

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE\*

Form approved.  
Budget Bureau No. 42-00155.

5. LEASE IDENTIFICATION AND SERIAL NO.

SF-078807-A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. NAME OF LEASE NAME

Federal Com

9. WELL NO.

2-R

10. FIELD AND POOL, OR WILDCAT

Basin Dakota

11. SEC. T., R., M., OR BLOCK AND SURVEY OR AREA

Sec. 12-T28N-R13W

12. COUNTY OR PARISH

San Juan

13. STATE

N.M.

14. PERMIT NO.

DATE ISSUED

June 25, 1979

15. DATE STARTED  
7-27-7916. DATE T.D. REACHED  
8-11-7917. DATE COMPL. (Ready to prod.)  
8-27-7918. ELEVATIONS (DF, REB, RT, GR, ETC.)\*  
5648 KB19. ELEV. CASINGHEAD  
563620. TOTAL DEPTH, MD & TVD  
615421. PLUG BACK T.D., MD & TVD  
612022. IF MULTIPLE COMPL.,  
HOW MANY\*  
-23. INTERVALS  
DRILLED BY  
→ROTARY TOOLS  
0-6154

CABLE TOOLS

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)\*

5988-6085 Dakota

25. WAS DIRECTIONAL  
SURVEY MADE

NO

26. TYPE ELECTRIC AND OTHER LOGS RUN

ES-Ind.; GR-Cal.CNL-Density

27. WAS WELL COBED

NO

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 lb.	163	12-1/4"	100 sx	none
4-1/2	10.5 lb.	6153	7-7/8"	910 sx*	none

1st stage w/410 sx; 2nd stage at 4217 w/350 sx; 3rd stage at 1589 w/450 sx.

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					2-3/8	6070	none

30. TUBING RECORD

31. PERFORATION RECORDED (Interval, size and number)

5988, 80½, 91, 92½, 94, 95½, 97.  
6012, 13½, 15, 16½, 18,  
6076, 77½, 79, 80½, 82, 83½, 85.

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
5988-6085	Spot 500 gals 72% HCl, pumped
	1000 gals 15% HCl. Frac with
	54978 gals @ 72,500 lbs.

33.\* PRODUCTION

DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)				WELL STATUS (Producing or shut-in)	
8-27-79		Flowing				SI-WOPL	
DATE OF TEST	HOURS TESTED	CHOKER SIZE	PROD'N. TEST PRESS.	OIL—EQL.	WATER—EQL.	GAS-OIL RATIO	
8-27-79	3	5/4	1110	spray	spray (frac)	-	
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—EQL.	GAS—EQL.	WATER—EQL.	OIL GRAVITY-API (CORR.)	
81	369	→	1110	1110	--	60 est.	
34. DISPOSITION OF GAS. (Sold, used for fuel, vented, etc.)					TEST WITNESSED BY		

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

TEST WITNESSED BY

EPNG

35. LIST OF ATTACHMENTS

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

SIGNATURE: *Curtis J. Little*

TITLE: Operator

SEP 14 1979

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

77mocc

# 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 33.

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 production 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 27: "Seals 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 PROLOGS ZONES:

SHOW ALL IMPORTANT ZONES OF PRODUCTIVITY AND CONTENTS THEREOF: CORREL. INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL, TESTING, CUSHION (SPR. TIME TOOL, OITS, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	38. GEOLOGIC/GEOMARINERS
No cores or DST				NAME
				MEAN DEPTH
				TRUE VERT. DEPTH
				Top
				Bottom
				Interval
				Pictured Cliffs
				Lewis
				Mesaverde
				Mancos
				Gallup
				Greenhorn
				Dakota