

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other in-
structions on
reverse side)Form approved
Budget Bureau No. 42-23705.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG*

1. TYPE OF WELL: OIL WELL ☐ GAS WELL ☐ DRY ☐ Other _____2. TYPE OF COMPLETION: NEW WELL ☐ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other _____

3. NAME OF OPERATOR _____

4. ADDRESS OF OPERATOR _____

5. LOCATION OF WELL (Report location clearly and in accordance with any State requirements) _____

At surface 1050 FEET & 1490 FEET

At top prod. interval reported below

At total depth

14. PERMIT NO. _____ DATE ISSUED _____

15. DATE SPUNDED 10-1-70 16. DATE T.D. REACHED 10-1-70 17. DATE COMPL. (Ready to prod.) 11-5-70 18. ELEVATIONS (DF, EKB, ET, GR, ETC.)* 6242 GR 19. ELEV. CASINGHEAD 6244

20. TOTAL DEPTH, MD & TVD _____ 21. PLUG, BACK T.D., MD & TVD 7108' 22. IF MULTIPLE COMPL., HOW MANY* Single 23. INTERVALS DRILLED BY _____ ROTARY TOOLS _____ CABLE TOOLS _____

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 5192-5590 - Main zone 25. WAS DIRECTIONAL SURVEY MADE Yes

26. TYPE ELECTRIC AND OTHER LOGS RUN _____ 27. WAS WELL CORED No

28. TYPE ELECTRIC AND OTHER LOGS RUN _____ 29. CASING RECORD (Report all strings set in well)

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
15"	2.735	316'	15"	300 Sks.	
9-7/8"	2.721	3560'	9-7/8"	200 Sks.	

LINER RECORD					TUBING RECORD		
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
2-1/2"	3480	3650	305 Sks.		1 1/2" HUB	5500'	

31. PERFORATION RECORD (Interval, size and number)		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
5192-58	5508-14	DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
5205-14	5530-44	5192-5590	10,210 GALS water
5220-14	5584-70		30,010 200-0 sand
5250-14	5576-90		Dropped 20 balls
2 1/2"	2 SPF		(FRAC COMPLETED ON BACK SIDE)

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

DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
11-1-70	24 Hrs.	3/4"	→				
FLOW, TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)	
		→		2010			

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) _____ TEST WITNESSED BY _____

35. LIST OF ATTACHMENTS _____ U. S. GEOLOGICAL SURVEY
DURANGO COLO36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records
SIGNED _____ TITLE District Superintendent DATE November 18, 1970

*(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 found 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 completion intervals.

If not filed prior to the time this summary record is submitted, copies of all currently available logs (drilled, geophysical, 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.)

AMOUNT & KIND OF MATERIAL USED

46,740 Gals Water

40,000H 20/40

Drilling 20 Palls

37. SUMMARY OF POROUS ZONES:

SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF; CORED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTER, CUSHION TEST, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	GEOLOGIC MARKERS		
				NAME	MEAS. DEPTH	TRUE VERT. DEPTH
Fruitland	2985					
Pictured Cliffs	3280					
Lewis	3390					
Mesaverde	5190					
Manco	5850					
Gallup	6290					
Greenhorn	7400					
Grand	7440					
Dakota	7710					