

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE

(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 <input type="checkbox"/> GAS WELL <input type="checkbox"/> DRY <input checked="" type="checkbox"/> Other _____				5. LEASE DESIGNATION AND SERIAL NO. N00-C14-20-4157	
b. TYPE OF COMPLETION: NEW WELL <input type="checkbox"/> WORK OVER <input type="checkbox"/> DEEP-EN <input type="checkbox"/> PLUG BACK <input type="checkbox"/> DIFF. RESVR. <input type="checkbox"/> Other _____				6. IF INDIAN, ALLOTTEE OR TRIBE NAME Navajo	
2. NAME OF OPERATOR Ashland Exploration Co.				7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR Suite 2500, The First of Denver Plaza, 633 Seventeenth St. Denver, CO 80202				8. FARM OR LEASE NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface NW SW Section 5, 1980 FSL 660 FWL T26N - R19W At top prod. interval reported below At total depth				9. WELL NO. Navajo 5 #2	
14. PERMIT NO. _____ DATE ISSUED _____				10. FIELD AND POOL, OR WILDCAT Wildcat	
15. DATE SPUDDED June 2, 1975				11. SEC. T. R., M., OR BLOCK AND SURVEY OR AREA Section 5 T26N-R19W	
16. DATE T.D. REACHED July 7, 1975				12. COUNTY OR PARISH San Juan	
17. DATE COMPL. (Ready to prod.) 7-7-75				13. STATE New Mexico	
18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 5993 GR				19. ELEV. CASINGHEAD	
20. TOTAL DEPTH, MD & TVD 6525		21. PLUG, BACK T.D., MD & TVD		22. IF MULTIPLE COMPL., HOW MANY*	
23. INTERVALS DRILLED BY				24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*	
25. WAS DIRECTIONAL SURVEY MADE NO				26. TYPE ELECTRIC AND OTHER LOGS RUN Densilog - Dual Induction Focus Log - Sidewall Neutron	
27. WAS WELL CORED YES				28. CASING RECORD (Report all strings set in well)	
CASING SIZE 9-5/8		WEIGHT, LB./FT. 32.3		DEPTH SET (MD) 1491	
HOLE SIZE 12 1/4		CEMENTING RECORD 400 sacks		AMOUNT PULLED NONE	
29. LINER RECORD				30. TUBING RECORD	
SIZE		TOP (MD)		BOTTOM (MD)	
SACKS CEMENT*		SCREEN (MD)		SIZE	
DEPTH SET (MD)		PACKER SET (MD)		SIZE	
31. PERFORATION RECORD (Interval, size and number)				32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
33.* PRODUCTION				WELL STATUS (Producing or shut-in)	
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)			
DATE OF TEST		HOURS TESTED		CHOKE SIZE	
PROD'N. FOR TEST PERIOD		OIL—BBL.		GAS—MCF.	
FLOW, TUBING PRESS.		CASING PRESSURE		CALCULATED 24-HOUR RATE	
OIL—BBL.		GAS—MCF.		WATER—BBL.	
OIL GRAVITY-API (CORR.)		TEST WITNESSED BY			
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)					
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 _____		TITLE Operations Engineer		DATE 11/7/77	

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

**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.

should be listed on this form, see item 35. Attachments to landowners on Federal or Indian land should be described in accordance with Federal requirements. Consult local State and/or State office. See instructions on items 2 and 24, back of cover of accompanying application form. 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.

for each additional interval to be separately produced, showing the additional data pertinent to such interval.

**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.)

DEPTH INTERVAL TESTED, CUSHION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES