

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE\*

(See other in-  
structions on  
reverse side)Form approved.  
Budget Bureau No. 42-R335.5.

## WELL COMPLETION OR RECOMPLETION REPORT AND LOG \*

|                                                                                                                                                                                                                                 |  |  |  |                                                                                                                                                                                           |  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| 1a. TYPE OF WELL: OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> DRY <input type="checkbox"/> Other _____                                                                                       |  |  |  | 5. LEASE DESIGNATION AND SERIAL NO.<br>SF-078109                                                                                                                                          |  |
| b. TYPE OF COMPLETION:<br>NEW WELL <input checked="" type="checkbox"/> WORK OVER <input type="checkbox"/> DEEP-EN <input type="checkbox"/> PLUG BACK <input type="checkbox"/> DIFF. RESVR. <input type="checkbox"/> Other _____ |  |  |  | 6. IF INDIAN, ALAOTTEE OR TRIBE NAME<br>Gallegos Canyon Unit                                                                                                                              |  |
| 2. NAME OF OPERATOR<br>Amoco Production Company                                                                                                                                                                                 |  |  |  | 7. UNIT AGREEMENT NAME<br>S. FARM OR LEASE NAME                                                                                                                                           |  |
| 3. ADDRESS OF OPERATOR<br>501 Airport Drive Farmington, NM 87401                                                                                                                                                                |  |  |  | 9. WELL NO.<br>221E                                                                                                                                                                       |  |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*<br>At surface 855' FSL X 950' FEL Section 31, T29N, R12W<br>At top prod. interval reported below same<br>At total depth same       |  |  |  | 10. FIELD AND POOL, OR WILDCAT<br>Basin Dakota                                                                                                                                            |  |
| 14. PERMIT NO. _____ DATE ISSUED _____                                                                                                                                                                                          |  |  |  | 11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA<br>SE/4, SE/4<br>Section 31, T29N, R12W                                                                                                 |  |
| 15. DATE SPUDDED 4-29-80                                                                                                                                                                                                        |  |  |  | 12. COUNTY OR PARISH<br>San Juan                                                                                                                                                          |  |
| 16. DATE T.D. REACHED 5-9-80                                                                                                                                                                                                    |  |  |  | 13. STATE<br>NM                                                                                                                                                                           |  |
| 17. DATE COMPL. (Ready to prod.) 7-8-80                                                                                                                                                                                         |  |  |  | 19. ELEV. CASINGHEAD                                                                                                                                                                      |  |
| 18. ELEVATIONS (DF, RES, RT, GR, ETC.)* 5661' GL                                                                                                                                                                                |  |  |  | 20. TOTAL DEPTH, MD & TVD 6351'                                                                                                                                                           |  |
| 21. PLUG BACK T.D., MD & TVD 6310'                                                                                                                                                                                              |  |  |  | 22. IF MULTIPLE COMPL., HOW MANY* 0-TD                                                                                                                                                    |  |
| 23. INTERVALS DRILLED BY                                                                                                                                                                                                        |  |  |  | 24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)<br>6078-6096', 6166-6184', 6192-6198'-Dakota                                                                 |  |
| 25. TYPE ELECTRIC AND OTHER LOGS RUN<br>Induction Electric-Gamma Ray, FDC-CNL Gamma Ray                                                                                                                                         |  |  |  | 26. WAS DIRECTIONAL SURVEY MADE<br>No                                                                                                                                                     |  |
| 27. WAS SPOT LOGGED<br>No                                                                                                                                                                                                       |  |  |  | 28. WAS SPOT PULLED<br>No                                                                                                                                                                 |  |
| 29. CASING RECORD (Report all strings set in well)<br>Casing Size Weight, lb./ft. Depth Set (MD) Hole Size<br>8-5/8" 24# 303' 12-1/4"<br>4-1/2" 10.5# 6351' 7-7/8"                                                              |  |  |  | 30. CEMENTING RECORD<br>315 SX<br>1460 SX                                                                                                                                                 |  |
| 31. LINER RECORD<br>Size Top (MD) Bottom (MD) Sacks Cement* Screen (MD)<br>2-3/8" 6199 None                                                                                                                                     |  |  |  | 32. TUBING RECORD<br>Size Depth Set (MD) Packer Set (MD)<br>2-3/8" 6199 None                                                                                                              |  |
| 33. PERFORATION RECORD (Interval, size and number)<br>6078-6096, 6166-6184, 6192-6198, with 2 spf, a total of 84, .4" holes.                                                                                                    |  |  |  | 34. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.<br>Depth Interval (MD) Amount and Kind of Material Used<br>6078-6198 41,000 gal of frac fluid X<br>140,000# of 20-40 sand                  |  |
| 35. PRODUCTION<br>Date First Production _____ Production Method (Flowing, gas lift, pumping—size and type of pump) _____<br>Flowing<br>Well Status (Producing or shut-in) SI                                                    |  |  |  | 36. DATE OF TEST 7-23-80<br>Hours Tested 3 hours<br>Choke Size .75<br>Prod'n. for Test Period _____<br>Oil—BBL. 179<br>Gas—MCF. 1428<br>Water—BBL. _____<br>Oil Gravity-API (corr.) _____ |  |
| 37. FLOW, TUBING PRESS. 111 psig<br>Casing Pressure 604 psig<br>Calculated 24-hour rate _____<br>Oil—BBL. _____<br>Gas—MCF. 1428<br>Water—BBL. _____<br>Oil Gravity-API (corr.) _____                                           |  |  |  | 38. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)<br>to be sold<br>TEST WITNESSED BY _____                                                                                       |  |
| 39. LIST OF ATTACHMENTS                                                                                                                                                                                                         |  |  |  | 40. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records<br>SIGNED _____ TITLE Dist. Adm. Supvr. DATE 8-12-80    |  |

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

NMOCC

# 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 16:** 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; CORRELATE INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CUSHION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES

| FORMATION      | TOP  | BOTTOM | DESCRIPTION, CONTENTS, ETC. | GEOLOGIC MARKERS |                                        |
|----------------|------|--------|-----------------------------|------------------|----------------------------------------|
|                |      |        |                             | NAME             | TOP<br>MEAS. DEPTH<br>TRUE VERT. DEPTH |
| Picture Cliff  | Not  | Logged | Shaley sand                 |                  |                                        |
| Lewis Shale    | "    | "      | Shale                       |                  |                                        |
| Mesaverde      | "    | "      | Shaley sand                 |                  |                                        |
| Mancos Shale   | "    | "      | Shale                       |                  |                                        |
| Gallup         | 5194 | 5650   | Shaley sand                 |                  |                                        |
| Mancos Shale   | 5650 | 5974   | Shale                       |                  |                                        |
| Greenhorn      | 5974 | 6038   | Limestone                   |                  |                                        |
| Graneros Shale | 6038 | 6078   | Shale                       |                  |                                        |
| Graneros Dak.  | 6078 | 6096   | Shaley sand                 |                  |                                        |
| Main Dakota    | 6166 | 6198   | Shaley sand                 |                  |                                        |