

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. RESER. ☐	Other ☐ Recomplete
2. NAME OF OPERATOR Amoco Production Company							
3. ADDRESS OF OPERATOR 501 Airport Dr., Farmington, NM 87401							
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 1650' FSL x 1040' FWL At top prod. interval reported below Same At total depth Same							
14. PERMIT NO.				DATE ISSUED			
15. DATE SPUDDED 2-12-79				16. DATE T.D. REACHED 2-28-79		17. DATE COMPL. (Ready to prod.) 5-15-82	
18. ELEVATIONS (OF RKB, RT, GR, ETC.)* 6687' GL, 6700' KB				19. ELEV. CASINGHEAD			
20. TOTAL DEPTH, MD & TVD 7150		21. PLUG, BACK T.D., MD & TVD 7115		22. IF MULTIPLE COMPL., HOW MANY* 2		23. INTERVALS DRILLED BY → 0 - TD	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 5826'-6031' Otero Gallup						25. WAS DIRECTIONAL SURVEY MADE No	
26. TYPE ELECTRIC AND OTHER LOGS RUN GR, IEL, SP, CNL, 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#	414'	12-1/4"	300 SX			
4-1/2"	10.5#	7159'	7-7/8"	1730 SX			
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"	7036'	6900'
31. PERFORATION RECORD (Interval, size and number) 5984'-6031', with 2 spf, 5826'-5836', 5842'-5864', 5892'-5912', 5918'-5924' 5928'-5934', with 2 spf, a total of 222 .40" holes				32. A.C.D. SHOT, FRACTURE, CEMENT SQUEEZE, ETC. DEPTH INTERVAL (MD) AMOUNT AND KIND OF MATERIAL USED 5826'-6031' 90,000 gallons of frac fluid and 132,500# 20-40 sand			
33. PRODUCTION							
DATE FIRST PRODUCTION 5-27-82		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Flowing				WELL STATUS (Producing or shut-in) S.I.	
DATE OF TEST 5-27-82	HOURS TESTED 23	CROSS SECTION 1.25	PROD N. FOR TEST PERIOD →	OIL—BBL. 21	GAS—MCF. 127	WATER—BBL. 0	GAS—CU FT/DAY 6048
FLOW. TUBING PRESS. 40 psig	CASING PRESSURE 300 psig	CALCULATED 24-HOUR RATE →	OIL—BBL. 22	GAS—MCF. 132	WATER—BBL. 0	OIL GRAVITY-API (CORR.) 46.0	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) to be sold						TEST ACCEPTED FOR RECORD	
35. LIST OF ATTACHMENTS						JUN 16 1982	
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records							
SIGNED Original Signed By B.T. Robinson				FARMINGTON DISTRICT ADMINISTRATIVE SUPERVISOR JUN 17 1982 DIST. 3			

*(See instructions and spaces for Additional Data on Reverse Side)

NMOCG

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 DEPTH INTERVAL TESTED, CUSHION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES			38. GEOLOGIC MARKERS		
FORMATION	TOP	BOTTOM	NAME	MEAS. DEPTH	TRUE VERT. DEPTH
Ojo Alamo (est)	2115	2260			
Fruitland (est)	2280	2602			
Pictured Cliffs					
(est)					
Chacra	2602	2670			
Cliffhouse	3420	3455			
Menefee	4142	4197			
Point Lookout	4197	4724			
Gallup	4724	4970			
Greenhorn	5826	6031			
Graneros Dakota	6728	6800			
Main Dakota	6831	6943			
	6943	7020			