

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.

5. LEASE DESIGNATION AND SERIAL NO.

14-20-0603-9592

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

Navajo Tribe

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

J. Hogback #1

9. WELL NO.

8

10. FIELD AND POOL, OR WILDCAT

Dakota-Undesignated

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

Sec. 1, T29N, R17W

12. COUNTY OR
PARISH

San Juan

13. STATE

New Mexico

18. ELEVATIONS (DF, RKB, RT, GR, ETC.)*

4977 CR

19. ELEV. CASINGHEAD

4977 CR

1a. TYPE OF WELL:

OIL

WELL

☒

GAS

WELL

☐

DRY

☐

Other

b. TYPE OF COMPLETION:

NEW

WELL

☐

WORK

OVER

☐

DEEP-

EN

☐

PLUG

BACK

☐

DIFF.

RESVR.

☐

Other

JUL 7 1967

2. NAME OF OPERATOR

Walter Duncan

3. ADDRESS OF OPERATOR

1800 Security Life Bldg., Denver, Colorado

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

At surface

2310' fsl 2310' fwl, Sec. 1, T29N, R17W

At top prod. interval reported below

As above

At total depth

As above

14. PERMIT NO.

DATE ISSUED

15. DATE SPUNDED

5-27-67

16. DATE T.D. REACHED

6-3-67

17. DATE COMPL. (Ready to prod.)

7-1-67

20. TOTAL DEPTH, MD & TVD

686

21. PLUG, BACK T.D., MD & TVD

686

22. IF MULTIPLE COMPL.,
HOW MANY*23. INTERVALS
DRILLED BY

ROTARY TOOLS

20-686

CABLE TOOLS

0-20

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

Dakota Formation 669 - 686

25. WAS DIRECTIONAL
SURVEY MADE

No

26. TYPE ELECTRIC AND OTHER LOGS RUN

Crane Electric Log

27. WAS WELL CORED

Yes

28. CASING RECORD (Report all strings set in well)

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
7"	20#	20'			
4 1/2"	9.5#	669'	6 1/4"	50 gals	

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)

30. TUBING RECORD

SIZE	DEPTH SET (MD)	PACKER SET (MD)
2 3/8"	662	-

31. PERFORATION RECORD (Interval, size and number)

RECEIVED
JUL 10 1967
OIL CON. COM.
DIST. 3

ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED

33.*

PRODUCTION

DATE FIRST PRODUCTION

7-1-67

PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)

Flowing

WELL STATUS (Producing or
shut-in)

DATE OF TEST

7-1-67

HOURS TESTED

24

CHOKE SIZE

-

PROD'N. FOR
TEST PERIOD

→

OIL—BBL.

20

GAS—MCF.

19TM

WATER—BBL.

7

GAS-OIL RATIO

19TM

FLOW. TUBING PRESS.

-

CASING PRESSURE

-

CALCULATED
24-HOUR RATE

→

OIL—BBL.

20

GAS—MCF.

19TM

WATER—BBL.

7

OIL GRAVITY-API (CORR.)

60° Est.

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

Vented

TEST WITNESSED BY

J. L. Jacobs

35. LIST OF ATTACHMENTS

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

SIGNED

J. L. Jacobs

TITLE

Agent

DATE

7-5-67

*(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 83, 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
				Loc. 1018	176		
				Juana Lopez	560		
				Greenhorn	624		
				Graneros	669		
				blota			