

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other in-
structions on
reverse side)Form approved.
Budget Bureau No. 42-R355.5.

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 <u>P & A</u>																																							
c. NAME OF OPERATOR <u>Coleman Oil & Gas, Inc.</u>																																														
3. ADDRESS OF OPERATOR <u>6109 Del Campo Place N.E.</u> <u>Albuquerque, New Mexico 87109</u>																																														
7. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.) At surface <u>1050' FSL, '810'</u>																																														
At top prod. interval reported below <u>same</u>																																														
At total depth <u>same</u>																																														
14. PERMIT NO. _____																																														
15. DATE SPEUDED <u>7-22-1981</u>																																														
16. DATE T.D. REACHED <u>8-14-1981</u>																																														
17. DATE COMPL. (Ready to prod.) <u>8-26-1981</u>																																														
18. ELEVATIONS (DF, REB, RT, GR, ETC.)* <u>7677 Gr.</u>																																														
19. ELEV. CASINGHEAD <u>7672</u>																																														
20. TOTAL DEPTH, MD & TVD		21. PLUG, BACK T.D., MD & TVD		22. IF MULTIPLE COMPL., HOW MANY*		23. INTERVALS DRILLED BY																																								
<u>TD 3190</u>		<u>PE 3072</u>				<u>0-3190</u>																																								
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* <u>None</u>																																														
25. WAS DIRECTIONAL SURVEY MADE <u>Yes</u>																																														
26. TYPE ELECTRIC AND OTHER LOGS RUN <u>IES - CNCL</u>																																														
27. WAS WELL CORED <u>No</u>																																														
28. CASING RECORD (Report all strings set in well) <table border="1"><tr><td>7</td><td>24</td><td>93</td><td>11</td><td>40</td></tr><tr><td>2-7/8</td><td>65</td><td>3097</td><td>5</td><td>215</td></tr></table>								7	24	93	11	40	2-7/8	65	3097	5	215																													
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31. PERFORATION RECORD (Interval, size and number) <u>1 spf 2808-13</u> <u>2930-40</u> <u>2989-96</u> <u>Krc 2990</u>				32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC. <table border="1"><tr><td>DEPTH INTERVAL (MD)</td><td>AMOUNT AND KIND OF MATERIAL USED</td></tr><tr><td></td><td></td></tr><tr><td></td><td></td></tr><tr><td></td><td></td></tr></table>				DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED																																					
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34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)						TEST WITNESSED BY																																								
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 <u>Frank G. Brandy</u>				TITLE <u>Agent</u>		DATE <u>SEP 22 1981</u>																																								

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

NMOCC

BY

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