

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.

5. LEASE DESIGNATION AND SERIAL NO.
1-149 (1st) 867

6. IF INDIAN, ALLOTTEE OR TRIBE NAME
Navajo

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Farrington

9. WELL NO.
3

10. FIELD AND POOL OR EVAPORATION BASIN
Point Lookout Basin Dakota

11. SEC. T., R., M., OR BLOCK AND SURVEY OR AREA
Sec 24, T 27N, R 9W

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.

2. NAME OF OPERATOR
Artes Oil & Gas Company

3. ADDRESS OF OPERATOR
Dresser 570, Farrington

4. LOCATION OF WELL (Report location clearly and in accordance with any State regulations)
At surface **1990' P.M. & 1100 P.M., Sec 24, T 27N, R 9W, FARRINGTON, N. M.**

At top prod. interval reported below
6602

At total depth
Same

14. PERMIT NO. _____ DATE ISSUED _____

12. COUNTY OR PARISH
Santa Fe

13. STATE
New Mexico

15. DATE SPUNDED **1/15/66** 16. DATE T.D. REACHED **1/31/66** 17. DATE COMPL. (Ready to prod.) **2/1/66** 18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* **550' OL** 19. ELEV. CASINGHEAD **5985**

20. TOTAL DEPTH, MD & TVD **6602** 21. PLUG, BACK T.D., MD & TVD **6601** 22. IF MULTIPLE COMPL., HOW MANY* **2** 23. INTERVALS, DEPTH TOOLS CABLE TOOLS

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*
Point Lookout 4274 to 4363 Dakota 6362 to 6511

26. TYPE ELECTRIC AND OTHER LOGS RUN
EB-Ind, Formation Density

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	321 13	12 1/2	170 ac	
5 1/2	14 & 15.5	6602	7 7/8	880 ac	

29. LINER RECORD 30. TUBING RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					2 3/8	6360	6380

31. PERFORATION RECORD (Interval, size and number)
**4274-80, 4286-91, 4298-4302
4306-12, 4321-32, 4340-42
4347-63 2 STV-total 100 holes
6362-67, 6428-45, 6496-6511
4 STV-total 148 holes**

32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.
DEPTH INTERVAL (MD) AMOUNT AND KIND OF MATERIAL USED
4274-4363 100,000# SA, 70,000 gal H2O
6362-6511 100,000# SA, 108,930 gal H2O

33.* PRODUCTION **Flowwards zone**

DATE FIRST PRODUCTION _____ PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) _____ WELL STATUS (Producing or shut-in) _____

DATE	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
2/18/66	3 Hrs.	3/4	→				
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)	
-	395	→	-	4915	-	-	

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

TEST WITNESSED BY
Carl E. Johnson

35. LIST OF ATTACHMENTS

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records
ORIGINAL SIGNED BY **JOE C. SALMON**
SIGNED _____ TITLE **District Superintendent** DATE **3-10-66**

RECEIVED
MAR 14 1966

RECEIVED
MAR 15 1966
OIL CON. COM.
DIST. 3

*(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 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: "Stacks 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.)

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH	TOP	TRUE VERT. DEPTH
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							
				Pictured Cliffs Cliff House Point Lookout Gallup Greenhorn Grandview Dakota	1961 3555 4271 5255 6256 6310 6425		