

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other instructions 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 Caulkins Oil Company						7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR P.O. Box 780, Farmington, New Mexico 87401						8. FARM OR LEASE NAME Breech up	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 930 from the North and 970 from the East At top prod. interval reported below Same At total depth Same						9. WELL NO. 504	
14. PERMIT NO.						13. STATE New Mexico	
15. DATE SPUDDED 6-14-76						18. ELEVATIONS (OF, RES, ET, OR, ETC.)* 6687	
16. DATE T.D. REACHED 6-19-76						19. ELEV. CASINGHEAD 6687	
17. DATE COMPL. (Ready to prod.) 7-9-76						23. INTERVALS DRILLED BY 0-3310	
20. TOTAL DEPTH, MD & TVD 3310						21. PLUG, BACK T.D., MD & TVD 3310	
22. IF MULTIPLE COMPL., HOW MANY*						24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 3228 to 3278	
25. WAS DIRECTIONAL SURVEY MADE						26. TYPE ELECTRIC AND OTHER LOGS RUN	
27. WAS WELL CORED						28. WAS WELL CORED	
29. CASING RECORD (Report all strings set in well)							
CASING SIZE		WEIGHT, LB./FT.		DEPTH SET (MD)		CEMENTING RECORD	
8 5/8"		24.3		100'		122 sacks	
3 1/2"		9.3		3310		585 sacks	
30. TUBING RECORD							
SIZE		TOP (MD)		BOTTOM (MD)		PACKER SET (MD)	
1"		3228		3278		3278	
31. PERFORATION RECORD (Interval, size and number)							
3228 to 3230		.42		44 Holes			
3268 to 3278		.42		20 Holes			
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.							
DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED					
3228-3278		60,000 20-40 sand and 1551 lbs. water					
33. PRODUCTION							
DATE FIRST PRODUCTION 7-16-		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Flowing				WELL STATUS (Producing or shut-in)	
DATE OF TEST 7-16-76		HOURS TESTED 3		CHOKE SIZE 3/4"		PROD'N. FOR TEST PERIOD	
FLOW. TUBING PRESS. 30		CASING PRESSURE 520		CALCULATED 24-HOUR RATE 595		OIL GRAVITY-API (CORR.)	
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 records							
SIGNED Charles E. Vergara District Engineer						DATE 7-16-76	

*(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 35, 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.)

**Cemented 1 1/2" 9.34 casing at 3310 with 536 sacks 65-35-12 Gel
Cement followed by 50 sacks Heat. Cement circulated to surface.**

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.
Alamo	2605	2755	
Pictured Cliffs	3216	3300	
Deviation Test (Degrees)			
	2605	2755	1 1/4
	3216	3300	3 1/4
			1 1/4
			1
			1 1/4
			1 1/2
			1 1/2