

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 ☐		7. UNIT AGREEMENT NAME	
b. TYPE OF COMPLETION:		NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other ☐		8. FARM OR LEASE NAME	
2. NAME OF OPERATOR		JACK A. COLE		Indian Bend	
3. ADDRESS OF OPERATOR		P. O. Box 191 Farmington, N.M. 87401		9. WELL NO.	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)		At surface 1100' FNL, 990' FEL		10. FIELD AND POOL, OR WILDCAT	
At top prod. interval reported below		Same		Ballard Picture Cliffs	
At total depth		Same		11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA	
14. PERMIT NO. 87401		DATE ISSUED OCT 09 1981		Sec. 26-T23N-R3W	
15. DATE SPUDDED		7/21/81		12. COUNTY OR PARISH	
16. DATE T.D. REACHED		7/28/81		Sandoval	
17. DATE COMPL. (Ready to prod.)		9/16/81		13. STATE	
18. ELEVATIONS (DF, REB, BT, GR, ETC.)*				N.M.	
19. ELEV. CASINGHEAD		7500' GL			
20. TOTAL DEPTH, MD & TVD		3300'		23. INTERVALS DRILLED BY	
21. PLUG, BACK T.D., MD & TVD		3224'		ROTARY TOOLS	
22. IF MULTIPLE COMPL., HOW MANY*				X	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*		3186'-3202' Picture Cliffs		25. WAS DIRECTIONAL SURVEY MADE	
26. TYPE ELECTRIC AND OTHER LOGS RUN		GR-Density Resistance-SP		NO	
27. WAS WELL CORED				NO	
28. CASING RECORD (Report all strings set in well)					
CASING SIZE		WEIGHT, LB./FT.		DEPTH SET (MD)	
8-5/8"		24.0		132'	
4-1/2"		10.50		3268'	
29. LINER RECORD					
SIZE		TOP (MD)		BOTTOM (MD)	
NONE					
30. TUBING RECORD					
SIZE		DEPTH SET (MD)		PACKER SET (MD)	
1-1/4"		3196'			
31. PERFORATION RECORD (Interval, size and number)					
3186'-3202'					
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.					
DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED			
3186'-3202'		45,000 gallons 70% Foam			
		84,000 lbs. sand			
33. PRODUCTION					
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)			WELL STATUS (Producing or shut-in)
W.O. Pipeline		Flowing			Shut In
DATE OF TEST		HOURS TESTED		CHOKE SIZE	
9/25/81		3 hrs.		3/4"	
FLOW. TUBING PRESS.		CASING PRESSURE		CALCULATED 24-HOUR RATE	
75		325			
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)					
VENTED					
35. LIST OF ATTACHMENTS					
FOR: JACK A. COLE					
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records					
ORIGINAL SIGNED BY President, Walsh Engr.					
SIGNED Ewell N. Walsh, P.E. TITLE & Production Corp. DATE 10/7/81					

*** (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			GEOLOGIC MARKERS	
TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	38.
			MEAS. DEPTH	TRUE VERT. DEPTH
			2781'	2781'
			2883'	2883'
			3019'	3019'
			3133'	3133'
			3258'	3258'
			Ojo Alamo	
			Kirtland	
			Fruitland	
			Picture Cliffs	
			Lewis	

