

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 <u>Plan to RA</u>		5. LEASE DESIGNATION AND SERIAL NO. N00-C-14-20-5245																									
b. TYPE OF COMPLETION: NEW WELL ☐ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESV. ☐ Other ☐		6. IF INDIAN, ALLOTTEE OR TRIBE NAME Navajo Allottee																									
2. NAME OF OPERATOR Robert L. Bayless		7. UNIT AGREEMENT NAME																									
3. ADDRESS OF OPERATOR P.O. Box 1541, Farmington, NM 87401		8. FARM OR LEASE NAME FBD Com																									
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements): At surface 1840' FNL & 790' FEL At top prod. interval reported below same At total depth same		9. WELL NO. 1																									
10. FIELD AND POOL, OR WILDCAT Bisti Lower Gallup		11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA Sec. 21, T25N, R11W																									
12. COUNTY OR PARISH San Juan		13. STATE NM																									
15. DATE SPUDDED 4-19-82	16. DATE T.D. REACHED 4-26-82	17. DATE COMPL. (Ready to prod.) 5-28-82	18. ELEVATION OF WELL HEAD, ETC.* 6448'																								
20. TOTAL DEPTH, MD & TVD 5100'	21. PLUG, BACK T.D., MD & TVD 5021 RKB	22. IF MULTIPLE COMPL., HOW MANY*	23. INTERESTED PARTIES TOOLS CABLE TOOLS																								
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 4812-4944 Upper Gallup/Lower Gallup			25. WAS DIRECTIONAL SURVEY MADE no																								
26. TYPE ELECTRIC AND OTHER LOGS RUN Cement Bond, Gamma Ray-Collar Location Log Induction Electric and Density Borehole Compensated Log			27. WAS WELL CORED no																								
28. CASING RECORD (Report all strings set in well)																											
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34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) vented																											
35. LIST OF ATTACHMENTS																											
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available data.																											
SIGNED <u>Robert L. Bayless</u> TITLE <u>Operator</u> DATE <u>9/27/82</u> <u>SEP 30 1982</u>																											

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

NMOCC

FARMINGTON DISTRICT
BY EBK

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				38. GEOLOGIC MARKERS		
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH	TRUE VERT. DEPTH
Gallup	4905	4945	Water, Trace Oil	Base Ojo Alamo Bottom " Fruitland Pictured Cliffs Cliff House Pt. Lookout Gallup	330 440 973 1263 2018 3702 4736	