

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other instructions on reverse side)

Form approved
Budget Bureau No. 41-2355.6.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

5. LEASE DESIGNATION AND SERIAL NO.

NM 25311

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Rattlesnake - Federal

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Wildcat

11. SEC. T., R., M., OR BLOCK AND SURVEY OR AREA

Sec. 19, T21N, R7W

12. COUNTY OR PARISH

Sandoval

13. STATE

New Mexico

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

CHACE OIL COMPANY, INC.

3. ADDRESS OF OPERATOR

313 Washington SE Albuquerque, NM 87108

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

At surface Unit "A" 490' NL and 330' EL

At top prod. interval reported below

At total depth

14. PERMIT NO.

DATE ISSUED

15. DATE SPELDED

9/28/81

16. DATE T.D. REACHED

10/08/81

17. DATE COMPL. (Ready to prod.)

Plugged 10/11/81

18. ELEVATIONS (DF, RES, RT, GR, ETC.)*

6773' GR

19. ELEV. CASINGHEAD

20. TOTAL DEPTH, MD & TVD

21. PLUG, BACK T.D., MD & TVD

22. IF MULTIPLE COMPL., HOW MANY*

23. INTERVALS DRILLED BY

ROTARY TOOLS

CABLE TOOLS

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*

25. WAS DIRECTIONAL SURVEY MADE

26. TYPE ELECTRIC AND OTHER LOGS RUN

27. WAS WELL CORRED

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"	23#	214.75'		225	

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACES CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)

31. PERFORATION RECORD (Interval, size and number)

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED

33.* PRODUCTION

DATE FIRST PRODUCTION PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)

WELL STATUS (Producing or shut-in)

Plugged and Abandoned

DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
10/10/81	5						
FLOW, TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)	

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)

TEST WITNESSED BY

Ron Gordon

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

TITLE

Geologist

DATE

10/30/81

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

Drill Stem Test - Entrada (See back)

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 both, pursuant to applicable Federal and/or State laws and regulations. Any necessary special instructions concerning the use of this form and the manner of submitting, 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 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 report is submitted, copies of all currently available logs (drillers, geologists, sample and core analysis, all types electric, etc.) should be listed on this form, see item 33.

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, separately identified, for each additional interval to be separately produced, showing the additional data pertinent to each 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 POROSITY ZONES:			38. GEOLOGIC MARKERS			
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH	TRUE VERT. DEPTH
Pictured Cliffs	824	947	Shly sd + wet			
Cliff House	1155	1276	Sand & shale interbeds - wet			
Menefee	1301	-	Sand, shale, & coal interbeds - minor part shows			
Point Lookout	2938	3018	Shly sd; some coal			
Gallup	4010	4205	Sd & Sh. interbeds			
Greenhorn	4825	4873	Calc. sd - wet			
Dakota "A"	4905	4935	Sd w/clay + wet			
Dakota "D"	5081	5130	Sd w/clay - wet			
Todilto	6054	6112	Fractured anhydrite			
Entrada	6112	T.D.	limey sand - wet			
			DST; Packers Top 6023' Recovered 150' oil			
			Bottom 6128' 1382' water			
			Interval tested 6044-6151			
			Open 30 mins. Closed 60 mins.			
			Open 60 mins. Closed 120 mins.			
			Pressure records attached			

JOB LOG

TICKET NO.

CUSTOMER

JOB TYPE

PAGE NO

DATE 10-10-57

FORM 2013 R-2

RECEIVED
OCT 30 1981
OIL CON. COM.
DIST. 3

CUSTOMER