

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 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 880' FNL x 1630' FWL At top prod. interval reported below Same At total depth Same				9. WELL NO. 30	
14. PERMIT NO. _____ DATE ISSUED _____				10. FIELD AND POOL, OR WILDCAT Otero Chacra	
15. DATE SPIDDED 12-31-80 16. DATE T.D. REACHED 1-5-81 17. DATE COMPL. (Ready to prod.) 2-28-81 18. ELEVATIONS (DF, RNB, RT, GR, ETC.)* 6724' GL				11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA NE/4, NW/4, Section 9 T25N, R5W	
19. ELEV. CASINGHEAD _____				12. COUNTY OR PARISH Rio Arriba	
20. TOTAL DEPTH, MD & TVD 4019' 21. PLUG, BACK T.D., MD & TVD 3974' 22. IF MULTIPLE COMPL., HOW MANY* _____ 23. INTERVALS DRILLED BY _____ ROTARY TOOLS 0-TD CABLE TOOLS _____				13. STATE NM	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 3822-3850; Chacra				25. WAS DIRECTIONAL SURVEY MADE No	
26. TYPE ELECTRIC AND OTHER LOGS RUN DIL; GR; SP; Compensated Neutron and Density				27. WAS WELL CORED	
28. CASING RECORD (Report all strings set in well)					
CASING SIZE		WEIGHT, LB./FT.		DEPTH SET (MD)	
8 5/8"		24#		296'	
4 1/2"		10.5#		4019'	
HOLE SIZE		CEMENTING RECORD		AMOUNT PULLED	
12 1/4"		315 SX			
7 7/8"		812 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"		3848'		None	
31. PERFORATION RECORD (Interval, size and number) 3822-3850, with 2 spf at total of 56, .38" holes					
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.					
DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED			
3822-3850		43,128 gals of frac fluid & 70,000# of 10-20 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		HOURS TESTED		CHOKE SIZE	
3-19-81		3 Hrs.		.75"	
FLOW. TUBING PRESS.		CASING PRESSURE		CALCULATED 24-HOUR RATE	
22 psig		155 psig		406	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)		TEST WITNESSED BY			
To Be Sold					
35. LIST OF ATTACHMENTS					

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

SIGNED L. E. SWEETMAN TITLE Dist. Admin. Supvr.DATE APR 6 1981

FARMINGTON DISTRICT

BY RB

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

NMOCC

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	MEAN. DEPTH	TRUE VERT. DEPTH
Ojo Alamo	2378	2553				
Kirtland	2553	2753				
Fruitland	2753	2938				
Pictured Cliff	2938	3054				
Chacra	3820	3947				