

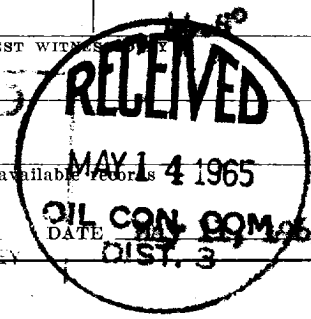
UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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. 14-20-603-5034	
b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other _____		6. IF INDIAN, ALLOTTEE OR TRIBE NAME Navajo Tribe	
2. NAME OF OPERATOR PAN AMERICAN PETROLEUM CORPORATION		7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR P. O. Box 480, Farmington, New Mexico		8. FARM OR LEASE NAME Navajo Tribal "U"	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 660 FSL and 660 FEL At top prod. interval reported below At total depth Same		9. WELL NO. 5	
14. PERMIT NO.		DATE ISSUED	
15. DATE SPUDDED 4-12-65		16. DATE T.D. REACHED 4-30-65	
17. DATE COMPL. (Ready to prod.) 5-4-65		18. ELEVATIONS (DF, RKE, RT, GR, ETC.)* 5768 (RDB)	
19. ELEV. CASINGHEAD —		12. COUNTY OR PARISH San Juan	
20. TOTAL DEPTH, MD & TVD 6450		13. STATE New Mexico	
21. PLUG, BACK T.D., MD & TVD 6413		10. FIELD AND POOL, OR WILDCAT Tecito Dome Pennsylvanian "T"	
22. IF MULTIPLE COMPL., HOW MANY*		11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA SE 1/4 SE 1/4 Section 16 T-26-N, R-18-W	
23. INTERVALS DRILLED BY —		12. COUNTY OR PARISH San Juan	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* Lower Hermosa 6272-6330		13. STATE New Mexico	
25. WAS DIRECTIONAL SURVEY MADE No		14. PERMIT NO.	
26. TYPE ELECTRIC AND OTHER LOGS RUN ES-Induction, Gamma Ray Sonic with Caliper		DATE ISSUED	
27. WAS WELL CORED Yes		15. DATE SPUDDED 4-12-65	
28. CASING RECORD (Report all strings set in well)		16. DATE T.D. REACHED 4-30-65	
29. LINER RECORD		17. DATE COMPL. (Ready to prod.) 5-4-65	
30. TUBING RECORD		18. ELEVATIONS (DF, RKE, RT, GR, ETC.)* 5768 (RDB)	
31. PERFORATION RECORD (Interval, size and number) 6291-6302 with 4 shots per foot		19. ELEV. CASINGHEAD —	
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.		20. TOTAL DEPTH, MD & TVD 6450	
33. PRODUCTION		21. PLUG, BACK T.D., MD & TVD 6413	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) To be sold to El Paso Natural Gas Company		22. IF MULTIPLE COMPL., HOW MANY*	
35. LIST OF ATTACHMENTS None		23. INTERVALS DRILLED BY —	
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records		24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* Lower Hermosa 6272-6330	
SIGNED Fred L. Nabors, District Engineer		25. WAS DIRECTIONAL SURVEY MADE No	
TITLE District Engineer		26. TYPE ELECTRIC AND OTHER LOGS RUN ES-Induction, Gamma Ray Sonic with Caliper	
U. S. GEOLOGICAL SURVEY		27. WAS WELL CORED Yes	
(See Instructions and Spaces for Additional Data on Reverse Side)		28. CASING RECORD (Report all strings set in well)	



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 to be 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: "Stuffs 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
Surface Sand and Shale	0	2070			
Totillo	2070	2085			
Entrada	2085	2830			
Chino	2830	3745			
De Chelly	3745	4322			
Cutler	4322	5710			
Pennsylvanian	5710	6124			
Carbonates					
Baker Creek	6124	6272			
Lower Permian	6272	6450			