

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 <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> DRY <input type="checkbox"/> Other _____		5. LEASE DESIGNATION AND SERIAL NO. NM 03551	
b. TYPE OF COMPLETION: NEW WELL <input type="checkbox"/> WORK OVER <input checked="" type="checkbox"/> DEEP-EN <input type="checkbox"/> PLUG BACK <input checked="" type="checkbox"/> DIFF. RESVR. <input type="checkbox"/> Other _____		6. IF INDIAN, ALLOTTED OR TRIBAL NAME	
2. NAME OF OPERATOR Caulkins Oil Company		7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR Post Office Box 780, Farmington, New Mexico		8. FARM OR LEASE NAME Breech "E"	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements) At surface 660 from the South and 1980 from the West At top prod. interval reported below Same At total depth Same		9. WELL NO. 102	
14. PERMIT NO.		10. FIELD AND POOL, OR WILDCAT Undes Gallup	
DATE ISSUED		11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA Sec. 5 26N 6W	
12. COUNTY OR PARISH Rio Arriba		13. STATE New Mexico	
15. DATE SPUDDED 1-21-60	16. DATE T.D. REACHED 5-24-60	17. DATE COMPL. (Ready to prod.) 6-30-75	18. ELEVATIONS (DF, RKB, RT, GR, ETC.) * 6538 DF
19. ELEV. CASINGHEAD 6527		20. TOTAL DEPTH, MD & TVD 6770	
21. PLUG, BACK T.D., MD & TVD 6604		22. IF MULTIPLE COMPL., HOW MANY * →	
23. INTERVALS DRILLED BY →		24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD) * 6502-6546	
25. WAS DIRECTIONAL SURVEY MADE No		26. TYPE ELECTRIC AND OTHER LOGS RUN	
27. WAS WELL CORRED		28. CASING RECORD (Report all strings set in well)	
CASING SIZE		WEIGHT, LB./FT.	
10 3/4"		32.75	
7"		23	
DEPTH SET (MD)		HOLE SIZE	
449		15"	
6756		8 3/4"	
CEMENTING RECORD		AMOUNT PULLED	
300			
200			
29. LINER RECORD		30. TUBING RECORD	
SIZE		TOP (MD)	
BOTTOM (MD)		SACKS CEMENT *	
SCREEN (MD)		SIZE	
2 3/8		DEPTH SET (MD)	
6430		PACKER SET (MD)	
31. PERFORATION RECORD (Interval, size and number)		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
6502-6510 16 holes .41 dia		DEPTH INTERVAL (MD)	
6522-6530 16 holes .41 dia		6502-6546	
6538-6546 16 holes .41 dia		AMOUNT AND KIND OF MATERIAL USED	
		60,000# 20-40 sand	
		and 1733 bbls. water	
33. PRODUCTION		WELL STATUS (Producing or shut-in)	
DATE FIRST PRODUCTION 7-8-75		Flow	
PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)		Shut in	
DATE OF TEST 7-8-75		HOURS TESTED 3 hrs.	
CHOKE SIZE 3/4"		PROD'N. FOR TEST PERIOD →	
OIL—BBL. Trace		GAS—MCF. 110	
WATER—BBL.		OIL GRAVITY-API (CORR.)	
FLOW, TUBING PRESS. 50		CASING PRESSURE 330	
CALCULATED 24-HOUR RATE →		OIL—BBL. 878	
GAS—MCF.		WATER—BBL.	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Vented		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 <u>[Signature]</u>		TITLE <u>Superintendent</u>	
DATE <u>10-1-75</u>			

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

1733
42
166

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 38, 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: "Stacks 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.)

871-733