

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 ☐ JUN 23 1978b. TYPE OF COMPLETION:
NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESV. ☐ Other ☐

2. NAME OF OPERATOR

CHACE OIL COMPANY, INC.

3. ADDRESS OF OPERATOR

313 Washington S.E., Albuquerque, NM 87108

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

At surface Unit "O" 990' SL & 1850' EL

At top prod. interval reported below

At total depth

14. PERMIT NO.

DATE ISSUED

5-14-78

15. DATE SPUDDED 4-28-78 16. DATE T.D. REACHED 5-10-78 17. DATE COMPL. (Ready to prod.) 5-26-78 18. ELEVATIONS (DF, REB, RT, GR, ETC.)* 7193 GR 19. ELEV. CASINGHEAD 7195'

20. TOTAL DEPTH, MD & TVD 7380 21. PLUG, BACK T.D., MD & TVD 7231 22. IF MULTIPLE COMPL., HOW MANY* Single 23. INTERVALS DRILLED BY 0-7380

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*
6910 - 6938
7010 - 7038
25. WAS DIRECTIONAL SURVEY MADE Yes26. TYPE ELECTRIC AND OTHER LOGS RUN
Elec. Induction & density28. CASING RECORD (Report all strings set in well)
Casing Size Weight, lb./ft. Depth Set (MD) Hole Size Cementing Record Amount Pulled
8-5/8" 24 269' 10-5/8" 225 SXS None
4-1/2" 13.5 7263' 7-7/8" 800 SXS None29. LINER RECORD
Size Top (MD) Bottom (MD) Sacks Cement Screen (MD) Size Depth Set (MD) Packer Set (MD)
2-3/8 6932' None31. PERFORATION RECORD (Interval, size and number)
6910' - 6938' 2 shots per ft.
7010' - 7038' 2 shots per ft.
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.
Depth Interval (MD) Amount and Kind of Material Used
6910 - 6938 Frac'd 60,000 gal slick water 55,000# 20-40 sand
7010 - 7038 Frac'd 45,000 gal slick water 35,000# 20-40 sand33. PRODUCTION
Date First Production 5-28-78 Production Method (Flowing, gas lift, pumping—size and type of pump) Flowing Well Status (Producing or shut-in) Shut in WOPL
Date of Test 5-27-78 Hours Tested 24 Choke Size 3/4" Prod'n. for Test Period 100 OIL—BBL. 385 GAS—MCF. 0 WATER—BBL. 0 OIL GRAVITY-API (CORR.) 46
Flow, tubing press. 140 Casing Pressure 670 Calculated 24-hour rate 100 GAS—MCF. 385 WATER—BBL. 034. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)
Shut in waiting on pipeline

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 [Signature] TITLE President DATE 6-21-78

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

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.), formations 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 38. 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 25: "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.)

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DEPTHS, AND CONSTANT ZONES OF POROSITY AND CONTENTS THEREOF; COARED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CUSHION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES

Same as
Formation

071-233