

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 Dr., Farmington, NM 87401							
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 1660' FNL x 1095' FWL At top prod. interval reported below Same At total depth Same							
14. PERMIT NO.		DATE ISSUED		12. COUNTY OR PARISH Rio Arriba			13. STATE NM
15. DATE SPUDDED 9-24-80	16. DATE T.D. REACHED 10-3-80	17. DATE COMPL. (Ready to prod.) 10-21-81	18. ELEVATIONS (DF, REB, RT, GR, ETC.)* 6717' G.L.		19. ELEV. CASINGHEAD		
20. TOTAL DEPTH, MD & TVD 5469'	21. PLUG, BACK T.D., MD & TVD 5444'	22. IF MULTIPLE COMPL., HOW MANY* 2	23. INTERVALS DRILLED BY →	ROTARY TOOLS 0 - TD	CABLE TOOLS		
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 5164'-5168', 5189'-5202', 5208'-5212', 5293'-5296', 5303'-5319', 5346'-5350', 5407'-5409'.						25. WAS DIRECTIONAL SURVEY MADE No	
26. TYPE ELECTRIC AND OTHER LOGS RUN DIL, GR, SP, Compensated Density, Compensated Neutron						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#	309'	12-1/4"	240 sx			
5-1/2"	15.5#	5468'	7-7/8"	1145 sx			
29. LINER RECORD							
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	30. TUBING RECORD		
					SIZE	DEPTH SET (MD)	PACKER SET (MD)
					2-1/16"	5403'	3980'
31. PERFORATION RECORD (Interval, size and number) 5164'-5168', 5189'-5202', 5208'-5212', 5293'-5296', 5303'-5319', 5346'-5350', 5407'-5409'.				32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
				DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED		
				5164'-5409'	56,000 gallons of frac fluid and 75,000 pounds 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 12-10-81	HOURS TESTED 3 hours	CHOKE SIZE .75"	PROD'N. FOR TEST PERIOD →	OIL—BBL. 69	GAS—MCF. 548	WATER—BBL.	GAS-OIL RATIO
FLOW. TUBING PRESS. 34 PSIG	CASING PRESSURE - PSIG	CALCULATED 24-HOUR RATE →	OIL—BBL.	GAS—MCF. 548	WATER—BBL.	OIL GRAVITY-API (CORR.)	
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

SIGNED _____ TITLE Dist. Admin. Supvr.

DATE DEC 8 1981
JAN 05 1982

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

NMOCC

FARMINGTON DISTRICT

BY SML

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 filled 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: "Sucks 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:				38. GEOLOGIC MARKERS	
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					
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH
					TRUE VERT. DEPTH
Ojo Alamo	2390	2572			
Kirtland	2572	2800			
Fruitland	2800	2960			
Pictured Cliffs	2960	3000			
Chacra	3857	3892			
Cliff House	4646	4666			
Menefee	4666	5176			
Point Lookout	5176	5407			