

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*

1. TYPE OF WELL: OIL WELL ☐ GAS WELL ☒ DRY ☐ Other _____		5. LEASE DESIGNATION AND SERIAL NO. SF-047020(B)	
3. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other _____		6. IF INDIAN, ALLOTTEE OR TRIBE NAME _____	
2. NAME OF OPERATOR Chaparral Oil & Gas Company		7. UNIT AGREEMENT NAME _____	
3. ADDRESS OF OPERATOR P. O. Box B, Aztec, New Mexico		8. FARM OR LEASE NAME Lea Ann	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 1850 FNL & 790 FWL, Section 35-29N-11W. At top prod. interval reported below At total depth _____		9. WELL NO. 1	
14. PERMIT NO. _____ DATE ISSUED 3-20-71		10. FIELD AND POOL, OR WILDCAT Fulcher Kutz Picture Cliff	
15. DATE SPUDDED 3-24-71		11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA Section 35-29N-11W	
16. DATE T.D. REACHED 3-27-71		12. COUNTY OR PARISH San Juan	
17. DATE COMPL. (Ready to prod.) 3-31-71		13. STATE New Mexico	
18. ELEVATIONS (DF, REB, RT, GR, ETC.)* 5643 GL		19. ELEV. CASINGHEAD _____	
20. TUBING DEPTH, LB & TVD 1900		21. PLUG, BACK T.D., MD & TVD _____	
22. IF MULTIPLE COMPL., HOW MANY* _____		23. INTERVALS DRILLED BY ROTARY TOOLS _____ CABLE TOOLS _____	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 1776-90		25. WAS DIRECTIONAL SURVEY MADE Yes	
26. TYPE ELECTRIC AND OTHER LOGS RUN TBS		27. WAS WELL CORED No	
28. CASING RECORD (Report all strings set in well)			
CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE
7"	20#	111'	9-7/8"
3-1/2"	7.7#	1846'	6-1/4"
CEMENTING RECORD			
50 Sacks			
325 Sacks			
AMOUNT PULLED			
29. LINER RECORD			
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*
30. TUBING RECORD			
SIZE	DEPTH SET (MD)	PACKER SET (MD)	
1"	1780'		
31. PERFORATION RECORD (Interval, size and number)			
1776-90 2 SPF			
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED	
1776-90		30,000 Gals Water	
		30,000# Sand	
33. PRODUCTION			
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)	
4-19-71		3 Hrs.	
CROCK SIZE		PROD'N. FOR TEST PERIOD	
3/4		OIL—BBL. _____ GAS—MCF. _____ WATER—BBL. _____	
FLOW. TUBING PRESS.		CASING PRESSURE	
100		48	
CALCULATED 24-HOUR RATE		OIL—BBL. _____ GAS—MCF. _____ WATER—BBL. _____	
		849	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Vented			
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 <u>W. Eugene Landell</u>		TITLE <u>President</u>	
DATE <u>April 20, 1971</u>			

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

INSTRUCTIONS

3. This form is designed for submitting a copy of the completed well completion report and by on all type of lands and leases to either a Federal agency or a State agency, or both, pursuant to applicable Federal or State law and regulation. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to the number of copies to be submitted to the State agency, and practices, either are shown in Item 6, or will be issued by, or may be obtained from, the local office. See instructions on page 2 of this summary report for details. If the well is completed on Federal or State land, the local office should be notified of the completion of the well, and a copy of the summary report should be submitted to the local office. If the well is completed on private land, the local office should be notified of the completion of the well, and a copy of the summary report should be submitted to the local office. If the well is completed on private land, the local office should be notified of the completion of the well, and a copy of the summary report should be submitted to the local office.

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. Item 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 23. Submit a separate report (or logs) on this form, adequately identified, for each additional interval to be separately produced, showing the additional data pertinent to such interval.

Item 29: "Gases Cement": Attached supplemental records for this well should show the details of any multiple stage cementing and the location of the cementing log.

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	NAME	MEAS. DEPTH	TRUE VELD. DEPTH
Ojo Alamo	740'	850'			
Pictured Cliffs	1772'	1830'			