

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.), formations 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
Penn. "D"	6385'	6470'	Oil, natural gas, water	Todilto	2115'	
CORE NO. 1 - 6372-6394'				Entrada	2160'	
6372-85' - Limestone, medium gray, with numerous interbedded shale stringers, minor fracturing, hard, tight.				DeChelly	3795'	
6385-6408' - Limestone, light gray, very vuggy, good stain & odor.				Cutler	4380'	
CORE NO. 2 - 6405-6426'				Hermosa	5015'	
6405-6417.5 - Limestone, light to medium gray, minor interbedded shale stringers. Hard, tight, no show hydrocarbons.				Penn. "D"	6385'	
6417.5-6420' - Limestone, reddish brown and pale green, soft, crumbly.						
6420-21' - Limestone, light gray, friable.						
6420-37' - Limestone, medium to dark gray, very shaly, hard, tight.						

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 AMOCO PRODUCTION COMPANY		7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR 501 Airport Drive, Farmington, New Mexico 87401		8. FARM OR LEASE NAME Navajo Tribal "U"	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 810' FSL & 785' FKL, Section 15, T-26-N, R-18-W At top prod. interval reported below Same At total depth Same		9. WELL NO. 27	
14. PERMIT NO.		DATE ISSUED	
15. DATE SPUDDED 11-28-74	16. DATE T.D. REACHED	17. DATE COMPL. (Ready to prod.) 1-13-75	18. ELEVATIONS (DF, REB, RT, GR, ETC.)* 5688' RDB
20. TOTAL DEPTH, MD & TVD 6600'	21. PLUG, BACK T.D., MD & TVD 6566'	22. IF MULTIPLE COMPL., HOW MANY*	19. ELEV. CASINGHEAD 5675'
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 6392-6457' Pennsylvanian "D"			25. WAS DIRECTIONAL SURVEY MADE No
26. TYPE ELECTRIC AND OTHER LOGS RUN Induction Electric, Bore Hole-Sonic Log			27. WAS WELL CORED Yes
CASING RECORD (Report all strings set in well)			
CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE
13-3/8"	48#	130'	17-1/4"
9-5/8"	36#	1528'	12-1/4"
7"	20#, 23#, 26#	6600'	8-3/4"
CEMENTING RECORD			
140 sx			
600 sx			
1550 sx			
AMOUNT PULLED			
-			
-			
-			
29. LINER RECORD			
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*
30. TUBING RECORD			
SIZE	DEPTH SET (MD)	PACKER SET (MD)	
2-7/8"	6494'		
31. PERFORATION RECORD (Interval, size and number)			
6392-6412' x 2 SPF			
6447-6449' x 3 SPF			
6455-6457' x 3 SPF			
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED	
6392-6412'		2000 gals. 15% HCl	
6447-6457'		2000 gals. 15% HCl	
33.* PRODUCTION			
DATE FIRST PRODUCTION 1-10-75		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Flowing	
DATE OF TEST 1-13-75		WELL STATUS (Producing or shut-in) Producing	
HOURS TESTED 24	CHOKE SIZE Separator	PROD'N. FOR TEST PERIOD 390	OIL—BBL. 390
CASING PRESSURE 510	CALCULATED 24-HOUR RATE 390	GAS—MCF. 746	WATER—BBL. 85
FLOW. TUBING PRESS. 180		GAS—MCF. 746	WATER—BBL. 85
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Sold		OIL GRAVITY-API (CORR.) 46°	
35. LIST OF ATTACHMENTS		TEST WITNESSED BY	
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records			
SIGNED Sh Hamilton		TITLE Area Adm. Supvr.	
		DATE 2-3-75	

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