

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other in-
structions on
reverse side)Form approved.
Budget Bureau No. 42-R355.6.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG*

1a. TYPE OF WELL: OIL WELL ☐ GAS WELL ☒ DRY ☐ Other ☐		5. LEASE DESIGNATION AND SERIAL NO. NM-2333	
1b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESER. ☐ Other ☐		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
2. NAME OF OPERATOR Aztec Oil & Gas Company		UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR Drawer 570, Farmington, New Mexico		7. FARM OR LEASE NAME Uells Canyon	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 920 FSL & 1150 FWL, Section 21-32N-5W At top prod. interval reported below At total depth		9. WELL NO. #1	
14. PERMIT NO.		10. FIELD AND POOL, OR WILDCAT Basin Dakota	
DATE ISSUED		11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA Section 21-32N-5W	
15. DATE SPUDDED 8-7-69		12. COUNTY OR PARISH San Juan	
16. DATE T.D. REACHED 9-5-69		13. STATE New Mexico	
17. DATE COMPL. (Ready to prod.) 1-5-70		18. ELEVATIONS (DF, REB, RT, OR, ETC.)* 6970 Gr	
19. SLEV. CASINGHEAD 6971		20. TOTAL DEPTH, MD & TVD 8645	
21. PLUG, BACK T.D., MD & TVD 8634		22. IF MULTIPLE COMPL., HOW MANY? Single	
23. INTERVALS DRILLED BY →		24. ROTARY TOOLS X	
25. CABLE TOOLS		26. WAS DIRECTIONAL SURVEY MADE Yes	
27. TYPE ELECTRIC AND OTHER LOGS RUN BHC/GR, FDC/GR, ES-Induction		28. WAS WELL CORED No	
29. CASING RECORD (Report all strings set in well)			
CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE
10-3/4"	32.75#	312'	15"
7-5/8"	26.40#	3888'	9-7/8"
CEMENTING RECORD			
340 8X			
650 8X			
AMOUNT PULLED			
30. TUBING RECORD			
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*
4 1/2"	3777'	8640'	660 8X
SCREEN (MD)			
SIZE			
1 1/2"			
DEPTH SET (MD)			
8539			
PACKER SET (MD)			
31. PERFORATION RECORD (Interval, size and number) 8538-8554, 8586-8612, 2 SPF			
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED	
8538-8612		97,944 Gal Water	
		80,000# 40/60 Sand	
33. PRODUCTION			
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Flowing	
WELL STATUS (Producing or shut-in) Shut-in			
DATE OF TEST	HOURS TESTED	CHOKER SIZE	PROD'N. FOR TEST PERIOD
1-12-70	3 Hours	3/4	→
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.
1100	1100	→	176
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Sold			
35. LIST OF ATTACHMENTS			
36. I hereby certify that the foregoing and attached information is complete and correct as compared with all available records			
SIGNED <i>Joe O. Brown</i> TITLE District Superintendent			
DATE January 13, 1970			

*(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 types of lands and leases to either a Federal agency or a State agency, and/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.), formations, and other data, 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.

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.

[illegible]

NAME		MEAS. DEPTH		TRUE VERT. DEPTH	
		FEET	FEET	FEET	FEET
38.					
38. SUMMARY OF POROUS ZONES: SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF; CORED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING 2-DAY INTERVAL TESTED, CUSHION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES					
39. LITHOLOGICAL SURVEY					
40. COMPLETION OR RECOMPLETION REPORT					
41. PRODUCTION RECORD (Flowing, shut-in, pumping, etc.)					
42. PRODUCTION RECORD (Flowing, shut-in, pumping, etc.)					
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