

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other instructions on reverse side)

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 _____

b. TYPE OF COMPLETION: NEW WELL WORK OVER DEEP-EN PLUG BACK DIFF. RESVR. Other _____

2. NAME OF OPERATOR
JACK A. COLE

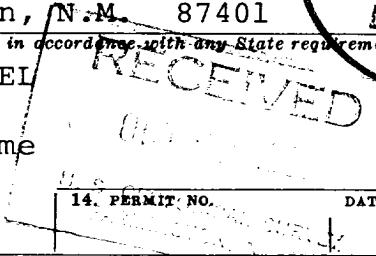
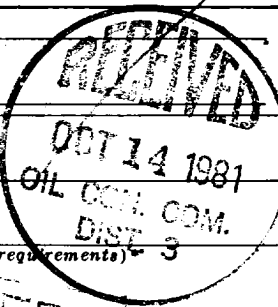
3. ADDRESS OF OPERATOR
P.O. Box 191 Farmington, N.M. 87401

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

At surface 810' FNL, 820' FEL

At top prod. interval reported below Same

At total depth Same



14. PERMIT NO. _____ DATE ISSUED _____

5. LEASE DESIGNATION AND SERIAL NO.
Contract No. 55-A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME
Jicarilla Apache

7. UNIT AGREEMENT NAME _____

8. FARM OR LEASE NAME
Indian Bend

9. WELL NO.
8

10. FIELD AND POOL, OR WILDCAT
Ballard Picture Cliff

11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA
Sec. 36-T23N-R3W
N.M.P.M.

15. DATE SPUDDED 8/21/81 16. DATE T.D. REACHED 8/26/81 17. DATE COMPL. (Ready to prod.) 9/19/81 18. ELEVATIONS (DF, REB, RT, GR, ETC.)* 19. ELEV. CASINGHEAD 7269' GL

20. TOTAL DEPTH, MD & TVD 2975' 21. PLUG, BACK T.D., MD & TVD 2913' 22. IF MULTIPLE COMPL., HOW MANY* _____ 23. INTERVALS DRILLED BY _____ ROTARY TOOLS X CABLE TOOLS _____

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 2866'-2880' Picture Cliffs 25. WAS DIRECTIONAL SURVEY MADE NO

26. TYPE ELECTRIC AND OTHER LOGS RUN ISF, FDC 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"	24.0	130'	12-1/4"	100 sacks	None
4-1/2"	10.50	2948'	7-7/8"	100 sacks	None

29. LINER RECORD 30. TUBING RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
None					1-1/4"	2861'	

31. PERFORATION RECORD (Interval, size and number) 2866'-2880'

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
2866'-2880'	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	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
10/1/81	3 hrs.	3/4"	→		CAOF-2668		

FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)
510	100	→		3/4-1385		

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Vented TEST WITNESSED BY _____

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 & Production Corp. DATE 10/7/81
Ewell N. Walsh, P.E.

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

540

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.)

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH	TOP	TRUE VERT. DEPTH
38. GEOLOGIC MARKERS							
				Ojo Alamo Kirtland Fruitland Picture Cliff Lewis	2537' 2600' 2723' 2806' 2902'		2537' 2600' 2723' 2806' 2902'