

(See other instructions on reverse side)

WELL COMPLETION OR RECOMPLETION REPORT AND LOG*

1a. TYPE OF WELL: OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> DRY <input type="checkbox"/> Other <input type="checkbox"/>				7. UNIT AGREEMENT NAME -----											
b. TYPE OF COMPLETION: NEW WELL <input checked="" type="checkbox"/> WORK OVER <input type="checkbox"/> DEEP-EN <input type="checkbox"/> PLUG BACK <input type="checkbox"/> DIFF. RESVR. <input type="checkbox"/> Other <input type="checkbox"/>				8. FARM OR LEASE NAME Schalk "57"											
2. NAME OF OPERATOR Coastline Petroleum Company, Inc.				9. WELL NO. 2											
3. ADDRESS OF OPERATOR P. O. Box 2078, Farmington, NM 87401 P. O. Box 2478, Midland, Texas 79701				10. FIELD AND POOL, OR WILDCAT Blanco Mesaverde											
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 935' from the north line 985' from the east line At top prod. interval reported below same At total depth same				11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA Sec. 12, T-30-N, R-5-											
14. PERMIT NO.				DATE ISSUED		12. COUNTY OR PARISH Rio Arriba		13. STATE New Mexico							
15. DATE SPUDDED 10/1/74		16. DATE T.D. REACHED 10/19/74		17. DATE COMPL. (Ready to prod.) 12/16/74		18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 6675 GL 6687 KB		19. ELEV. CASINGHEAD 6675							
20. TOTAL DEPTH, MD & TVD 6100 KB		21. PLUG, BACK T.D., MD & TVD		22. IF MULTIPLE COMPL., HOW MANY*		23. INTERVALS DRILLED BY Rotary		CABLE TOOLS							
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 5664 - 6010 Blanco Mesaverde								25. WAS DIRECTIONAL SURVEY MADE No							
26. TYPE ELECTRIC AND OTHER LOGS RUN Compensated neutron - formation density log								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					
8 5/8"		23 #		306		12 1/4"		200 Sacks Class "C"		None					
4 1/2"		10.5#		6100		7 7/8"		1st - 220 Halli. & 160 sks.		poz. None					
								2nd - 286 sks. Hallilight		None					
								3rd - 350 sacks Hallilight		None					
29. LINER RECORD										30. TUBING RECORD					
SIZE		TOP (MD)		BOTTOM (MD)		SACKS CEMENT*		SCREEN (MD)		SIZE		DEPTH SET (MD)		PACKER SET (MD)	
										2 3/8"		5658 KB		None	
31. PERFORATION RECORD (Interval, size and number) 5664-5700 1 shot/foot 5740-5758 5774-5810 5898-6010										32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC. DEPTH INTERVAL (MD) 5898-6010 5664-5810 AMOUNT AND KIND OF MATERIAL USED 72400 gals. water 75000 # 20-40 sand 74179 gals. water 75000# 20-40 sand					
33. PRODUCTION															
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flooding, gas lift, pumping—size and type of pump) tester								WELL STATUS (Producing or shut-in) shut-in					
DATE OF TEST 12/16/74		HOURS TESTED 4		CHOKE SIZE 7/16		PROD'N. FOR TEST PERIOD →		OIL—BBL. 0		GAS—MCF. 7,859 AOF		WATER—BBL. 21975		GAS-OIL RATIO No oil	
FLOW. TUBING PRESS. 832		CASING PRESSURE 960		CALCULATED 24-HOUR RATE →		OIL—BBL. 0		GAS—MCF. 7,859 AOF		WATER—BBL. 21975		OIL GRAVITY-API (CORR.)			
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) vented														35. LIST OF ATTACHMENTS separator and vent line	
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records															
SIGNED Raem Stewart				TITLE Manager				DATE 12/18/74							

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

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

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 intervals 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: "Sucks 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

U.S. GOVERNMENT PRINTING OFFICE : 1963-O-683636