

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. Jicarilla Contract 146	
b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other _____		6. IF INDIAN, ALLOTTEE OR TRIBE NAME Jicarilla Apache	
2. NAME OF OPERATOR Amoco Production Company		7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR 501 Airport Drive Farmington, NM 87401		8. FARM OR LEASE NAME Jicarilla Contract 146	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 1120' FNL x 1120' FWL, Section 10, T25N, R5W At top prod. interval reported below Same At total depth Same		9. WELL NO. 22E	
14. PERMIT NO.		DATE ISSUED	
15. DATE SPUDDED 11-17-79		16. DATE T.D. REACHED 12-1-79	
17. DATE COMPL. (Ready to prod.) 2-11-80		18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 6711' GL	
19. ELEV. CASINGHEAD		10. FIELD AND POOL, OR WILDCAT Basin Dakota	
20. TOTAL DEPTH, MD & TVD 7536'		11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA NW/4, NW/4, Section 10, T25N, R5W	
21. PLUG, BACK T.D., MD & TVD 7493'		12. COUNTY OR PARISH Rio Arriba	
22. IF MULTIPLE COMPL., HOW MANY*		13. STATE NM	
23. INTERVALS DRILLED BY →		ROTARY TOOLS O-TD	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 7164-7353', Dakota		25. WAS DIRECTIONAL SURVEY MADE No	
26. TYPE ELECTRIC AND OTHER LOGS RUN Induction Electric-SP-Gamma Ray Compensated Formation Density, Compensated Neutron, Gamma Ray, Gamma Ray		27. WAS WELL CORED No	
28. CASING RECORD (Report all strings set in well) Correlation Log		29. LINER RECORD	
30. TUBING RECORD		31. PERFORATION RECORD (Interval, size and number)	
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.		33.* PRODUCTION	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)		35. LIST OF ATTACHMENTS	

36. ACCEPTED FOR RECORD: The foregoing and attached information is complete and correct as determined from all available records

SIGNED

TITLE

Dist. Adm. Supvr.

DATE

3-17-80

*(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
Ojo Alamo	2380	2584	Sand			
Kirtland	2584	2816	Shale			
Fruitland	2816	2960	Sand			
Pictured Cliffs	2960	3006	Sand			
Lewis	3006	3847	Shale			
Chacra	3847	3874	Sand			
Lewis	3874	4610	Shale			
Mesaverde	4610	5495	Sand			
Mancos	5495	6314	Shale			
Gallup	6314	6703	Sand & Shale			
Mancos	6703	7080	Shale			
Greenhorn	7080	7134	Limestone			
Graneros	7134	7155	Shale			
Dakota	7155		Sand			