

9-23-65

F. Loc. 2310/N; 330/E Elev. _____ Spd. _____ Comp. _____ TD _____ PB _____
 Casing S. _____ @ _____ W _____ Sx. Int. _____ @ _____ W _____ Sx. Pr. _____ @ _____ W _____ Sx. T. _____ @ _____
 Csg. Perf. _____ Prod. Stim. _____

TRANS

I.P. _____ BO/D _____ MCF/D After _____ Hrs. _____ SICP _____ PSI After _____ Days GOR _____ Grav. _____ 1st Del. _____												
TOPS		NITD	X	Well Log	TEST				DATA			
					Schd.	PC	Q	PW	PD	D	Ref. No.	
Kirtland		C-102		Plat								
Fruitland		C-103		Electric Log								
Pictured Cliffs		C-104		C-110								
Cliff House				C-122								
Menefee		Ditr		Dfa								
Point Lookout		Datr		Dac								
Mancos		Remarks										
Gallup												
Sanostee												
Greenhorn												
Dakota												
Morrison												
Entrada												
				40ac								

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Jan. | Feb. | Mar. | Apr. | May | June | July | Aug. | Sept. | Oct. | Nov. | Dec. |

MV Co. Sands 33 T 18N R 3W U Hooper ARWOOD H STOWE

Lse. Federal

No. 9

Job separation sheet

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 *

5. LEASE DESIGNATION AND SERIAL NO.

SF 081171 A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Darla

9. WELL NO.

NINE

10. FIELD AND POOL, OR WILDCAT

Wildcat

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

33 - 18N - 3W

12. COUNTY OR
PARISH

Sandoval

13. STATE

New Mexico

1a. TYPE OF WELL:

OIL
WELL ☒GAS
WELL ☐DRY ☐

b. TYPE OF COMPLETION:

NEW
WELL ☒WORK
OVER ☐DEEP-
EN ☐PLUG
BACK ☐DIS
RE: ☐

2. NAME OF OPERATOR

Arwood Stone

3. ADDRESS OF OPERATOR

P O Box 2265, Wichita Falls, Texas 76307

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

At surface

1301' F/NL

824' F/NL

(as per corrected
survey)

At top prod. interval reported below

At total depth

Same

14. PERMIT NO.

DATE ISSUED

Sept. 24-65

15. DATE SPUDDED

Oct. 9-65

16. DATE T.D. REACHED

10-14-65

17. DATE COMPL. (Ready to prod.)

April 20, 1966

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

6474'

19. ELEV. CASINGHEAD

20. TOTAL DEPTH, MD & TVD

550'

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

22. IF MULTIPLE COMPL.,
HOW MANY*23. INTERVALS
DRILLED BY

ROTARY TOOLS

CABLE TOOLS

All

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

299-304 362-373 404-409

25. WAS DIRECTIONAL
SURVEY MADE

26. TYPE ELECTRIC AND OTHER LOGS RUN

Mike Rathman Logging Company (Electric Log)

27. WAS WELL CORED

YES

28. CASING RECORD (Report all strings set in well)

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
2 7/8"	2 35	445'	6"	Circulated cement out top of hole.	

29. LINER RECORD

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

31. PERFORATION RECORD (Interval, size and number)

299-304 10 holes
362-373 20 holes
404-409 10 holes

ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

DEPTH INTERVAL (MD)

AMOUNT AND KIND OF MATERIAL USED

Washed out with mud acid

33.*

PRODUCTION

DATE FIRST PRODUCTION

Well Vent 4-21-66

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

Pumping

WELL STATUS (Producing or
shut-in)

shut in

DATE OF TEST

4-21-66

HOURS TESTED

24

CHOKE SIZE

PROD'N. FOR
TEST PERIOD

OIL—BBL.

1/2

GAS—MCF.

None

WATER—BBL.

Trace

GAS-OIL RATIO

FLOW. TUBING PRESS.

CASING PRESSURE

NONE

CALCULATED
24-HOUR RATE

OIL—BBL.

1 bbl.

GAS—MCF.

-0-

WATER—BBL.

Trace

OIL GRAVITY-API (CORR.)

40

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

TEST WITNESSED BY

Miller

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

DATE

2-26-71

*(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	F TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	GEOLOGIC MARKERS		
				NAME	MEAS. DEPTH	TRUE VERT. DEPTH
Shale and sandy shale	0	108				
Limy sand	108	114				
Sandy shale	114	200				
Shale	200	295				
Sand	295	320	(show oil)			
Sandy shale	320	363				
Sand	363	394	(show oil)			
Shale	394	400				
Sand	400	405	(show oil)			
Sandy shale	405	550				
			TOTAL DEPTH INTERVALS LOG			