

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

WELL COMPLETION OR RECOMPLETION REPORT AND LOG*

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 John H. Hill and Gordon L. Llewellyn					
3. ADDRESS OF OPERATOR Suite 140 Campbell Centre 8350 N. Central Expressway Dallas, Texas 75206					
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 1085' FNL, 840' FWL Sec. 9 At top prod. interval reported below Same At total depth Same					
14. PERMIT NO.		DATE ISSUED 12-28-79			
15. DATE SPUDDED 1-3-80		16. DATE T.D. REACHED 1-6-80		17. DATE COMPL. (Ready to prod.) 1-18-80	
18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 6382' Gr, 6392' KB		19. ELEV. CASINGHEAD 6382'			
20. TOTAL DEPTH, MD & TVD 2440'		21. PLUG, BACK T.D., MD & TVD 2398'		22. IF MULTIPLE COMPL., HOW MANY* --	
23. INTERVALS DRILLED BY --		ROTARY TOOLS 0-2440'		CABLE TOOLS --	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 2215-2225 Pictured Cliffs					
25. WAS DIRECTIONAL SURVEY MADE No					
26. TYPE ELECTRIC AND OTHER LOGS RUN Induction Electrical, 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	CEMENTING RECORD	AMOUNT PULLED
7 5/8"	29.7	180'	11"	140 sks Class B	None
2 7/8"	6.5	2425'	6 3/4"	250 sks Posmix	None
29. LINER RECORD					
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	
30. TUBING RECORD					
SIZE	DEPTH SET (MD)	PACKER SET (MD)			
None					
31. PERFORATION RECORD (Interval, size and number) 2215-2225 0.33" 20 holes					
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.					
DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED			
2215-2225		325 gals acid, 35,000# sand,			
		221 bbls 2% KCl water,			
		314,000 SCE Nitrogen			
33. PRODUCTION					
DATE FIRST PRODUCTION 1-26-80		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Flowing			
DATE OF TEST 1-26-80	HOURS TESTED 3	CHOKE SIZE 3/4"	PROD'N. FOR TEST PERIOD --	OIL—BBL. 467	GAS—MCF. 467
FLOW. TUBING PRESS.	CASING PRESSURE 27#	CALCULATED 24-HOUR RATE --	OIL—BBL. 470	GAS—MCF. 470	WATER—BBL. 470
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Vented					
35. LIST OF ATTACHMENTS None--Logs sent by logging company					
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records					
SIGNED A. R. Kendrick		TITLE Superintendent		DATE MAR 15 1980	

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

NMOCC

FARMINGTON DISTRICT
BY *M. L. Kuchera*

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 TOP TRUE VERT. DEPTH
Ojo Alamo	1210	1560	Water sand	Base Ojo Alamo	1560
Fruitland	2068	2078	Coal	Pictured Cliffs	2212
"	2152	2163	Coal		
Pictured Cliffs	2212	2313	Gas sand		