

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.

5. LEASE DESIGNATION AND SERIAL NO.

14-20-603-5019

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

Navajo

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Navajo Tecito

WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Tocito Dome

11. SEC., T., R., M., OR BLOCK AND SURVEY
OR AREA

Sec. 9-T26N-R18W

N.M.P.M.

12. COUNTY OR
PARISH

San Juan

13. STATE

N.M.

WELL COMPLETION OR RECOMPLETION REPORT

RECEIVED

DEC 14 1967

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
Campbell, Koel & RothwellU. S. GEOLOGICAL SURVEY
FARMINGTON, N. M.3. ADDRESS OF OPERATOR
820 Hamilton Building, Wichita Falls, Texas

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*

At surface 1980' from North, 1980' from East

At top prod. interval reported below
Same.

At total depth

14. PERMIT NO. DATE ISSUED

12-15-1967

15. DATE SPURRED 10-31-67 16. DATE T.D. REACHED 11-23-67 17. DATE COMPL. (Report to nearest 10 days) 12-2-67 18. COMPLETION (DF, RKB, RT, GR, ETC.)* OIL CON. COM. DIST. 3 5696 (K.B.) 19. ELEV. CASINGHEAD 5683

20. TOTAL DEPTH, MD & TVD 6365 21. PLUG, BACK T.D., MD & TVD 6328 22. IF MULTIPLE COMPL., HOW MANY* 1 23. INTERVALS DRILLED BY ROTARY TOOLS X CABLE TOOLS

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*

6322'-6328'

25. WAS DIRECTIONAL
SURVEY MADE

Yes

26. TYPE ELECTRIC AND OTHER LOGS RUN

Dual Induction - laterlog, Sonic & G.R.

27. WAS WELL CORED

No

28. CASING RECORD (Report all strings set in well)

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
13-3/8"	48.0	106	17 1/4"	100 sacks	
8-5/8"	24.0	1609	11"	246	None
4 1/2"	4.50	0-3008	7-7/8"	200	None
4 1/2"	10.50	3008-6365	7-7/8"		None

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
		None			2-3/8"	6300	None

31. PERFORATION RECORD (Interval, size and number)

6322-6328 4 shots/ft

32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
	None

33.*

PRODUCTION

DATE FIRST PRODUCTION None PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Flowing WELL STATUS (Producing or shut-in) Shut-in

DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
12-12-67	4 hrs.	27/64"	→	384	8,275 AOP 16,095	None	Est. 57°
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)	
1771 psig	2171 psig	→	384	8,275 AOP 16,095	None	Est. 57°	

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)

TEST WITNESSED BY

35. LIST OF ATTACHMENTS

Multi-point back pressure curve

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records

SIGNED

C. W. M. W. W. W.

TITLE

Registered
Professional Engineer

DATE

12-13-67

*(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 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	TOP TRUE VERT. DEPTH
				Dakota	735	
				Brushy Basin	1120	
				Rock Point	2680	
				Petrified Forest	3090	
				De Chelly	3745	
				Hermosa	5460	
				Penn. A	5845	
				Penn. B	5960	
				Penn. C	6018	
				Penn. D	6136	
				Penn. E	6290	