

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE*

(See instructions
on reverse side
of form 5-75-0)

7. UNIT DESIGNATION AND SURVEY NO.
Santa Fe 078581-A
8. IF INDIAN, ALL OTHER OR TRIBAL NAME

WELL COMPLETION OR RECOMPLETION REPORT AND LOG*

1. TYPE OF WELL: OIL WELL ☐ GAS WELL ☒ DRY ☐ Other ☐

b. TYPE OF COMPLETION:

RAW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other ☐

2. NAME OF OPERATOR

Blackwood & Nichols Company

3. ADDRESS OF OPERATOR

P. O. Box 1237, Durango, Colorado 81301

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

At surface 1090' F/NL - 1570' F/WL

At top prod. interval reported below Same

At total depth Same

14. PERMIT NO.

DATE ISSUED

12. COUNTY OR PARISH

San Juan

13. STATE

New Mexico

15. DATE SPUDDED

10-26-76

16. DATE T.D. REACHED

11-8-76

17. DATE COMPL. (Ready to prod.)

11-20-76

18. ELEVATIONS (LF, HKB, RT, GR, ETC.)*

6369' DF

19. ELEV. CASINGHEAD

6358'

20. TOTAL DEPTH, MD & TVD

5740'

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

5700'

22. IF MULTIPLE COMPL., HOW MANY*

23. INTERVALS DRILLED BY

ROTARY TOOLS

TD

CABLE TOOLS

None

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

5516' - 5617' Point Lookout

25. WAS DIRECTIONAL SURVEY MADE

Yes

26. TYPE ELECTRIC AND OTHER LOGS RUN

Compensated Density Neutron & Compensated Density

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
9-5/8"	32.30	225'	12-1/4"	225 Sacks Circulated	None
7"	23.00	3538'	8-3/4"	300 Sacks Top Cmt 1800'	None
4.5"	10.50	5735'	6-1/4"	325 Sacks " " 3300	None

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
None					2.375"	5618'	None

31. PERFORATION RECORD (Interval, size and number)

5516' - 5523' - 5539' - 5547' - 5570' -
5607' - 5617' four holes/interval

32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
5516-5617'	106,680 gals water 90,000 lbs #20-40 sand

33.* PRODUCTION

DATE FIRST PRODUCTION PRODUCTION METHOD (Flowing, gas lift, pumping--size and type of pump)

Not connected

Flowing

DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL--EBL.	GAS--MCF.	WATER--EBL.	WATER--GAL RATIO
11-30-76	3	3/4"	→		2683		
FLOW, TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL--EBL.	GAS--MCF.	WATER--EBL.	WATER--GAL RATIO (CORR.)	
205	495	→		3038			

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

Vented during test

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

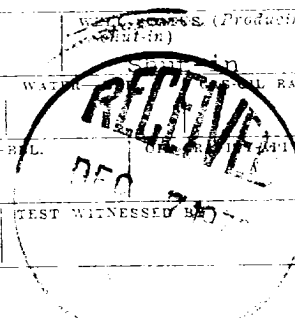
DeLasso Loos

TITLE

District Manager

DATE 12-2-76

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



General: This form is designed for submitting a complete and correct well completion report and log on all type of land and leases to either a Federal or State office, or both, pursuant to applicable Federal and/or State laws and regulations. Any necessary special instructions concerning the use of this form and the nature of reports 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: "Seals 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 FORMER ZONES				38. GEOLOGIC MARKERS	
SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF; CORED INTERVALS; AND ALL DESTRUCTIVE TESTS, INCLUDING				39.	
DEPTH INTERVAL TESTED, CUSHION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES				40.	
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH
Animas	1097'	2118'			
Ojo Alamo	2118'	2314'			
Fruitland	2314'	3000'			
Fruitland	3000'	3260'			
Pictured Cliffs	3260'	3420'			
Lewis	3420'	4850'			
Massive Cliffhouse	4850'	5150'			
Cliffhouse	5150'	5198'			
Menefee	5198'	5504'			
Point Lookout	5504'	5720'			
Mancos	5720'	----			