

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.

5. LEASE DESIGNATION AND SERIAL NO.

365

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

Jicarilla Apache

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Jicarilla 28

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

W/C *Sak*11. SEC., T., R., M., OR BLOCK AND SURVEY
OR AREA

Sect. 28-22N-2W

12. COUNTY OR
PARISH

Sandoval

13. STATE

New Mexico

18. ELEVATIONS (DF, RKB, RT, GR, ETC.)*

GR 7438 7452.5'

19. ELEV. CASINGHEAD

23. INTERVALS
DRILLED BY

ROTARY TOOLS

CABLE TOOLS

0-7320

25. WAS DIRECTIONAL
SURVEY MADE

None

27. WAS WELL CORED

Yes

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

Universal Resources Corporation

3. ADDRESS OF OPERATOR 910 Nat'l Foundation W. Bldg., 3555 NW 58th
St., Okla. City, Okla. 73112

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

At surface 1660' FSL & 1010' FWE (NW SW) Sect. 28-22N-2W

At top prod. interval reported below

At total depth

Same as above

14. PERMIT NO.

TR-NM(A)-77-1

DATE ISSUED

10-29-76

15. DATE SPUDDED

11-9-76

16. DATE T.D. REACHED

11-27-76

17. DATE COMPL. (Ready to prod.)

11-29-76

18. ELEVATIONS (DF, RKB, RT, GR, ETC.)*

GR 7438 7452.5'

19. ELEV. CASINGHEAD

RKB =

20. TOTAL DEPTH, MD & TVD

7320

21. PLUG, BACK T.D., MD & TVD

-

22. IF MULTIPLE COMPL.,
HOW MANY*

-

23. INTERVALS
DRILLED BY

→

ROTARY TOOLS

0-7320

CABLE TOOLS

-

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*

None

25. WAS DIRECTIONAL
SURVEY MADE

None

26. TYPE ELECTRIC AND OTHER LOGS RUN

Dual Induction Lateral & Formation Density Logs.

29. CASING RECORD (Report all strings set in well)

CASINO SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
8-5/8"	24#	299	12-1/4"	250 sacks	-0-

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
None						None	

30. TUBING RECORD

31. PERFORATION RECORD (Interval, size and number)

None

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
None	

33.* PRODUCTION

DATE FIRST PRODUCTION PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)

WELL STATUS (Producing or shut-in)

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 GRAVITY-API (CORR.)

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

TEST WITNESSED BY

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 *A. N. Baker*

TITLE Agent

DATE 12-1-76

*(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 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	TRUE VERT. DEPTH
Dakota	7053	7113	Rec. 60'. 22' bl. sh, 30' ss sh, light gray fine grained sand sh, stain, no flow, odor on wet break. See Enclosures, page 14.			
				Ojo Alamo	2410	
				Plattineau	2725	
				Cliff	3570	
				Wesaverde	5100	
				Mancos Sh	6063	
				Gallup	7006	
				King Horn	7082	
				Dakota		
				TD	7320	
				LOJ TD	7314	