

Form 9-330
(Rev. 5-62)UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other instructions 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 _____	5. LEASE DESIGNATION AND SERIAL NO. NM - 16586	
b. TYPE OF COMPLETION:		NEW WELL ☒	WORK OVER ☐	DEEP-EN ☐	PLUG BACK ☐	DIFF. RESVR. ☐	Other _____
2. NAME OF OPERATOR BCO, Inc.						7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR 135 Grant, Santa Fe, N.M. 87501						8. FARM OR LEASE NAME Federal I	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 990' FSL 790' FWL Sec. 33 T23N R7W At top prod. interval reported below Same At total depth Same						9. WELL NO. 3	
14. PERMIT NO.						DATE ISSUED	
15. DATE SPUDDED 5-22-79		16. DATE T.D. REACHED 5-28-79		17. DATE COMPL. (Ready to prod.) 7-25-79		18. ELEVATIONS (DF, RKB, BT, GR, ETC.)* 6859 GR.	
19. ELEV. CASINGHEAD 6861							
20. TOTAL DEPTH, MD & TVD 5158		21. PLUG, BACK T.D., MD & TVD 5114		22. IF MULTIPLE COMPL., HOW MANY*		23. INTERVALS DRILLED BY →	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION--TOP, BOTTOM, NAME (MD AND TVD)* 4834 - 5084 Gallup						25. WAS DIRECTIONAL SURVEY MADE Yes	
26. TYPE ELECTRIC AND OTHER LOGS RUN Induction Electrical Log, Compensated Density Log, Gamma Ray Neutron, and Cement Bond Log.						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	
8 5/8	24	139	12 1/4	100 Class B 2% CaCl			
4 1/2	10.5	5140	7 7/8	175 Class B 2% CaCl, 8# Salt, 1/2# floccell, 6 1/4# gilsonite			
29. LINER RECORD				30. TUBING RECORD			
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	TACKER SET (MD)
					2 3/8	5091	
31. PERFORATION RECORD (Interval, size and number) one 3 1/8" select fire shot at 4834, 4838, 4842, 4952, 4956, 4962, 4973, 4990, 5012, 5029, 5046, 5084				32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
DEPTH INTERVAL (MD)				AMOUNT AND KIND OF MATERIAL USED			
4834 - 5084				500 gals. 7 1/2% MCA acid 125,000# 10-20 sand with 85,000 gals. 10# gel treated water			
33.* PRODUCTION							
DATE FIRST PRODUCTION 7-25-79		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Gas lift				WELL STATUS (Producing or shut-in) Producing	
DATE OF TEST 8-06-79	HOURS TESTED 24 Hours	CHOKE SIZE Open	PROD'N. FOR TEST PERIOD →	OIL—BBL. 19	GAS—MCF. 114	GAS-OIL RATIO 6000	
FLOW. TUBING PRESS. 700	CASING PRESSURE 1050 - 800	CALCULATED 24-HOUR RATE →	OIL—BBL. 19	GAS—MCF. 114	OIL GRAVITY-API (CORR.) 40		
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Gas sold to EPNG thru BCO S. Lybrook Gathering Line							
35. LIST OF ATTACHMENTS All previously sent.							
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records							
SIGNED <i>Harry R. Bygh</i>				TITLE President		DATE 8-6-79	

*(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; CORDED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CUSHION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURE, AND RECOVERY

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	38. GEOLOGIC MARKERS		
				NAME	MEAS. DEPTH	TRUE VERT. DEPTH
				Gallup	4812	4812