

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

See other in-
structions on
inside coverForm approved
Budget Bureau No. 42-8351.6

LEASE DESIGNATION AND SERIAL NO.

12 - 1513

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Federal

9. WELL NO.

1

10. FIELD AND POOL, OR WILLCAT

San Luis

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

Sec. 21, T13N, R3W

12. COUNTY OR
PARISH

Sandoval

13. STATE

NM

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL: OIL ☐ GAS ☐ DRY ☐ Other _____

b. TYPE OF COMPLETION:

NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. DESVR. ☐ Other _____

2. NAME OF OPERATOR

James F. Woosley

3. ADDRESS OF OPERATOR

Box 1227, Cortez, Colorado 81321

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

At surface ~~XXX~~ 350 FSL and 990 FWL

At top prod. interval reported below

At total depth

14. PERMIT NO.

Jerry W. Long

DATE ISSUED

Jan. 20, 1977

15. DATE SPUDDED

11 - 30 - 76

16. DATE T.D. REACHED

1 - 6 - 77

17. DATE COMPL. (Ready to prod.)

18. ELEVATIONS (DF, RKE, ET, GE, ETC.)*

6630 GL

19. ELEV. CASINGHEAD

6630

20. TOTAL DEPTH, MD & TVD

990

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

22. IF MULTIPLE COMPL.,
HOW MANY*23. INTERVALS
DRILLED BY

ROTARY TOOLS

CABLE TOOLS

→

Rotary

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

25. WAS DIRECTIONAL
SURVEY MADE

No

26. TYPE ELECTRIC AND OTHER LOGS RUN

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
7"	22 $\frac{1}{2}$	30	9"	Cement to surface	None

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	BACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACERS SET (MD)

30. TUBING RECORD

31. PERFORATION RECORD (Interval, size and number)

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED

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	CHOKES 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

MAR 8 1980

OIL COA. COM.

PAGE 3

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

March 5, 1979

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