE
31. CORRELATION TABLE (List all cor. numbers)							
1667-70 1748-52							
1672-93 1742-46							
1698-170'							
1759-63 One shot per foot							
32. ACID STIM. TREATMENT, CEMENT SQUEEZE, ETC.							
1667-1763 Frac'd with 60,000# 10-20 Sand-46,000 Gal. Slick water							
PRODUCTION							
DATE FIRST PRODUCTION							
2-26-76							
METHOD (Flowing, gas lift, pumping, etc. and type of pump)							
Flowing							
DATE FIRST PRODUCTION	HOSE SIZE	PRODN. FOR TEST PERIOD	DATE FIRST PRODUCTION	HOSE SIZE	PRODN. FOR TEST PERIOD	WELL STATUS (Producing or Shut-in)	
4-6-76	12	Various	0	268	TSTM	Shut-in	
FLOW-TURNING PRESS. (GAL. PER MIN. OR LBS. PER SQ. IN. OR OTHER UNIT)							
Various Various 900							
WELL CLOSURE (GAS, KILL, used for fuel, vented, etc.)							
Vented							
ABSOLUTE OPEN FLOW POTENTIAL CALCULATIONS							
Absolute open flow potential calculations							
SIGNED: Royce McCary, President							
DATE 4-19-76							

* (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 24, and 32, below regarding separate reports for separate completions.

If not filed prior to the time this summary report is submitted, copies of all currently available logs (drillers, geologists, stratigraphic and core analysis, 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 32.

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 16: Indicate which elevation is used as reference (where not otherwise shown) for depth measurements given in other spaces on this form, such as 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 22. 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: "Seals 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 POROSITY ZONES:

SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF: CORE INTERVALS, AND ALL WELL-SPAWN TESTS, INCLUDING:

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAN DEPTH	TRUE VERT. DEPTH
OJO	738	914	Sand - Water	P.C.	1236	1236
P.C.	1236	1294	Sand - shale	U. Chacra	1642	1642
U. Chacra	1642	1720	Sand - shale - gas			