

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 Flag-Redfern Oil Co.						7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR P O Box 208, Farmington, NM 87401						8. FARM OR LEASE NAME Aloha	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 850' FNL - 870' FWL At top prod. interval reported below At total depth						9. WELL NO. #2	
14. PERMIT NO.						13. STATE NM	
DATE ISSUED						12. COUNTY OR PARISH San Juan	
15. DATE SPUDDED 11-12-80		16. DATE T.D. REACHED 11-17-80		17. DATE COMPL. (Ready to prod.) 12-2-80		18. ELEVATIONS (DF, REB, RT, GR, ETC.)* 5578'	
20. TOTAL DEPTH, MD & TVD 1740'		21. PLUG, BACK T.D., MD & TVD 1713'		22. IF MULTIPLE COMPL., HOW MANY* dual		23. INTERVALS DRILLED BY ROTARY TOOLS TD CABLE TOOLS	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 1582-1588 and 1350-1357'						25. WAS DIRECTIONAL SURVEY MADE No	
26. TYPE ELECTRIC AND OTHER LOGS RUN GR/CLL - IES						27. WAS WELL CORED No	
29. CASING RECORD (Report all strings set in well)							
CASINO SIZE		WEIGHT, LB./FT.		DEPTH SET (MD)		HOLE SIZE	
7"		23#		125' GL		8-3/4"	
2-7/8"		6.4#		1740' GL		5"	
1-1/4"		2.4#		1563' GL			
29. LINER RECORD				30. TUBING RECORD			
SIZE		TOP (MD)		BOTTOM (MD)		SIZE	
NA						1 1/4"	
						1563' GL	
						1463' GL	
31. PERFORATION RECORD (Interval, size and number) 1582-1588, 6', 1SPF 1350-1357, 7', 1 SPF				32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC. See Sundry Notice dtd. 12-2-80 for details			
33.* PRODUCTION							
DATE FIRST PRODUCTION NA		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Flowing				WELL STATUS (Producing or shut-in) SI	
DATE OF TEST 12-10-80 PC		HOURS TESTED 3 PC		CHOKE SIZE 1 1/2" PC		PROD'N. FOR TEST PERIOD	
12-17-80		3 Fr		3/4" Fr			
FLOW. TUBING PRESS. 372 psia PC		CASINO PRESSURE 544 psia PC		CALCULATED 24-HOUR RATE		OIL—BBL.	
275 psia Fr		535 psia Fr				GAS—MCF. 207 CAOF PC 160 CAOF Fr	
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

Thomas A. Dugan

TITLE

Agent

DATE

12-30-80

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

NM000

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 D. 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 TOP TRUE VERT. DEPTH
				Fruitland Pictured Cliff	1128' 1581'