

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 ☐	
b. TYPE OF COMPLETION:		NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other ☐	
2. NAME OF OPERATOR Texaco Inc. Attention: T. Bliss			
3. ADDRESS OF OPERATOR P. O. Box 2100, Denver, Colorado 80201			
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface NE 1/4 Sec. 27 At top prod. interval reported below 660' FNL & 1980' FNL, Sec. 27 At total depth			
14. PERMIT NO.		DATE ISSUED	
15. DATE SPUDDED 5-25-74		16. DATE T.D. REACHED 6-15-74	
17. DATE COMPL. (Ready to prod.) 6-29-74		18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 5668' KB	
19. ELEV. CASINGHEAD 5656' GR		20. TOTAL DEPTH, MD & TVD 6370'	
21. PLUG, BACK T.D., MD & TVD 6275'		22. IF MULTIPLE COMPL., HOW MANY* --	
23. INTERVALS DRILLED BY Surface to TD		24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* Barker Creek Top 6172' Bottom TD	
25. WAS DIRECTIONAL SURVEY MADE No		26. TYPE ELECTRIC AND OTHER LOGS RUN IRS, SNP, BHC-SONIC-GR	
27. WAS WELL CORED Yes		28. CASING RECORD (Report all strings set in well)	
CASING SIZE		WEIGHT, LB./FT.	
16"		65#	
10-3/4"		40.5#	
7"		20.23, 26#	
DV TOOL		4281'	
DEPTH SET (MD)		HOLE SIZE	
80'		20"	
1595'		12-1/4"	
6383'		8-3/4"	
4281'		650 sacks	
CEMENTING RECORD		AMOUNT PULLED	
100 sacks			
200 sacks			
300 sacks			
650 sacks			
29. LINER RECORD		30. TUBING RECORD	
SIZE		TOP (MD)	
NONE			
BOTTOM (MD)		SACKS CEMENT*	
SCREEN (MD)		SIZE	
		2-7/8"	
		DEPTH SET (MD)	
		6100'	
		PACKER SET (MD)	
31. PERFORATION RECORD (Interval, size and number)		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
SEE ATTACHED		DEPTH INTERVAL (MD)	
		AMOUNT AND KIND OF MATERIAL USED	
		SEE ATTACHED	
33.* PRODUCTION		DATE FIRST PRODUCTION	
6-29-74		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Pumping	
WELL STATUS (Producing or shut-in) Producing		DATE OF TEST 6-29-74	
HOURS TESTED 24		CHOKE SIZE --	
PROD'N. FOR TEST PERIOD 282		OIL—BBL. 282	
GAS—MCF. 288		WATER—BBL. 288	
GAS-OIL RATIO 2363		OIL GRAVITY-API (CORR.) 46.8	
FLOW. TUBING PRESS. --		CASING PRESSURE --	
CALCULATED 24-HOUR RATE --		OIL—BBL. --	
DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Sold		TEST WITNESSED BY W. E. Landry	
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 <i>Tommy Bliss</i>		TITLE District Superintendent DATE July 29, 1974	

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

USGS (3)

OGCC (2)

TB

ARM

CGH

The Navajo Tribe

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			38. GEOLOGIC MARKERS		
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			NAME	TOP	
FORMATION	TOP	BOTTOM		MEAS. DEPTH	TRUE VERT. DEPTH