

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN DUPLICATE*

FOR APPROVED
OMB NO. 1004-0137
EXPIRES December 31, 1991

WELL COMPLETION OR RECOMPLETION REPORT AND LOG*

1. TYPE OF WELL. OIL ☐ GAS ☐ DEW ☐ OTHER ☐

2. TYPE OF COMPLETION:

NEW WELL ☐ WORK OVER ☐ DEEPEN ☐ OTHER ☐

3. NAME OF OPERATOR

Meridian Oil Inc

4. ADDRESS AND TELEPHONE NO.

PO Box 4289, Farmington, NM 87499 (505) 326-9700

5. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*

At surface 1550'FSL, 810'FWL

At top prod. interval reported below

At total depth

DHC R-10239

14. PERMIT NO.

DATE ISSUED

Sec. 34 T-26-N, R-6-E

12. COUNTY OR PARISH

13. STATE

Rio Arriba

NM

15. DATE SPUDDED

7-24-73

16. DATE T.D. REACHED

8-9-73

17. DATE COMPL. (Ready to prod.)

7-6-95

18. ELEVATIONS (DF, ANS, RT, GR, ETC.)*

6783 GR

19. SLEV. CASSINUS

20. TOTAL DEPTH, MD & TVD

7572

21. PLUG BACK T.D., MD & TVD

22. IF MULTIPLE COMPL., HOW MANY*

3

23. INTERVALS DRILLED BY

ROTARY TOOLS

0-7572

CABLE TOOL

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*

25. WAS DIRECT SURVEY MADE

6332-6607 Gallup

26. TYPE ELECTRIC AND OTHER LOGS RUN

CBL-CCL-GR

27. WAS WELL COM

28. CASING RECORD (Report all strings set in well)

CASING SIZE/GRADE	WEIGHT, LB/FT.	DEPTH SET (MD)	HOLE SIZE	TOP OF CEMENT, CEMENTING RECORD	AMOUNT OF
9 5/8	32.3#	206	13 3/4	224 cu. ft. <i>SX</i>	
4 1/2	11.6 & 10.5#	7572	8 3/4 & 7 7/8	1838 cu. ft. <i>SX</i>	

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	BACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PAGES SET
					2 3/8	6442	CIRP 700 pkr @ 54

31. PERFORATION RECORD (Interval, size and number)

6332, 6338, 6354, 6376, 6390, 6420, 6445,
6459, 6489, 6505, 6521, 6536, 6557, 6600,
6607

32. ACID, SHOT, FRACTURE, CEMENT SQUEEZES, ETC.

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL, ETC.
6332-6607	70,300# 20/40 DC sd, 1456 bbl 30# linear gel

33. PRODUCTION

DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—give and type of pump)				WELL STATUS (Producing, shut-in)	
7-6-95		Flowing				ST	
DATE OF TEST	HOURS TESTED	CHOKED SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL	GAS—MCF	WATER—BBL	GAS—BBL
7-6-95			→	45 BOPD	60	Pilot Gauge	
FLOW, TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL	GAS—MCF	WATER—BBL	OIL GRABED—BBL ()	
SI 960	SI 960	→					

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)

To be sold

35. LIST OF ATTACHMENTS

None

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

SIGNED

[Signature]

TITLE Regulatory Affairs

FARMINGTON DISTRICT OFFICE

*(See instructions and spaces for Additional Data on Reverse Side)

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

NMOCD

ACCEPTED FOR RECORD

JUL 31 1995

7-200E95

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

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	38. GEOLOGIC MARKERS		
				NAME	MEAS. DEPTH	TRUE VERT. DEPTH
				Pictured Cliffs	2940	
				Chacra	3810	
				Mesa Verde	4620	
				Point Lookout	5190	
				Gallup	6328	
				Greenhorn	7088	
				Graneros	7154	
				Dakota	7296	