SUBMIT IN DUPLICATE. UNITED STATES DEPARTMENT OF THE INTERIOR

(See other instructions on reverse side)

Form approved. Budget Bureau No. 42-R355.6.

5. LEASE DESIGNATION AND SERIAL NO.

GEOLOGICAL SURVEY NM 15657 6. IF INDIAN, ALLOTTEE OR TRIBE NAME WELL COMPLETION OR RECOMPLETION REPORT AND LOG* 1a. TYPE OF WELL: DRY XX 7. UNIT AGREEMENT NAME Other b. TYPE OF COMPLETION: WELL XX OVER DEEP-PLUG DACK S. FARM OR LEASE NAME Other . 2. NAME OF OPERATOR Coal Creek Coal Creek Oil Associates 9. WELL NO. 3 ADDRESS OF OPERATOR 10. FIELD AND POOL, OR WILDCAT 900 Grant, Suite 200, Denver, Colorado 80203 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements). Wildcat At surface 990' FNL, 990' FWL 11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA At top prod. interval reported below Sec. 28, T23N, R12W At total depth Same 12. COUNTY OR PARISH 14. PERMIT NO. 13. STATE DATE ISSUED San Juan N.M. 16. DATE T.D. REACHED | 17. DATE COMPL. (Ready to prod.) 18. ELEVATIONS (DF, REB, RT, GR, ETC.) 19. ELEV. CASINGHEAD 15. DATE SPUDDED 6025' GR 11-12-75 12-19-75 P & A 21. PLUG, BACK T.D., MD & TVD 22. IF MULTIPLE COMPL., HOW MANY 23. INTERVALS ROTARY TOOLS CABLE TOOLS 20. TOTAL DEPTH, MD & TVD DRILLED BY 0-4581' 4581 WAS DIRECTIONAL SURVEY MADE 24. PRODUCING INTERVAL(S), OF THIS COMPLETION-TOP, BOTTOM, NAME (MD AND TVD)* No NA 27. WAS WELL CORED 26. TYPE ELECTRIC AND OTHER LOGS RUN No Dresser Atlas: Induction Electrolog & Compensated Densilog CASING RECORD (Report all strings set in well) 28 WEIGHT, LB./FT. DEPTH SET (MD) HOLE SIZE CEMENTING RECORD CASING SIZE AMOUNT PULLED 12 1/4" 125 sacks None 8 5/8" 229 24.00 TUBING RECORD 29 LINER RECORD 30. BOTTOM (MD) SACKS CEMENT* SCREEN (MD) SIZE DEPTH SET (MD) PACKER SET (MD) SIZE TOP (MD) 31. PERFORATION RECORD (Interval, size and numbe ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC. DEPTH INTERVAL (MD) AMOUNT AND KIND OF MATERIAL USED 14. A mer some & de marles IAN 2 1 PRODUCTION 33.* DATE FIRST PRODUCTION PRODUCTION METHOD (Flagging, gas lift, pumping—size and type of pump) WELL STATUS (Producing or Laparita) SALL LA DATE OF TEST HOURS TESTED CHOKE SIZE PROD'N. FOR TEST PERIOD GAS-MCF. GAS-OIL RATIO CALCULATED 24-HOUR RATE FLOW, TUBING PRESS. CASING PRESSURE GAS-MCF. WATER-BBL. OIL GRAVITY-API (CORR.) 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 ORIGINAL SIGNED BY DATE _____1/20/76 TITLE Petroleum-Geologist SIGNED DAVE A. THOMAS, IR

NSTRUCTIONS

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 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 2, if any) for only the 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 2, if any) for only the interval reported in item 3. Submit a separate completion of the cementing tool. Item 33: Submit a separate completion of the cementing tool.

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	,	-							TOP	POROUS ZONES: IMPORTANT ZONES OF 1
						- •	· · · · · · · · · · · · · · · · · · ·		BOTTOM	MARY OF POROUS ZONES: SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THERROF; DEPTH INTERVAL TESTED, CUSHION USED, TIME TOOL OPEN, FLOWING
				The Control of the Co				-	DESCRIPTION, CONTENTS, ETC.	DEFTH INTERVAL TESTED, CUSHION CRED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES DEFTH INTERVAL TESTED, CUSHION CRED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES
Dakota	Greenhorn Graneros	Sanastee	Gallup L. Mancos	U. Mancos	Menefee	Cliff House	Lewis		NAME	38,
4533"	4316' 4428'	3974'	3430' 3723'	2554	408'	313'	Surface	MEAS. DEPTH	T	GEOLOGIC MARKERS
45331	4316' 4428'	3974'	3430' 3723'	2554'	408	313'	Surface	TRUE VERT. DEPTH.	TOP	

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