

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 ☐		5. LEASE DESIGNATION AND SERIAL NO. 14-20-0603-5591	
b. TYPE OF COMPLETION: NEW WELL ☐ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other D & A		6. IF INDIAN, ALLOTTEE OR TRIBE NAME Navajo Tribal	
2. NAME OF OPERATOR Walter Duncan		7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR Box 137, Durango, Colorado		8. FARM OR LEASE NAME North Hogback	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 352' fm, 716 sel, 1-29N-17W At top prod. interval reported below At total depth		9. WELL NO. 3	
14. PERMIT NO.		DATE ISSUED	
15. DATE SPUNDED 12-11-66		16. DATE T.D. REACHED 12-31-66	
17. DATE COMPL. (Ready to prod.)		18. ELEVATIONS (DF, RKB, BT, OR, ETC.)* 5039 ground	
19. ELEV. CASINGHEAD		20. TOTAL DEPTH, MD & TVD 840	
21. PLUG, BACK T.D., MD & TVD		22. IF MULTIPLE COMPL., HOW MANY*	
23. INTERVALS DRILLED BY		24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*	
25. WAS DIRECTIONAL SURVEY MADE No		26. TYPE ELECTRIC AND OTHER LOGS RUN E-Log	
27. WAS WELL CORED No		28. CASING RECORD (Report all strings set in well)	
CASING SIZE 8-5/8" 5-1/2"		WEIGHT, LB./FT. 17# 14#	
DEPTH SET (MD) 25' 145'		HOLE SIZE 10-3/4" 6-3/4"	
CEMENTING RECORD 10 BX 85 BX + 2% CaCl		AMOUNT PULLED none none	
29. LINER RECORD		30. TUBING RECORD	
SIZE none		TOP (MD) none	
BOTTOM (MD) none		SACKS CEMENT* none	
SCREEN (MD) none		SIZE none	
DEPTH SET (MD) none		PACKER SET (MD) none	
31. PERFORATION RECORD (Interval, size and name) none		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC. DEPTH INTERVAL (MD) none AMOUNT AND KIND OF MATERIAL USED none	
33.* PRODUCTION DATE FIRST PRODUCTION PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) WELL STATUS (Producing or shut-in) D & A		DATE OF TEST HOURS TESTED CHOKE SIZE PROD'N. FOR TEST PERIOD OIL—BBL. GAS—MCF. WATER—BBL. GAS-OIL RATIO OIL GRAVITY-API (CORR.)	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)		35. LIST OF ATTACHMENTS Logs	
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records		SIGNED Walter Duncan TITLE xxxx DATE 1-23-67	

*(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 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 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
Dakota	743		Sandstone, sulfur water	Greenhorn Dakota	628 743		