

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 type="checkbox"/>	GAS WELL <input checked="" 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. DESVR. <input type="checkbox"/>	Other _____
2. NAME OF OPERATOR						7. UNIT AGREEMENT NAME	
Tenneco Oil Company						8. FARM OR LEASE NAME	
3. ADDRESS OF OPERATOR						9. WELL NO.	
720 S. Colo. Blvd. Denver, CO 80222						6E	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*						10. FIELD AND POOL, OR WILDCAT	
At surface 990'FNL, 1550'FWL, Unit C						Basin Dakota	
At top prod. interval reported below						11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA	
At total depth						Sec. 17; T26N; R11W	
14. PERMIT NO.				DATE ISSUED			
15. DATE SPUDDED				18. ELEVATIONS (DF, REB, RT, GR, ETC.)*			
12/4/79				6147'GL			
16. DATE T.D. REACHED		17. DATE COMPL. (Ready to prod.)		23. INTERVALS DRILLED BY		ROTARY TOOLS	
12/13/79		1/15/80		→		0-TD	
20. TOTAL DEPTH, MD & TVD		21. PLUG, BACK T.D., MD & TVD		22. IF MULTIPLE COMPL., HOW MANY*		CABLE TOOLS	
6198		6134				no	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*						19. ELEV. CASINGHEAD	
6020-6056 (Dakota)						25. WAS DIRECTIONAL SURVEY MADE	
26. TYPE ELECTRIC AND OTHER LOGS RUN						27. WAS WELL CORED	
GR-Induction, FDC-CNL						no	
28. CASING RECORD (Report all strings set in well)							
CASING SIZE		WEIGHT, LB./FT.		DEPTH SET (MD)		HOLE SIZE	
9 5/8"		24#		523		12 1/4	
4 1/2"		10.5#		6198		7 7/8	
29. LINER RECORD				30. TUBING RECORD			
SIZE		TOP (MD)		BOTTOM (MD)		SIZE	
						2 3/8	
						6012	
31. PERFORATION RECORD (Interval, size and number)				32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
6020-6056 w/2SPF, 72 holes				DEPTH INTERVAL (MD)			
				6020-56			
				1500 gal 15% HCL			
				50000# gal 30# gel			
				30000# 20/40 sand			
				10000# 10/20 sand			
33. PRODUCTION							
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)				WELL STATUS (Producing or shut-in)	
2/13/80		flowing				shut-in	
DATE OF TEST		HOURS TESTED		CHOKE SIZE		PROD'N. FOR TEST PERIOD	
2/13/80		3		3/4"		→	
FLOW. TUBING PRESS.		CASING PRESSURE		CALCULATED 24-HOUR RATE		OIL—EBL.	
3		325		→		AOF-267	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)						TEST WITH	
vented						FEB 21 1980	
35. LIST OF ATTACHMENTS						OIL CON. COM.	
Electric logs forwarded by Dresser Atlas						DIST. 3	
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records							
SIGNED		TITLE				DATE	
[Signature]		Admin. Supervisor				2/18/80	

*(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 38, 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 2 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 38. Submit a separate report (page 2 of this form) adequately identified, for each additional interval to be separately produced, showing the additional data pertinent to such interval.

Item 29: "Socks 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 (FMD, 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
Pictured Cliffs	1412	1550	Sand, water	Greenhorn	5866	5925
Cliffhouse	2320	2400	Sand, water			
Menefee	2400	3810	Sand, Shale, Gas			
Pt. Lookout	3810	4150	Sand, Shale, water			
Graneros	4925	6020	Shale, Sand, water			
Dakota	6020	6110	Sand, Shale, Gas			