

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 ☐

2. NAME OF OPERATOR

CONTINENTAL OIL COMPANY

3. ADDRESS OF OPERATOR

Box 460, HOBBS, N.M. 88240

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

At surface 820' FNL & 940' FEL OF SEC. 14

At top prod. interval reported below

SAME

At total depth

SAME

14. PERMIT NO.

DATE ISSUED

12. COUNTY OR
PARISH

13. STATE

RIO ARriba N.M.

15. DATE SPUDDED

10-7-75

16. DATE T.D. REACHED

10-11-75

17. DATE COMPL. (Ready to prod.)

10-31-75

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

7197' GR.

19. ELEV. CASINGHEAD

20. TOTAL DEPTH, MD & TVD

3914'

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

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

ROTARY TOOLS

CABLE TOOLS

ROTARY

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

3677'-3726' Pictured Cliffs

25. WAS DIRECTIONAL
SURVEY MADE

No

26. TYPE ELECTRIC AND OTHER LOGS RUN

IES - GR FDC

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#	223'	12 1/4"	230 SKS. - Circ.	

JAN 5 1975

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					2 7/8"	3914'	NONE
					W/175 SKS CMT.		

31. PERFORATION RECORD (Interval, size and number)

3677'-80' & 3716'-26' W/2

JSPF

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
3677'-3726'	F1621 Bbls Duran E-2 Flow
	F1 2500 gal/s 28% Acid
	40,000# sd. 750# ADAMITE
	AQUA & 800# 5160 gal.

33. PRODUCTION

DATE FIRST PRODUCTION 11-25-75		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Flow				WELL STATUS (Producing or shut in) 5 I PEND. GAS CONN.	
DATE OF TEST 11-25-75	HOURS TESTED 3	CHOKE SIZE 3/4"	PROD'N. FOR TEST PERIOD →	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
FLOW. TUBING PRESS. 75	CASING PRESSURE	CALCULATED 24-HOUR RATE →	OIL—BBL. 0	GAS—MCF. 1040	WATER—BBL. 0	OIL GRAVITY-API (CORR.)	

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

Will be sold

TEST WITNESSED BY

PAT DEFOE

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

SR. ANALYST

DATE

12-31-75

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

HSGC (Durango) - 1. File

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 instructions should be obtained from the local Federal and/or State office.

tion 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.

item 29. "Such a *Cross section*". Attach to the report the following information: (a) the name(s) and address(es) of the person(s) who produced the data; (b) the date(s) when the data were produced; (c) the name(s) and address(es) of the person(s) who analyzed the data; (d) the date(s) when the data were analyzed; (e) the name(s) and address(es) of the person(s) who interpreted the data; (f) the date(s) when the data were interpreted; (g) the name(s) and address(es) of the person(s) who reported the data; (h) the date(s) when the data were reported; (i) the name(s) and address(es) of the person(s) who reviewed the data; (j) the date(s) when the data were reviewed; (k) the name(s) and address(es) of the person(s) who approved the data; (l) the date(s) when the data were approved; (m) the name(s) and address(es) of the person(s) who distributed the data; (n) the date(s) when the data were distributed; (o) the name(s) and address(es) of the person(s) who received the data; (p) the date(s) when the data were received; (q) the name(s) and address(es) of the person(s) who stored the data; (r) the date(s) when the data were stored; (s) the name(s) and address(es) of the person(s) who retrieved the data; (t) the date(s) when the data were retrieved; (u) the name(s) and address(es) of the person(s) who used the data; (v) the date(s) when the data were used; (w) the name(s) and address(es) of the person(s) who disposed of the data; (x) the date(s) when the data were disposed of; (y) the name(s) and address(es) of the person(s) who destroyed the data; (z) the date(s) when the data were destroyed.

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).

100-443887-100

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
				Pic. Cliff	3670		