

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 LYNCO OIL CORPORATION						7. UNIT AGREEMENT NAME		
3. ADDRESS OF OPERATOR 7890 E. Prentice Ave. Englewood, Colorado 80110						8. FARM OR LEASE NAME REGINA		
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 850' FWL and 850' FWL At top prod. interval reported below At total depth SAME						9. WELL NO. 8		
14. PERMIT NO.				DATE ISSUED 12/17/75		12. COUNTY OR PARISH Rio Arriba		13. STATE New Mexico
15. DATE SPURRED 12/22/75	16. DATE T.D. REACHED 12/30/75	17. DATE COMPL. (Ready to prod.) 2/11/76		18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 7320 KB		19. ELEV. CASINGHEAD 7310		
20. TOTAL DEPTH, MD & TVD 3022		21. PLUG, BACK T.D., MD & TVD 2961		22. IF MULTIPLE COMPL., HOW MANY*		23. INTERVALS DRILLED BY 0-3022		ROTARY TOOLS 0-3022
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* Pictured Cliffs 2908-18								25. WAS DIRECTIONAL SURVEY MADE No
26. TYPE ELECTRIC AND OTHER LOGS RUN Induction and Density Logs								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
8 5/8"		20.00		99		12 1/2"		100 sxs - circulated
4 1/2"		10.50		3017		6 3/4"		150 sxs
29. LINER RECORD								
SIZE		TOP (MD)		BOTTOM (MD)		SACKS CEMENT*		SCREEN (MD)
1"		2894						
30. TUBING RECORD								
SIZE		DEPTH SET (MD)		PACKER SET (MD)				
1"		2894						
31. PERFORATION RECORD (Interval, size and number)								
2908-18 w/2/ft								
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.								
DEPTH INTERVAL (MD)				AMOUNT AND KIND OF MATERIAL USED				
2908-18				SWF w/35,600 gals water 30,000# sand				
33.* PRODUCTION								
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Flowing					WELL STATUS (Producing or shut-in) Shut In	
DATE OF TEST 2/11/76		HOURS TESTED 3 hrs		CHOKE SIZE 3/4"		PROD'N. FOR TEST PERIOD Trace		OIL—BBL. 1155
FLOW. TUBING PRESS. 73		CASING PRESSURE 662		CALCULATED 24-HOUR RATE Trace		GAS—MCF. Trace		WATER—BBL. Trace
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Vented								TEST WITNESSED BY James Ray
35. LIST OF ATTACHMENTS Back Pressure Test								
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records								
ORIGINAL SIGNED BY SIGNED E. L. FUNDINGSLAND, JR. TITLE Vice President DATE 2/12/76								

*(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	TRUE VERT. DEPTH
Pictured Cliffs	2908	2932	Sand and Shale - Gas	Pictured Cliffs	2885	