

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 _____						5. LEASE DESIGNATION AND SERIAL NO. 36											
b. TYPE OF COMPLETION: NEW WELL ☐ WORK OVER ☐ DEEPEN ☐ PLUG BACK ☐ DIFF. RESVR. ☒ Other _____						6. IF INDIAN, ALLOTTEE OR TRIBE NAME Jicarilla Apache											
2. NAME OF OPERATOR Continental Oil Company						7. UNIT AGREEMENT NAME											
3. ADDRESS OF OPERATOR P. O. Box 3312, Durango, Colorado						8. FARM OR LEASE NAME Northeast Haynes											
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 1606' FNL, 928' FNL - NW/4 At top prod. interval reported below At total depth						9. WELL NO. 5											
14. PERMIT NO. _____ DATE ISSUED _____						10. FIELD AND POOL, OR WILDCAT Undesignated Gallup											
15. DATE SPUDDED 5/25/62 16. DATE T.D. REACHED 6/8/62 17. DATE COMPL. (Ready to prod.) 8/21/63 18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 6706' RB* 6692' OR 19. ELEV. CASINGHEAD						11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA Sec. 22, T24N, R5W											
20. TOTAL DEPTH, MD & TVD 6855' 21. PLUG, BACK T.D., MD & TVD 6837' 22. IF MULTIPLE COMPL., HOW MANY* → 23. INTERVALS DRILLED BY 0-6855' ROTARY TOOLS CABLE TOOLS						12. COUNTY OR PARISH Rio Arriba 13. STATE New Mexico											
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 5643' - 5860' - Gallup						25. WAS DIRECTIONAL SURVEY MADE No											
26. TYPE ELECTRIC AND OTHER LOGS RUN Correlation						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#		305'		12-1/4"		190 sacks regular		None							
5-1/2"		15.5#		1613'		7-7/8"		420 sacks regular		None							
5-1/2"		14#		6855'				245 sacks regular		None							
29. LINER RECORD						30. TUBING RECORD											
SIZE		TOP (MD)		BOTTOM (MD)		SACKS CEMENT*		SCREEN (MD)		SIZE		DEPTH SET (MD)		PACKER SET (MD)			
										2-3/8"		5589'		6655'			
31. PERFORATION RECORD (Interval, size and number)						32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.											
2 shots per foot: 5643' - 5655'						DEPTH INTERVAL (MD)						AMOUNT AND KIND OF MATERIAL USED					
5660' - 5688'						5643' - 5860'						50,000# sand, 1600# "ADOMITE AQUA" additive, 1680 bbls. water w/1% CaCl					
5800' - 5860'						5706' - 5730'											
5736' - 5746'						5750' - 5760'											
5750' - 5760'																	
33. PRODUCTION																	
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)								WELL STATUS (Producing or shut-in)							
8/21/63		Pumping 2"x1 1/2"x16' 41mmater								Producing							
DATE OF TEST		HOURS TESTED		CHOKE SIZE		PROD N. FOR TEST PERIOD		OIL—BBL.		GAS—MCF.		WATER—BBL.		GAS-OIL RATIO			
8/21/63		24		Open		→		110		220		72		2000			
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					
Sold - El Paso Natural Gas Company												A. E. Chapman					
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 BY

SIGNED **FRED VAN MATRE**TITLE **District Engineer**DATE **11/1/63**

*(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				38. GEOLOGIC MARKERS		
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH	TOP TRUE VERT. DEPTH
Pictured Cliffs Mesaverde Gallup Dakota "J"	2101' 3937' 5610' 6768'	2125' 4675' 5890' 6836'	Gas Gas Oil Gas	Surf. Sand & Shale Pictured Cliffs Mesa Verde Kanabos Gallup Greenhorn Crenshaw Dakota	2395' 3935' 4675' 5615' 6556' 6636' 6671'	0



LTR



Job separation sheet

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LAND OFFICE	
TRANSPORTER	OIL GAS
PRODUCTION OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION

(Form C-104)
Revised 7/1/57

Santa Fe, New Mexico

REQUEST FOR (GAS) ALLOWABLE

New Well
~~Recompletion~~

This form shall be submitted by the operator before an initial allowable will be assigned to any completed Oil or Gas well. Form C-104 is to be submitted in QUADRUPPLICATE to the same District Office to which Form C-101 was sent. The allowable will be assigned effective 7:00 A.M. on date of completion or recompletion, provided this form is filed during calendar month of completion or recompletion. The completion date shall be that date in the case of an oil well when new oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

Durango, Colorado

July 18, 1962

(Place)

(Date)

WE ARE HEREBY REQUESTING AN ALLOWABLE FOR A WELL KNOWN AS:

Continental Oil Company

H. E. Haynes

Well No. 5

in SE $\frac{1}{4}$ NW $\frac{1}{4}$

(Company or Operator)

(Lease)

E

Sec. 22

T. 24N

R. 5W

NMPM,

Basin Dakota

Pool

Unit Letter

Rio Arriba

County. Date Spudded 5-25-62

Date Drilling Completed 6-8-62

Please indicate location:

Elevation 6706' RB

Total Depth 6855' RB

PBTD 6837' RB

Top Oil/Gas Pay 6768' RB

Name of Prod. Form. Dakota

PRODUCING INTERVAL -

Perforations 6800' RB

Open Hole

Depth

Casing Shoe 6855' RB

Depth

Tubing 6787' RB

OIL WELL TEST -

Natural Prod. Test: _____ bbls. oil, _____ bbls water in _____ hrs, _____ min. Size _____

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of Choke load oil used): _____ bbls. oil, _____ bbls water in _____ hrs, _____ min. Size _____

GAS WELL TEST -

Natural Prod. Test: _____ MCF/Day; Hours flowed _____

Choke Size _____

Method of Testing (pitot, back pressure, etc.): _____

Test After Acid or Fracture Treatment: 404 MCF/Day; Hours 24

Choke Size _____

Method of Testing: Orifice Meter

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): 15,000# Sand & 14,370 gals. water

Casing Press. 500

Tubing Press. 400

Date first new oil run to tanks _____

Oil Transporter McWood Corporation, Abilene, Texas

Gas Transporter El Paso Natural Gas Co., Farmington, New Mexico

Remarks: Condensate Test - Pumped 16 bbls. of 54° API @ 60°
Condensate in 24 hours.

I hereby certify that the information given above is true and complete to the best of my knowledge.

Approved JUL 20 1962, 19____

Continental Oil Company

(Company or Operator)

Original Signed By: _____

By: H. D. HALEY (Signature)

Title District Superintendent

Send Communications regarding well to:

H. D. Haley

Address Box 3312, Durango, Colorado

OIL CONSERVATION COMMISSION

By: _____

Title Superintendent

NOCC (A) HDH ABC

RECEIVED

JUL 20 1962

OIL CON. CO.