Form 9-330
(Rev. 5-63)

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.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG*

5. LEASE DESIGNATION AND SERIAL NO.: SF 047017-A
6. IF INDIAN, ALLOTTEE OR TRIBE NAME:
7. UNIT AGREEMENT NAME:
8. FARM OR LEASE NAME: Angel Peak "B"
9. WELL NO.: 22-E
10. FIELD AND POOL, OR WILDCAT: Basin Dakota
11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA: Sec. 13, T28N, R11W, N.M.P.M.
12. COUNTY OR PARISH: San Juan
13. STATE: New Mexico

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: Union Texas Petroleum Corporation

3. ADDRESS OF OPERATOR: P.O. Box 808, Farmington, New Mexico 87499

4. LOCATION OF WELL (*Report location clearly and in accordance with any State requirements*)
At surface: 1750 ft./N; 1650 ft./W line
At top prod. interval reported below: Same as above
At total depth: Same as above

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14. PERMIT NO. | DATE ISSUED

15. DATE SPUDDED	16. DATE T.D. REACHED	17. DATE COMPL. (*Ready to prod.*)	18. ELEVATIONS (DF, RKB, RT, GR, ETC.)*	19. ELEV. CASINGHEAD
12/26/82	1/4/83	3/10/83	5834 R.K.B.	5822

20. TOTAL DEPTH, MD & TVD	21. PLUG, BACK T.D., MD & TVD	22. IF MULTIPLE COMPL., HOW MANY*	23. INTERVALS DRILLED BY	ROTARY TOOLS	CABLE TOOLS
6640 MD & TVD	6550 MD & TVD	2	→	0-6640	----

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*: 6300 - 6418 Dakota (MD & TVD)

25. WAS DIRECTIONAL SURVEY MADE: No

26. TYPE ELECTRIC AND OTHER LOGS RUN: Dual Ind. Foc. Log, Comp. Dens., Comp. Neutron, Gamma Ray

27. WAS WELL CORED: No

28. CASING RECORD (*Report all strings set in well*)

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
9-5/8"	40.00	328	12-1/4"	See Reverse Side	
7"	23.00	6633	8-3/4"	See Reverse Side	

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)

30. TUBING RECORD

SIZE	DEPTH SET (MD)	PACKER SET (MD)
2-3/8" E.U.E.	6310	6207

31. PERFORATION RECORD (*Interval, size and number*)
1-0.40" hole at each of the following depths:
6300,01,02,03,6323,24,25,26,6377,78,79,80,
81,86,87,88,89,90,91,92,93,94,95,96,97,98,99,
6400,01,02,03,04,05,06,07,08,09,10,11,12,13,
14,15,16,17,18. (Total of 46 holes)

32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
6300 - 6418	2000 gal. 15% HCl, 135,417 gal. of slick water & nitrogen, and 87,000 lb. of 20-40 sand.

33.* PRODUCTION

DATE FIRST PRODUCTION	PRODUCTION METHOD (*Flowing, gas lift, pumping—size and type of pump*)	WELL STATUS (*Producing or shut-in*)
3/10/83	Flowing	Shut-In

DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD →	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
4/20/83	3	3/4"			46		

FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE →	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)
20	----			367		

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

TEST WITNESSED BY: Clifton Gates

35. LIST OF ATTACHMENTS: None

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

SIGNED Kenneth E. Roddy (Kenneth E. Roddy) TITLE Area Production Supt. DATE May 4, 1983

ACCEPTED FOR RECORD
MAY 11 1983
FARMINGTON DISTRICT
BY

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

NMOCC

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.)

