

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 Amoco Production Company					
3. ADDRESS OF OPERATOR 501 Airport Drive Farmington, NM 87401					
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 1660' FSL x 1660' FEL, Section 3, T25N, R5W At top prod. interval reported below Same At total depth Same					
14. PERMIT NO.		DATE ISSUED			
15. DATE SPUDDED 11-21-79		16. DATE T.D. REACHED 12-6-79		17. DATE COMPL. (Ready to prod.) 2-13-80	
18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 6606' GL		19. ELEV. CASINGHEAD			
20. TOTAL DEPTH, MD & TVD 7420'		21. PLUG, BACK T.D., MD & TVD 7378'		22. IF MULTIPLE COMPL., HOW MANY*	
23. INTERVALS DRILLED BY O-TD		ROTARY TOOLS		CABLE TOOLS	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 7087-7275', Dakota					
25. WAS DIRECTIONAL SURVEY MADE No					
26. TYPE ELECTRIC AND OTHER LOGS RUN SP-Gamma Ray, Compensated Neutron-Gamma Ray Compensated Formation Density, Gamma Ray Correlation Log, Induction Electric					
27. WAS WELL CORED No					
28. CASING RECORD (Report all strings set in well) Temperature Survey Post Frac					
CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
8-5/8"	24.0#	300'	12-1/4"	315 sx	-----
4-1/2"	11.6#	7420'	7-7/8"	1730 sx	-----
29. LINER RECORD					
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	
30. TUBING RECORD					
SIZE	DEPTH SET (MD)	PACKER SET (MD)			
2-3/8"	7293	None			
31. PERFORATION RECORD (Interval, size and number) 7087-7097', 7217-7226', 7247-7255', 7261-7275' with 2 SPF, total of 82 holes at a diameter of .38"					
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.					
DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED			
7087-7275'		102,500 gallons of frac fluid & 256,850# of sand			
33.* PRODUCTION					
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Flowing			
DATE OF TEST 3-3-80	HOURS TESTED 3	CHOKER SIZE .75	PROD'N. FOR TEST PERIOD OIL—BBL. GAS—MCF. 1123	WATER—BBL. OIL RATIO	
FLOW. TUBING PRESS. 85	CASING PRESSURE 480	CALCULATED 24-HOUR RATE OIL—BBL. GAS—MCF. 8984	WATER—BBL. OIL RATIO TEST WITNESS DIST. 3		
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) To be sold					
35. LIST OF ATTACHMENTS					

ACCEPTED FOR RECORD

I hereby certify that the foregoing and attached information is complete and correct as determined from all available records.

SIGNED

TITLE Dist. Adm. Supvr.

DATE 3-17-80

BY

*(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 above or 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 log 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 36.

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
Ojo Alamo	2354	2526	Sand		
Kirtland	2526	2718	Shale		
Fruitland	2718	2906	Sand		
Pictured Cliffs	2906	2980	Sand		
Lewis	2980	3786	Shale		
Chacra	3786	3815	Sand		
Lewis	3815	4555	Shale		
Mesaverde	4555	5336	Sand		
Mancos	5336	6250	Shale		
Gallup	6250	6645	Sand & Shale		
Mancos	6645	7000	Shale		
Greenhorn	7000	7065	Limestone		
Graneros	7065	7085	Shale		
Dakota	7085				