

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other in-
structions or
reverse side)Form approved.
Budget Bureau No. 42-R355.5.

DESIGNATION AND SERIAL NO.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL: OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> DRY <input checked="" type="checkbox"/> Other _____		6. IF INDIAN, ALLOTTEE OR TRIBE NAME N. M. 7787	
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. RESVR. <input type="checkbox"/> Other _____		7. UNIT AGREEMENT NAME	
2. NAME OF OPERATOR Dome Petroleum Corp.		8. FARM OR LEASE NAME Dome Federal 14-26-13	
3. ADDRESS OF OPERATOR 501 Airport Drive, Suite 107, Farmington, NM 87401		9. WELL NO. 4	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 1850' FSL, 1850' FWL 196' 134' At top prod. interval reported below At total depth		10. FIELD AND POOL, OR WILDCAT WAW Fruitland-Pictured Clif	
11. SEC., T., R., M., OR BLOCK AND SURVEY OF AREA Sec. 14, T26N, R13W		12. COUNTY OR PARISH San Juan	
13. STATE New Mexico		14. PERMIT NO. JUN 25 1980	
15. DATE SPEDDED 6/13/80		16. DATE T.D. REACHED 6/16/80	
17. DATE COMPLETED JUN 25 1980		18. ELEVATIONS (DF, REB, RT, GR, ETC.)* 6069' GR	
19. ELEV. CASINGHEAD 6067'		20. TOTAL DEPTH, MD & TVD 1400'	
21. PLUG, BACK T.D., MD & TVD ---		22. IF MULTIPLE COMPL., HOW MANY* ---	
23. INTERVALS DRILLED BY ---		24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* None	
25. WAS DIRECTIONAL SURVEY MADE No		26. TYPE ELECTRIC AND OTHER LOGS RUN Induction Electric Log, Formation Density/Neutron	
27. WAS WELL CORED No		28. CASING RECORD (Report all strings set in well)	
CASING SIZE 8 5/8"		WEIGHT, LB./FT. 23#	
DEPTH SET (MD) 114'		HOLE SIZE 12 1/4"	
CEMENTING RECORD 100 sacks circulated		AMOUNT PULLED None	
29. LINER RECORD		30. TUBING RECORD	
SIZE ---		TOP (MD) ---	
BOTTOM (MD) ---		SACKS CEMENT* ---	
SCREEN (MD) ---		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 ---		OIL CON. COM. DIST. 3	
33.* PRODUCTION		DATE FIRST PRODUCTION ---	
PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) ---		WELL STATUS (Producing or shut-in) ---	
DATE OF TEST ---		HOURS TESTED ---	
CHOKE SIZE ---		PROD'N. FOR TEST PERIOD ---	
OIL—BBL. ---		GAS—MCF. ---	
WATER—BBL. ---		GAS-OIL RATIO ---	
FLOW. TUBING PRESS. ---		CASING PRESSURE ---	
CALCULATED 24-HOUR RATE ---		OIL—BBL. ---	
GAS—MCF. ---		WATER—BBL. ---	
OIL GRAVITY-API (CORR.) ---		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		SIGNED <u>H. D. Hollingsworth</u> TITLE <u>Dir. & Prod. Foreman</u> DATE <u>6/19/80</u>	

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

NM0001

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 Cemented": 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:				38. GEOLOGIC MARKERS			
SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF; CORED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CIRCULATION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES							
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	TOP		
					MEAS. DEPTH	TRUE VERT. DEPTH	
				Pictured Cliff	1164'		
				Fruitland	890'		
				Farmington	550'		