

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 Consolidated Oil & Gas Inc.						5. LEASE DESIGNATION AND SERIAL NO. NM 095596	
3. ADDRESS OF OPERATOR P.O. Box 2038 Farmington, New Mexico						6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 1190' From the North Line, 990' From the East Line At top prod. interval reported below of Section 30 At total depth						7. UNIT AGREEMENT NAME	
14. PERMIT NO.						DATE ISSUED	
15. DATE SPUNDED						16. DATE T.D. REACHED	
17. DATE COMPL. (Ready to prod.)						18. ELEVATION'S (DF, RSB, RT, GR, ETC.)*	
19. ELEV. CASING HEAD						20. TOTAL DEPTH, MD & TVD	
21. PLUG, BACK T.D., MD & TVD						22. IF MULTIPLE COMPL., HOW MANY*	
23. INTERVALS DRILLED BY						ROTARY TOOLS	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*						CABLE TOOLS	
25. WAS DIRECTIONAL SURVEY MADE						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
8 5/8"		24.00#	249	12 1/4"	150 sacks of class A w/ 2% Ca Cl ₂		
4 1/2"		10.50	6540	7 5/8"	255 sacks of 50-50 permix with 4% gal.		
29. LINER RECORD				30. TUBING RECORD			
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					1 1/2"	6370	
31. PERFORATION RECORD (Interval, size and number)				32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
6386-6422 4 holes per foot				DEPTH INTERVAL (MD)			
Total 144 1/2" holes				AMOUNT AND KIND OF MATERIAL USED			
				6386-6422 Sand and water frac 60,000# sand and 1722 barrels of water.			
33.* PRODUCTION							
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)				WELL STATUS (Producing or shut in)	
		Flowing					
DATE OF TEST		HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.
5-29-64		3	3/4				
FLOW. TUBING PRESS.		CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	OIL GRAVITY API (SGR.)	
156		1020			2290		
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)							
35. LIST OF ATTACHMENTS							
Acoustic velocity log and Induction electric log and a Drilling and Completion History.							
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records							
SIGNED <i>Harold E. Pugh</i>		TITLE Area Superintendent				DATE June 9, 1964	

*(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 36.

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	NAME	TOP MEAS. DEPTH TRUE VERT. DEPTH
Dakota	6382 6462	6420 6476	Fine to medium grained sandstone	