

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other In-
structions on
reverse side)

Form approved.
Budget Bureau No. 42-R33

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL:		OIL WELL ☒	GAS WELL ☐	DRY ☐	Other ☐
b. TYPE OF COMPLETION:		NEW WELL ☐	WORK OVER ☐	DEEP-EN ☐	PLUG BACK ☐
		DIFF. REVR. ☐	Other ☐		
2. NAME OF OPERATOR Eastern Petroleum Company					
3. ADDRESS OF OPERATOR P. O. Box 291, Carmi, Illinois 62821					
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements) At surface 1980' FNL, 1650 FWL At top prod. interval reported below same At total depth same					
14. PERMIT NO.		DATE ISSUED MAY 23 1972			
5. LEASE DESIGNATION AND SERIAL NO. I-89-IND-50		6. INDIAN NAME OR TRIBE NAME Navajo Tribe		7. UNIT AGREEMENT NAME	
8. FARM OR LEASE NAME Navajo		9. WELL NO. 14		10. FIELD AND POOL, OR WILDCAT Rattlesnake-Dakota	
11. SEC., T., R., M., OR BLOCK AND SURVEY AREA Sec. 1, 29N, 19W		12. COUNTY OR PARISH San Juan		13. STATE New Mexico	
15. DATE SPUDDED 9-13-68	16. DATE T.D. REACHED 10-26-68	17. DATE COMPL. (Ready to prod.) 10-26-68	18. ELEVATIONS (OF KNEE, RT. CR. ETC.)* 5375 GL	19. ELEV. CASINGHEAD 5377	
20. TOTAL DEPTH, MD & TVD 995 ft.	21. PLUG. BACK T.D., MD & TVD 995 ft.	22. IF MULTIPLE COMPLET., HOW MANY? single	23. INTERVALS DRILLED BY →	ROTARY TOOLS 0-995	CABLE TOOLS 0
24. PRODUCING INTERVAL(S), OF THIS COMPLETION--TOP, BOTTOM, NAME (MD AND TVD)* 813-995 ft.				25. WAS WELL CURED AND SURVEYED? yes	
26. TYPE ELECTRIC AND OTHER LOGS RUN Gamma Nuetron				27. WAS WELL CURED no	
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#	18ft.	8 3/4	10 sks.	none
4 1/2"	9.5#	857	6 1/4	Packer	all
29. LINER RECORD					
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	PACKER SET (MD)
none					
30. TUBING RECORD					
SIZE	DEPTH SET (MD)	PACKER SET (MD)			
none					
31. PERFORATION RECORD (Interval, size and number) open hole			32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC. DEPTH INTERVAL (MD) none		
33. PRODUCTION					
DATE FIRST PRODUCTION 10-26-68		PRODUCTION METHOD (Flowing, gas lift, pumping--size and type of pump) Swab			WELL STATUS (Producing or shut-in) Abandon
DATE OF TEST 10-27-68	HOURS TESTED 12	CHOKE SIZE 1"	PROD'N. FOR TEST PERIOD →	OIL--BBL. 0	GAS--MCF. TSTM
WATER--BBL. 15	GAS-OIL RATIO 0				
FLOW. TUBING PRESS. 0	CASING PRESSURE 0	CALCULATED 24-HOUR RATE →	OIL--BBL. 0	GAS--MCF. TSTM	WATER--BBL. 30
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) none					TEST WITNESSED BY
35. LIST OF ATTACHMENTS Directional Survey					
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records					
SIGNED Robert C. Dally		TITLE Vice President		DATE 5-12-72	

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