

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 _____		5. LEASE DESIGNATION AND SERIAL NO. SR-078062	
b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐		6. IF INDIAN, ALLOTTEE OR TRIBE NAME _____	
2. NAME OF OPERATOR Shell Oil Company		7. UNIT AGREEMENT NAME _____	
3. ADDRESS OF OPERATOR 1700 Broadway, Denver, Colorado 80202		8. FARM OR LEASE NAME Mudge 2	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements) At surface 950' FNL and 1500' FNL Section 8 At top prod. interval reported below _____ At total depth _____		9. WELL NO. 7300	
14. PERMIT NO. _____ DATE ISSUED _____		10. FIELD AND POOL, OR WILDCAT Basin Dakota	
15. DATE SPUDDED 5/18/73		11. SEC. T., R., M., OR BLOCK AND SURVEY OR AREA NW/4 NE/4 Section 8- T25N-R11W	
16. DATE T.D. REACHED 5/30/73		12. COUNTY OR PARISH San Juan	
17. DATE COMPL. (Ready to prod.) 9/7/73		13. STATE New Mexico	
18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 6344 KB, 6330 GL		19. ELEV. CASINGHEAD 6328	
20. TOTAL DEPTH, MD & TVD 5993		21. PLUG, BACK T.D., MD & TVD 5847	
22. IF MULTIPLE COMPL., HOW MANY* _____		23. INTERVALS DRILLED BY Total	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 5811-5831 (gross interval)		25. WAS DIRECTIONAL SURVEY MADE No	
26. TYPE ELECTRIC AND OTHER LOGS RUN CBL, VDL, PDC, DIL, Acoustilog, Densilog, GR		27. WAS WELL CORED No	
28. CASING RECORD (Report all strings set in well)			
CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE
8-5/8"	24#	518'	12-1/4"
4-1/2"	11.6#	5981'	7-7/8"
29. LINER RECORD			
SIZE	TOP (MD)	BOTTOM (MD)	SCREEN (MD)
30. TUBING RECORD			
SIZE	DEPTH SET (MD)	PACKER SET (MD)	
2-3/8	5677		
31. PERFORATION RECORD (Interval, size and number) 5811-5831 (2 jets/ft)			
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED	
5811-5831		See attached 7/2/73 report	
5811-5831		See attached 7/25/73 report	
33.* PRODUCTION			
DATE FIRST PRODUCTION *		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Flowing	
WELL STATUS (Producing or shut-in) Producing *			
DATE OF TEST ** 10/27/73	HOURS TESTED 24	CHOKE SIZE N.A.	PROD'N. FOR TEST PERIOD →
FLOW. TUBING PRESS. 75	CASING PRESSURE 500	CALCULATED 24-HOUR RATE →	
OIL—BBL. -		GAS—MCF. 130	
WATER—BBL. 18		OIL GRAVITY-API (CORR.) -	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) To be sold to El Paso Natural Gas Company			
35. LIST OF ATTACHMENTS Well History Report			
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records			
SIGNED T.S. Mize		TITLE Division Operations Engr.	
DATE 5/16/74			

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

* Estimated latter part of week of May 13, 1974

** Last date of recorded test

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.

... and 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. Consult local State

18: Indicate which elevation is used as reference (where not otherwise shown).
 19: If this well is completed for generate production from more than one interval.
 20: If this well is completed for generate production from more than one interval.
 21: If this well is completed for generate production from more than one interval.
 22: If this well is completed for generate production from more than one interval.
 23: If this well is completed for generate production from more than one interval.
 24: If this well is completed for generate production from more than one interval.

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 27: *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	DESCRIPTION, CONTENTS, ETC.	NAME	TOP MEAS. DEPTH TRUE VERT. DEPTH