

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN REPLY TO

Form 10-70 (Rev. 1-65)
Bureau No. 40 R 10-70

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

1a. TYPE OF WELL: OIL WELL ☐ GAS WELL ☐ DRY ☒ Other _____				7. UNIT AGREEMENT NAME _____	
b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DEEP. RESTR. ☐ Other _____				8. FARM OR LEASE NAME _____	
2. NAME OF OPERATOR DOME PETROLEUM CORPORATION				9. WELL NO. 3	
3. ADDRESS OF OPERATOR 501 Airport Drive, Suite 107, Farmington, NM 87401				10. FIELD AND POOL, OR WILDCAT WAW FRUITLAND-PICTURED CLIFF	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements) At surface 1650' FSL, 990' FEL At top prod. interval reported below At total depth				11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA SEC. 31, T26N, R12W	
14. PERMIT NO. _____ DATE ISSUED _____				12. COUNTY OR PARISH SAN JUAN	
				13. STATE NEW MEXICO	
15. DATE SPUDDED 02/01/80	16. DATE T.D. REACHED 02/06/80	17. DATE COMPL. (Ready to prod.) ---	18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 6150 GR	19. ELEV. CASINGHEAD 6148'	
20. TOTAL DEPTH, MD & TVD 1305	21. PLUG BACK T.D., MD & TVD ---	22. IF MULTIPLE COMPL. HOW MANY* ---	23. INTERVALS DRILLED BY 0-1305'	24. WAS DIRECTIONAL SURVEY MADE NO	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* NONE				25. WAS WELL CORED NO	
26. TYPE ELECTRIC AND OTHER LOGS RUN INDUCTION ELECTRIC LOG, FORMATION DENSITY/NEUTRON					
27. CASING RECORD (Report all strings set in well)					
CASING SIZE 5 1/2	WEIGHT, LB./FT. 15.5#	DEPTH SET (MD) 108'	HOLE SIZE 8 3/4"	CEMENTING RECORD 50 sacks (circulated)	AMOUNT PULLED NONE
29. LINER RECORD					
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	
30. TUBING RECORD					
SIZE	DEPTH SET (MD)	PACKER SET (MD)			
31. PERFORATION RECORD (Interval, size and number) NONE			32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.		
			DEPTH INTERVAL (MD)		
			AMOUNT AND KIND OF MATERIAL USED		
33. PRODUCTION					
DATE FIRST PRODUCTION		PRODUCTION METHOD (Gravity, gas lift, pumping—size and type of pump)			WELL STATUS (Producing or shut-in) P&A
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.
FLWY. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)			TEST WITNESSED BY		
35. LIST OF ATTACHMENTS					

ACCEPTED FOR RECORD

I hereby certify that the foregoing and attached information is complete and correct as determined from all available records

FEB 13 1980

DATE February 8, 1980

SIGNED H. E. Hollingsworth
H. E. HOLLINGSWORTH

TITLE WELLS & PRODUCTION FOREMAN

FARMINGTON DISTRICT

BY McL. Kuchta

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

FARMINGTON COPY

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 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 3.5.

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. On Form O-701, specify instrument used.

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 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 joint. Each additional interval to be separately produced, showing the additional data pertinent to such interval.

37. SUMMARY OF POROUS ZONES:		38. GEOLOGIC MARKERS	
SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF; CORP INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CUSHION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES		NAME	MEAS. DEPTH
FORMATION	TOP BOTTOM		TRUE VERT. DEPTH
		PICTURED CLIFF	1146
		FRUITLAND	840
		FARMINGTON	435