

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 <input checked="" type="checkbox"/>	GAS WELL <input type="checkbox"/>	DRY <input type="checkbox"/>	Other _____		
b. TYPE OF COMPLETION:		NEW WELL <input checked="" type="checkbox"/>	WORK OVER <input type="checkbox"/>	DEEP-EN <input type="checkbox"/>	PLUG BACK <input type="checkbox"/>	DIFF. RESVR. <input type="checkbox"/>	Other _____
2. NAME OF OPERATOR Dome Petroleum Corp.						7. UNIT AGREEMENT NAME _____	
3. ADDRESS OF OPERATOR 501 Airport Drive, Suite 107, Farmington, NM 87401						8. FARM OR LEASE NAME Dome Old Trading Post	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 660' FNL & 990' FEL At top prod. interval reported below At total depth						9. WELL NO. 2	
14. PERMIT NO. _____						13. STATE New Mexico	
15. DATE SPUDDED 1/27/79						18. ELEVATIONS (DF, REB, RT, GR, ETC.)* 6249' GR	
16. DATE T.D. REACHED 2/3/79						19. ELEV. CASINGHEAD 6249'	
17. DATE COMPL. (Ready to prod.) 3/24/79						20. TOTAL DEPTH, MD & TVD 5216	
21. PLUG, BACK T.D., MD & TVD 5144						22. IF MULTIPLE COMPL., HOW MANY* -----	
23. INTERVALS DRILLED BY -----						24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 5060' - 5076' Lower Gallup	
25. WAS DIRECTIONAL SURVEY MADE No						26. TYPE ELECTRIC AND OTHER LOGS RUN Dual 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	
8 5/8"		23#	219	12 1/4"	200 sacks	None	
4 1/2"		10.5#	5183	7 7/8"	1285 sacks	None	
29. LINER RECORD						30. TUBING RECORD	
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					2 3/8"	5074	-----
31. PERFORATION RECORD (Interval, size and number) 5060 - 5076 with 2 jet shots/ft				32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
DEPTH INTERVAL (MD)				AMOUNT AND KIND OF MATERIAL USED			
5060-5076				Gel Oil Frac with 73,000# 20-40 and 10-20 sand			
33.* PRODUCTION				WELL STATUS (Producing or shut-in)			
DATE FIRST PRODUCTION 3/24/79		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Pumping			Producing		
DATE OF TEST 3/27/79	HOURS TESTED 24	CHOKE SIZE -----	PROD'N. FOR TEST PERIOD -----	OIL—BBL. 18	GAS—MCF. TSTM	WATER—BBL. -0-	GAS-OIL RATIO -----
FLOW. TUBING PRESS. -----	CASING PRESSURE -----	CALCULATED 24-HOUR RATE -----	OIL—BBL. 18	GAS—MCF. TSTM	WATER—BBL. -0-	OIL GRAVITY-API (CORR.) 39.8	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Fuel						TEST WITNESSED BY H. D. Hollingsworth	
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 4/9/79			

*(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.

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 16: 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.)

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

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