

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other instructions on reverse side)

Form approved.
Budget Bureau No. 42-B655.5.

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. RESVR. ☐	Other ☐
2. NAME OF OPERATOR		Eastern Petroleum Company				APR 1 1971	
3. ADDRESS OF OPERATOR		P. O. Box 291, Carui, Illinois 62821				U. S. GEOLOGICAL SURVEY FARMINGTON, N. M.	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*							
At surface 2102' FWL; 770' FWL							
At top prod. interval reported below							
At total depth Same							
14. PERMIT NO.		DATE ISSUED 1-26-70					
15. DATE SPUDDED 2-28-70		16. DATE T.D. REACHED 3-3-70		17. DATE COMPL. (Ready to prod.) 3-5-70		18. ELEVATIONS (DF, REB, RT, GR, ETC.)* 5320 Gr.	
19. ELEV. CASINGHEAD 3322		20. TOTAL DEPTH, MD & TVD 768'		21. PLUG, BACK T.D., MD & TVD		22. IF MULTIPLE COMPL., HOW MANY*	
23. INTERVALS DRILLED BY		ROTARY TOOLS 0-768		CABLE TOOLS		25. WAS DIRECTIONAL SURVEY MADE Yes	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*		Open Hole 739-768		26. TYPE ELECTRIC AND OTHER LOGS RUN Gamma Neutron		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	
7"	24	15	B 3/4	3 sac		-0-	
4 1/2"	9.5	739	B 1 1/4	10 sac		-0-	
29. LINER RECORD							
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	30. TUBING RECORD		
					SIZE 2 3/8	DEPTH SET (MD) 738	PACKER SET (MD)
31. PERFORATION RECORD (Interval, size and number)				32. ACID, SHOT, FRACTURE, CEMENT, SQUEEZES, ETC.			
Open Hole				DEPT. INTERVAL (MD)			
				AMOUNT AND TYPE OF MATERIAL USED			
				Natural Completion			
33. PRODUCTION							
DATE FIRST PRODUCTION 3-5-70		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Pumping				WELL STATUS (Producing or shut-in) Shut-in	
DATE OF TEST 3-5-70	HOURS TESTED 24	CHOKE SIZE 2"	PROD'N. FOR TEST PERIOD	OIL—BSL. 14	GAS—MCF. 10	WATER—BSL. 2	GAS-OIL RATIO 715:1
FLOW. TUBING PRESS.	CASING PRESSURE 732	CALCULATED 24-HOUR RATE	OIL—BSL. 14	GAS—MCF. 10	WATER—BSL. 2	OIL GRAVITY-APT (CORR.) 67	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Shut in						TEST WITNESSED BY John Cunningham	
35. LIST OF ATTACHMENTS Log (2)							
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records							
SIGNED J. E. Edwards		TITLE Secretary		DATE March 29, 1971			

*(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
Mancoes	Surface	690	Shl, dk. gray w/lines as 6 limestone beds	Mancoes	Surface	Surface	Surface
Dakota	690	766	2a-gray to white-fine to very fine grained Gas odor 730-735, oil 735-752, increase in oil 752-766	Greenhorn	600	600	600
				Graneros	640	640	640
				Dakota	690	690	690