

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. I-89-Ind-56	
b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other ☐		6. IF INDIAN, ALLOTTEE OR TRIBE NAME Navajo Tribe	
2. NAME OF OPERATOR Thomas H. Connolly		7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR P.O. Box 1573, Durango, Colorado 81301		8. FARM OR LEASE NAME Navajo	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 330 feet from North line, 330 feet from West line At top prod. interval reported below At total depth As above		9. WELL NO. 2	
14. PERMIT NO.		10. FIELD AND POOL, OR WILDCAT Rattlesnake	
DATE ISSUED		11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA Sec. 1, T 29 N; R 19 W	
15. DATE SPUDDED 3-1-67		12. COUNTY OR PARISH San Juan	
16. DATE T.D. REACHED 3-11-67		13. STATE New Mexico	
17. DATE COMPL. (Ready to prod.) 4-1-67		18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 5366 KB	
19. ELEV. CASINGHEAD 5363		20. TOTAL DEPTH, MD & TVD 831	
21. PLUG, BACK T.D., MD & TVD ---		22. INTERVALS DRILLED BY One	
23. ROTARY TOOLS 0-831		24. CABLE TOOLS None	
25. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 804 - 831 - Open hole		26. WAS DIRECTIONAL SURVEY MADE Yes	
27. TYPE ELECTRIC AND OTHER LOGS RUN Gamma Ray - Induction		28. WAS WELL CORED Yes	
29. CASING RECORD (Report all strings set in well)			
CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE
8 5/8"	24	21'	12"
5 1/2"	15	804'	7 7/8"
CEMENTING RECORD		AMOUNT PULLED	
10 ex		None	
25 ex		None	
30. LINER RECORD			
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*
31. TUBING RECORD			
SIZE	DEPTH SET (MD)	PACKER SET (MD)	
2 3/8"	805	---	
32. PERFORATION RECORD (Interval, size and number)			
33. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED	
808 - 815		10 # Nitro	
34. PRODUCTION			
DATE FIRST PRODUCTION 4-1-67		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Pump - 1 1/2" working BBL.	
WELL STATUS (Producing or shut-in) Producing			
DATE OF TEST 4-15-67	HOURS TESTED 24	CHOKE SIZE 2"	PROD'N. FOR TEST PERIOD 12 BBLB
FLOW. TUBING PRESS. 0	CASING PRESSURE 45 #	CALCULATED 24-HOUR RATE 12 BBLB	GAS—MCF. TSTM
WATER—BBL. 6 BBLB		GAS-OIL RATIO N11	
OIL GRAVITY-API (CORR.) 64°			
35. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Used to run engine			
36. TEST WITNESSED BY J. Myers			
37. LIST OF ATTACHMENTS Tabulation of Deviation Survey			
38. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records			
SIGNED Thomas H. Connolly		TITLE Secretary	
DATE 4-18-67			

*(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	TRUE VERT. DEPTH
Gallup ss	Surface	70	ss w/minor sh strks	Sansatees	303	303
Sansatees	303	378	sandstone, limestone & shale	Greenhorn	680	680
Greenhorn	603	763	calcareous shale & limestone	Dakota	804	804
Dakota	804	TD	ss, wht. fg			
Intervening intervals, Mancos Shale						
Cored 802 -815 Recovered:			2' Shale blk sdy gas odor			
			4' Sandstone dk gry fg good blk excellent distillate odor			
			5' Sandstone dk gry shaly			
			2' Sandstone wht-clean fg good blk excellent distillate odor			