

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other in-
structions 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		A. L. GARDNER													
3. ADDRESS OF OPERATOR		101-2 PULLEY LEAN PLANT Bldg., Farmington, N.M. 87401													
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*		At surface 700' E. 700' N. At top prod. interval reported below Same At total depth Same													
14. PERMIT NO.		DATE ISSUED 4-14-72													
15. DATE SPUDDED 4-17-72		16. DATE T.D. REACHED 4-23-72		17. DATE COMPL. (Ready to prod.) 5-1-72		18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 5496' AS		19. ELEV. CASINGHEAD 5494'							
20. TOTAL DEPTH, MD & TVD 1630'		21. PLUG, BACK T.D., MD & TVD 1150.43'		22. IF MULTIPLE COMPL., HOW MANY*		23. INTERVALS DRILLED BY 1636'		24. PRODUCING INTERVAL(S), OF THIS COMPLETION--TOP, BOTTOM, NAME (MD AND TVD)* 1550' - 1592' Pictured Cliffs							
26. TYPE ELECTRIC AND OTHER LOGS RUN IEL - 1 - 3E		27. WAS WELL CORED No		25. WAS DIRECTIONAL SURVEY MADE Yes											
28. CASING RECORD (Report all strings set in well)															
CASING SIZE		WEIGHT, LB./FT.		DEPTH SET (MD)		HOLE SIZE		CEMENTING RECORD		AMOUNT PULLED					
7"		3.3		15'		3 3/4"		20 SACS		None					
4 1/2"		3.3		1178.54'		6 1/2"		100 SACS		None					
29. LINER RECORD										30. TUBING RECORD					
SIZE		TOP (MD)		BOTTOM (MD)		SACKS CEMENT*		SCREEN (MD)		SIZE		DEPTH SET (MD)		PACKER SET (MD)	
										1"		1577'		None	
31. PERFORATION RECORD (Interval, size and number)										32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.					
1550-1554 1576-1580 1584-1592 Total of 21' - 48 holes										DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED			
										1550'-1592'		26,400 gal. water with 25,000 10-20 sand fracture treatment			
33.* PRODUCTION															
DATE FIRST PRODUCTION 6-1-72		PRODUCTION METHOD (Flowing, gas lift, pumping--size and type of pump) Flowing 1" tubing						WELL STATUS (Producing or shut-in) Shut-in							
DATE OF TEST No test.		HOURS TESTED 188		CHOKE SIZE		PROD'N. FOR TEST PERIOD		OIL--BBL. 2109 mcf		GAS--MCF. 401		WATER--BBL.		GAS-OIL RATIO	
FLOW. TUBING PRESS. 21		CASING PRESSURE 188		CALCULATED 24-HOUR RATE		OIL--BBL.		GAS--MCF.		WATER--BBL.				(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 W. M. Sallaway		TITLE Operator		DATE June 5, 1972											

*(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 agency. See instructions on items 22 and 24, and 83, below regarding separate reports for separate completions. If not filed prior to the time a 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 additional 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 agency for special instructions.

Item 10: 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: "Seals 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	VERT. DEPTH
Ojo Alamo	335'	525'	Sand	Ojo Alamo	335'
Fruitland	1300'	1460'	Sand & Coal	Fruitland Coal	1300'
Pictured Cliffs	1543'	1650'	Sand & shale	Pictured Cliffs	1543'