

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
DIS. G.S.	
LAND OFFICE	
OPERATOR	

19. Indicate Type of Lease
State ☐ Fee ☒

5. State Oil & Gas Lease No.

NAME OF WELL

TYPE OF COMPLETION
OIL WELL ☒ GAS WELL ☐ CRY ☐ OTHER ☐
WORK OVER ☐ DEEPEN ☐ PLUG BACK ☐ DIFF. RES. ☐

7. Unit Agreement Name

8. Farm or Lease Name

Kirtland

4. Well No.

#8

10. Field and Pool, or Wildcat

Cha-Cha Gallup

Well by Four Corners, Inc.,
Box 627, Kirtland, NM 87417

LOCATED 510 FEET FROM THE South LINE AND 1920 FEET FROM

LINE OF SEC. 11 TWP. 29N RGE. 15W NMPM

12. County

San Juan

16. Date T.D. Reached 5-28-81 17. Date Compl. (Ready to Prod.) 7-8-81 18. Elevations (DF, RKB, RT, GR, etc.) 5126 G.L. 19. Elev. Casinghead 5126

21. Plug Back T.D. 4659 K.B. 22. If Multiple Compl., How Many 23. Intervals Drilled By Rotary Tools 345-T.D. Cable Tools 0-345

Indicate Intervals, of this completion - Top, Bottom, Name

25. Was Directional Survey Made

yes

26. Was Well Cored
no

CASING RECORD (Report all strings set in well)

CASING SIZE	WEIGHT LB./FT.	DATE SET	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
22"	10.5	4701.42 K.B.	12 1/2 "	250 SX 275	
			7 7/8 "	925 SX	

LINER RECORD

SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN

TUBING RECORD

SIZE	DEPTH SET	PACKER SET
2 3/8"	4519.18 K.B.	

31. Indicate Intervals (Interval, size and number)

30	18	total
38	24	20 holes
89	28	.38"
92	32	
4413	95	

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

DEPTH INTERVAL	AMOUNT AND KIND MATERIAL USED
4284-4495	Spot 300 gal 7 1/2% HCL over perfs frac. with 40,000# 20/40 sand and 19,300# 10/20 sand with 792 bbls KCL gelled water.

PRODUCTION

Production Method (Flowing, gas lift, pumping — Size and type pump)		Well Status (Prod. or Shut-in)				
swabbing		shut-in				
Hours Tested	Choke Size	Prod'n. For Test Period	Oil — Bbl.	Gas — MCF	Water — Bbl.	Gas — Oil Ratio
Casing Pressure	Calculated 24-Hour Rate	Oil — Bbl.	Gas — MCF	Water — Bbl.	Oil Gravity — API (Corr.)	
1450		30	175		400	

33. Indicate Intervals (Interval, size and number)

Test Witnessed By
Phil Sharp

I certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief.

Signed Regional Manager TITLE Regional Manager DATE 9-10-81

