

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUP. DATE*

(See other in-
structions on
reverse side)Form approved.
Budget Bureau No. 42-R3556.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL: OIL WELL ☐ GAS WELL ☒ DRY ☐ Other _____		5. LEASE DESIGNATION AND SERIAL NO. NM 10246	
b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. CESVR. ☐ Other _____		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
2. NAME OF OPERATOR Dugan Production Corp.		7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR Box 208, Farmington, NM 87401		8. FARM OR LEASE NAME Mike	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 860' FNL - 860' FWL At top prod. interval reported below At total depth		9. WELL NO. 1A5	
14. PERMIT NO.		DATE ISSUED	
15. DATE SPUDDED 4-30-79		16. DATE T.D. REACHED 5-4-79	
17. DATE COMPL. (Ready to prod.) 7-30-79		18. ELEVATIONS (DF, REB, RT, OR, ETC.)* 5999' GR	
19. ELEV. CASINGHEAD		20. TOTAL DEPTH, MD & TVD 1230'	
21. PLUG, BACK T.D., MD & TVD 1128'		22. IF MULTIPLE COMPL., HOW MANY? Single - Gas	
23. INTERVALS DRILLED BY →		ROTARY TOOLS 0-TD	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 1103-1110' 1090-1093 Pictured Cliffs		25. WAS DIRECTIONAL SURVEY MADE No	
26. TYPE ELECTRIC AND OTHER LOGS RUN Welex IES Blue Jet gamma ray		27. WAS WELL CORED No	
28. CASING RECORD (Report all strings set in well)			
CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE
5-1/2"	15.5#	31' GR	7-7/8"
2-7/8"	6.4#	1210' GR	4-3/4"
29. LINER RECORD		30. TUBING RECORD	
SIZE	TOP (MD)	BOTTOM (MD)	PACKER CEMENT*
			SCREEN (MD)
			SIZE
			DEPTH SET (MD)
			PACKER SET (MD)
31. PERFORATION RECORD (Interval, size and number)		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
1103-1110' (7 shots) 1090-1093' (3 shots)		DEPTH INTERVAL (MD)	
		AMOUNT AND KIND OF MATERIAL USED	
		See Sundry Notice 8-01-79 for detailed info	
33.* PRODUCTION			
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)	
		Flowing	
WELL STATUS (Producing or shut-in)		SI	
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD
8-6-79	3 hrs	5/8"	→
OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
	605		
FLOW. TUBING PRESS.	CASINO PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.
165 SI	165 SI	→	GAS—MCF.
			605 MCF
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)		TEST WITNESSED BY	
35. LIST OF ATTACHMENTS			
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records			
2. A. Dugan			
TITLE: Petroleum Engineer			
DATE: 8-06-79			

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 33.

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; CORDED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CUSHION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES

FORMATION

TOP

BOTTOM

DESCRIPTION, CONTENTS, ETC.

38.

GEOLOGIC MARKERS

NAME

MEAS. DEPTH

TOP

TRUE VERT. DEPTH

Log Tops

Kirtland

107'

Fruitland

966'

Pictured Cliffs

1090'