

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 ☐ Oil/Gas Dual										7. UNIT AGREEMENT NAME					
b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other ☐										8. FARM OR LEASE NAME Breesh "C"					
2. NAME OF OPERATOR Caulkins Oil Company										9. WELL NO. TD-144					
3. ADDRESS OF OPERATOR P. O. Box 780, Farmington, New Mexico										10. FIELD AND POOL, OR WILDCAT South Blanco Tocito					
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 990' FNL and 1090' FEL Section 12-26N-6W At top prod. interval reported below approximately same as above At total depth approximately same as above										11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA Section 12-26N-6W					
14. PERMIT NO. _____ DATE ISSUED _____										12. COUNTY OR PARISH Rio Arriba					
15. DATE SPUEDDED 7-7-64 16. DATE T.D. REACHED 8-5-64 17. DATE COMPL. (Ready to prod.) 10-28-64 18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 6700' KB, 6687 GL. 19. ELEV. CASINGHEAD 6687										13. STATE New Mexico					
20. TOTAL DEPTH, MD & TVD 7750		21. PLUG, BACK T.D., MD & TVD 7709		22. IF MULTIPLE COMPL., HOW MANY* two		23. INTERVALS DRILLED BY 0 to 7750		ROTARY TOOLS		CABLE TOOLS					
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* Tocito Sand 6978' to 6992'										25. WAS DIRECTIONAL SURVEY MADE no					
26. TYPE ELECTRIC AND OTHER LOGS RUN										27. WAS WELL CORED					
28. CASING RECORD (Report all strings set in well)															
CASING SIZE		WEIGHT, LB./FT.		DEPTH SET (MD)		HOLE SIZE		CEMENTING RECORD		AMOUNT PULLED					
29. LINER RECORD												30. TUBING RECORD			
SIZE		TOP (MD)		BOTTOM (MD)		SACKS CEMENT*		SCREEN (MD)		SIZE		DEPTH SET (MD)		PACKER SET (MD)	
										2-3/8"		6961		7436	
31. PERFORATION RECORD (Interval, size and number) 6978-92 28 holes .56" diameter										32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC. DEPTH INTERVAL (MD) 6978' to 6992' AMOUNT AND KIND OF MATERIAL USED 40,000# sand, 32,466 gal. Tocito crude oil					
33.* PRODUCTION DATE FIRST PRODUCTION 11-10-64 PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Flow WELL STATUS (Producing or shut-in) shut in DATE OF TEST 11-1-64 HOURS TESTED 24 CHOKE SIZE 14/64 PROD'N. FOR TEST PERIOD 167 OIL—BBL. 187 GAS—MCF. 0 WATER—BBL. 1120 GAS-OIL RATIO FLOW. TUBING PRESS. 300 to 425 CASING PRESSURE 1695 CALCULATED 24-HOUR RATE 167 OIL—BBL. 167 GAS—MCF. 0 WATER—BBL. 41 OIL GRAVITY-API (CORR.) 34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) gas vented during test TEST WITNESSED BY 35. LIST OF ATTACHMENTS Form 9-330 for Dakota zone 36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records SIGNED Frank Gray TITLE Superintendent DATE 11-16-64															

*** (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:			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			NAME	TOP		
FORMATION	TOP	BOTTOM		DESCRIPTION, CONTENTS, ETC.	MEAS. DEPTH	TRUE VERT. DEPTH