

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R365.5.

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

GULF OIL CORPORATION

3. ADDRESS OF OPERATOR

P. O. Box 670, Hobbs, NM 88240

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

At surface 990' FSL & 990' FWL

At top prod. interval reported below

At total depth

14. PERMIT NO. DATE ISSUED

5. LEASE DESIGNATION AND SERIAL NO.

N00-C-14-20-7467

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Navajo "LB"

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

WAW Fruitland
Pictured Cliffs

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

Sec. 33-26N-12W

12. COUNTY OR PARISH
San Juan

13. STATE
NM

15. DATE SPUDDED 1-26-80 16. DATE T.D. REACHED 1-28-80 17. DATE COMPL. (Ready to prod.) 2-20-80 18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 6130' GL 19. ELEV. CASINGHEAD --

20. TOTAL DEPTH, MD & TVD 1320' 21. PLUG, BACK T.D., MD & TVD 1273' 22. IF MULTIPLE COMPL., HOW MANY* Single 23. INTERVALS DRILLED BY -- ROTARY TOOLS 0'-1320' CABLE TOOLS --

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 1092' - 1114' Fruitland Pictured Cliffs 25. WAS DIRECTIONAL SURVEY MADE No

26. TYPE ELECTRIC AND OTHER LOGS RUN Compensated Density Neutron w/GR & induction electrical W/SP 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"	24#	141'	12 1/2"	100 sx-circ	
4 1/2"	10.5#	1315'	6-3/4"	175 sx-circ	

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)

1092'-1114' (22 holes)

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
1092'-1114'	1000 gal 15% HCL & 21 balls
1092'-1114'	15,500 gals 70-quality foam.
	17,500# 10/20 sd

33.* PRODUCTION

DATE FIRST PRODUCTION 2-20-80 PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Flowing

DATE OF TEST 3-13-80 HOURS TESTED 24 CHOKE SIZE 32/64" PROD'N. FOR TEST PERIOD -- OIL—BBL. 0 GAS—MCF. 417

FLOW. TUBING PRESS. 30# CASING PRESSURE 0# CALCULATED 24-HOUR RATE -- OIL—BBL. 0 GAS—MCF. 417 WATER—BBL. -- OIL RATIO --

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

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. B. Skelton, Jr.

TITLE Area Engineer

DATE 4-15-80

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

NMOCC

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	TRUE VERT. DEPTH
Fruitland	814'	1063'		Fruitland	814'	
Fruitland Coal	1063'	1090'		Fruitland Coal	1063'	
Pictured Cliffs	1090'	--	IPF = 417 MCFGPD, CITP 155#	Pictured Cliffs	1090'	