

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 _____				5. LEASE DESIGNATION AND SERIAL NO. Jicarilla Contract 124	
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 Apache Tribal 124	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 1650' FNL x 930' FWL At top prod. interval reported below Same At total depth Same				9. WELL NO. 9	
14. PERMIT NO. _____ DATE ISSUED _____				10. FIELD AND POOL, OR WILDCAT Lindrith Gallup-Dakota West	
15. DATE SPUDDED 7-24-80				11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA SW/4, NW/4, Section 24 T25N, R4W	
16. DATE T.D. REACHED 8-8-80				12. COUNTY OR PARISH Rio Arriba	
17. DATE COMPL. (Ready to prod.) 9-11-80				13. STATE NM	
18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 7016' GL				19. ELEV. CASINGHEAD	
20. TOTAL DEPTH, MD & TVD 7900		21. PLUG BACK T.D., MD & TVD 7880		22. IF MULTIPLE COMPL., HOW MANY* _____	
23. INTERVALS DRILLED BY _____ ROTARY TOOLS 0-TD				24. WAS DIRECTIONAL SURVEY MADE No	
25. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 6744-6860, 6911-7048, 7660-7668, 7682-7690, 7694-7698, 7744-7750, 7788-7794, Gallup-Dakota				26. TYPE ELECTRIC AND OTHER LOGS RUN Dual Induction, Compensated Density Compensated Neutron, GR, SP caliper	
27. WAS WELL CORED No					
28. CASING RECORD (Report all strings set in well)					
CASING SIZE		WEIGHT, LB./FT.		DEPTH SET (MD)	
8 5/8"		24.0#		307'	
5 1/2"		15.5#		7900'	
29. LINER RECORD					
SIZE		TOP (MD)		BOTTOM (MD)	
30. TUBING RECORD					
SIZE		DEPTH SET (MD)		PACKER SET (MD)	
2 3/8"		7074'		None	
31. PERFORATION RECORD (Interval, size and number) 6744-6860, 6911-7048, 7660-7668, 7682-7690, 7694-7698, 7744-7750, 7788-7794, with 2 spf, a total of 301, .38" holes.					
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.					
DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED			
6744-7794		311,000 gal of frac fluid & 951,000# 20-40 sand.			
33.* PRODUCTION					
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Pumping			WELL STATUS (Producing or shut-in) Shut-In
DATE OF TEST		HOURS TESTED		CHOKE SIZE	
11-24-80		24 Hrs.		open	
PROD'N. FOR TEST PERIOD		OIL—BBL.		GAS—MCF.	
88		not tested		15	
FLOW. TUBING PRESS.		CASING PRESSURE		CALCULATED 24-HOUR RATE	
				88	
				15	
				42	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) To Be Sold				TEST WITNESSED BY	
35. LIST OF ATTACHMENTS					
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 E SYOBODA TITLE Dist. Admin. Supvr. DATE 1-23-81					

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

NMOC

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 22.

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 12: Indicate which elevation is used as reference (where not otherwise shown) for log's 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: "Gache 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
Point Lookout						
Gallup	6744	5766	Shale and shaly sand			
Graneros Dakota	7657	7049	Laminated shale and shaly sand			
Main Dakota	7786	7786	Shaly sand			
		7860	Shaly sand			