

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R355.5.

5. LEASE DESIGNATION AND SERIAL NO.

NM C-560223

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Frew Federal

9. WELL NO.

9

10. FIELD AND BOO. OR WILDCAT

New Mexico
NIPP Pictured Cliff

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

Sec 30, T26N, R12W

12. COUNTY OR PARISH

San Juan

13. STATE

NM

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

Dome Petroleum Corp.

3. ADDRESS OF OPERATOR

501 Airport Drive, Suite 107, Farmington, NM 87401

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

At surface 1850' FNL & 790' FEL

At top prod. interval reported below

At total depth

14. PERMIT NO.

DATE ISSUED

15. DATE SPUDDED

1-22-79

16. DATE T.D. REACHED

1-25-79

17. DATE COMPL. (Ready to prod.)

2-12-79

18. ELEVATIONS (DF, REB, RT, GR, ETC.)*

6086 GR

19. ELEV. CASINGHEAD

6086

20. TOTAL DEPTH, MD & TVD

1270

21. PLUG, BACK T.D., MD & TVD

1234

22. IF MULTIPLE COMPL., HOW MANY*

23. INTERVALS DRILLED BY

ROTARY TOOLS

CABLE TOOLS

0' - 1270'

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

1110' - 1200' Pictured Cliff

25. WAS DIRECTIONAL SURVEY MADE

No

26. TYPE ELECTRIC AND OTHER LOGS RUN

Induction Electric Log, Formation Density / Neutron

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
5 1/2"	15.50#	43'	7 7/8"	35 sacks	None
2 7/8"	6.50#	1265'	4 3/4"	150 sacks	None

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)

30. TUBING RECORD

31. PERFORATION RECORD (Interval, size and number)

1106' - 1108', 1112' - 1120' with 2 jet shots/ft.

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
1106' - 1108'	Foam frac with 28000# 10-20- sand
1112-1120	

33.* PRODUCTION

DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)				WELL STATUS (Producing or shut-in)	
1-30-79		Flowing				Shut in	
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
2-12-79	3	3/4"	→	0	86	0	----
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)	
36 psi	SIP - 220	→	0	688	0	----	

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

To Be Sold - Test Vented

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

H. D. Hollingsworth

TITLE Drilling Foreman

DATE 2-13-79

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

NMOC

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 report is submitted, copies of all currently available logs (advisors' recommended).

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 (subarea 2.4.4.1) and whether 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 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 wellbore cementing operations.

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.)

KNOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF; CORRED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CUBICION (SED. TIME TOOL, OPEN, FLOWING AND SHUT-IN PRESSURE), AND RECOVERIES

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