

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. NM-0560223	
b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other _____		6. IF INDIAN, ALLOTTEE OR TRIBE NAME _____	
2. NAME OF OPERATOR Dome Petroleum Corp.		7. UNIT AGREEMENT NAME _____	
3. ADDRESS OF OPERATOR 1500 Colorado State Bank Bldg., Denver, Colorado 80202		8. FARM OR LEASE NAME Frew Federal	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 1190' FNL and 1190' FEL At top prod. interval reported below same At total depth same		9. WELL NO. 5	
14. PERMIT NO. _____ DATE ISSUED _____		10. FIELD AND POOL, OR WILDCAT Nipp Pictured Cliff	
15. DATE SPUDDED 4-28-77		11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA Sec 19, T26N, R12W	
16. DATE T.D. REACHED 4-30-77		12. COUNTY OR PARISH San Juan	
17. DATE COMPL. (Ready to prod.) 8-19-77		13. STATE New Mexico	
18. ELEVATIONS (DF, REB, RT, GR, ETC.)* 6039 G.L.		19. ELEV. CASINGHEAD 6039	
20. TOTAL DEPTH, MD & TVD 1302		21. PLUG, BACK T.D., MD & TVD 1165	
22. IF MULTIPLE COMPL., HOW MANY* _____		23. INTERVALS DRILLED BY _____ ROTARY TOOLS 0-1302 CABLE TOOLS _____	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 1131-1152 Pictured Cliff		25. WAS DIRECTIONAL SURVEY MADE Yes	
26. TYPE ELECTRIC AND OTHER LOGS RUN IES, FDC/CNL, Gamma Ray, Caliper		27. WAS WELL CORED NO	
28. CASING RECORD (Report all strings set in well)			
CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE
8 5/8	20	49	11
4 1/2	10.5	1301	6 3/4
CEMENTING RECORD		AMOUNT PULLED	
50 sk class "B" + 2% CaCl ₂		None	
200 sk class "B"		None	
29. LINER RECORD			
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*
N/A			
30. TUBING RECORD		PACKER SET (MD)	
SIZE	DEPTH SET (MD)	N/A	
2 3/8	1053		
31. PERFORATION RECORD (Interval, size and number)			
1131-1134	0.4" i.d.	6 shots	
1143-1146	0.4" i.d.	6 shots	
1148-1152	0.4" i.d.	8 shots	
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED	
1131-1152		575 gal. "Gas Well Acid"	
33.* PRODUCTION			
DATE FIRST PRODUCTION 5-17-77		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Flowing	
WELL STATUS (Producing or shut-in) Shut-in			
DATE OF TEST 4-14-78	HOURS TESTED 3	CHOKE SIZE 3/4	PROD'N. FOR TEST PERIOD
OIL—BBL. TSTM		GAS—MCF. TSTM	
WATER—BBL. TSTM		GAS-OIL RATIO	
FLOW. TUBING PRESS. TSTM		CASING PRESSURE 40	
CALCULATED 24-HOUR RATE TSTM		OIL GRAVITY-API (CORR.)	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)		TEST WITNESSED BY C. D. Moore	
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 William T. Jones		TITLE Agent	
DATE 5-12-78			

*(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 TRUE VERT. DEPTH
				Fruitland Pictured Cliffs	560' 1130'