Item 28: 9-5/8" Casing: Cemented with 295 cu. ft. of class "B" with 1/4 lb. of Flocele and 2% $CaCl_2$.
7" Casing: Cemented first stage with 930 cu. ft. of 50-50 Pozmix, 2% gel, 12-1/2 lb. of gilsonite per sack, 10% salt, and 118 cu. ft. of class "B". Cemented second stage with 1370 cu. ft. of 65-35 Pozmix, 6% gel, 12-1/2 lb. of gilsonite per sack, and 118 cu. ft. of class "B" with 2% $CaCl_2$. Cemented third stage with 1593 cu. ft. of 65-35 Pozmix with 12% gel, 12-1/2 lb. of gilsonite per sack, 1/4 lb. of cello flakes per sack, and 118 cu. ft. of class "B" with 2% $CaCl_2$.

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

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.

38. GEOLOGIC MARKERS

NAME	TOP MEAS. DEPTH	TOP TRUE VERT. DEPTH
Ojo Alamo	807	
Kirtland	870	
Fruitland	1545	
Pictured Cliffs	1862	
Chacra	2450	
Cliff House	3455	
Point Lookout	4212	
Gallup	5433	
Greenhorn (Base)	6263	
Dakota	6296	

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NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

I.

Operator
Union Texas Petroleum Corporation

Address
P.O. Box 808, Farmington, New Mexico 87499

Reason(s) for filing *(Check proper box)*
New Well [X]
Recompletion [ ]
Change in Ownership [ ]

Change in Transporter of:
Oil [ ]
Casinghead Gas [ ]
Dry Gas [ ]
Condensate [ ]

Other *(Please explain)*

If change of ownership give name and address of previous owner _____

I. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
Angel Peak "B"	22-E	Basin Dakota	State, Federal or Fee Federal SF	047017-A

Location
Unit Letter F ; 1750 Feet From The North Line and 1650 Feet From The West

Line of Section 13 Township 28N Range 11W , NMPM, San Juan County

I. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil [ ] or Condensate [X]: Plateau, Inc.	Address *(Give address to which approved copy of this form is to be sent)*: P.O. Box 489, Bloomfield, New Mexico 87413
Name of Authorized Transporter of Casinghead Gas [ ] or Dry Gas [X]: Southern Union Gathering Company	Address *(Give address to which approved copy of this form is to be sent)*: First International Building - Dallas, Texas Attention: Mr. R.J. McCrary

If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	F	13	28N	11W	No	----

If this production is commingled with that from any other lease or pool, give commingling order number: _____

V. COMPLETION DATA

Designate Type of Completion – (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
		XX	XX					

Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
12/26/82	3/10/83	6640	6550
Elevations *(DF, RKB, RT, GR, etc.)*	**Name of Producing Formation**	**Top Oil/Gas Pay**	**Tubing Depth**
5834 R.K.B.	Dakota	6300	6310
Perforations			**Depth Casing Shoe**
6300 - 6418 (Total of 46 holes)			6620

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12-1/4"	9-5/8", 40.00#	328	295 cu. ft.
8-3/4"	7", 23.00#	6633	4247 cu. ft. (3 stages)
	2-3/8" E.U.E., 4.70#	6310	

VI. TEST DATA AND REQUEST FOR ALLOWABLE

(Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

OIL WELL

Date First New Oil Run To Tanks	Date of Test	Producing Method *(Flow, pump, gas lift, etc.)*	
Length of Test	**Tubing Pressure**	**Casing Pressure**	**Choke Size**
Actual Prod. During Test	**Oil-Bbls.**	**Water-Bbls.**	**Gas-MCF**

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
367	3 hours	0	
Testing Method *(pitot, back pr.)*	**Tubing Pressure (Shut-in)**	**Casing Pressure (Shut-in)**	**Choke Size**
Back Pressure	505	----	3/4"

I. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Kenneth E. Roddy
Kenneth E. Roddy *(Signature)*
Area Production Superintendent *(Title)*
May 4, 1983 *(Date)*

OIL CONSERVATION COMMISSION

APPROVED MAY 31 1983, 19____

BY Original Signed by FRANK T. CHAVEZ

TITLE SUPERVISOR DISTRICT # 3

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.