

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 *

1a. TYPE OF WELL: OIL WELL ☐ GAS WELL ☒ DRY ☐ Other _____		5. LEASE DESIGNATION AND SERIAL NO. 87 - 07761																									
b. TYPE OF COMPLETION: NEW WELL ☐ WORK OVER ☒ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other Multiple Zone		6. IF INDIAN, ALLOTTEE OR TRIBE NAME																									
2. NAME OF OPERATOR Artec Oil & Gas Company		7. UNIT AGREEMENT NAME																									
3. ADDRESS OF OPERATOR P. O. Drawer 570, Farmington, New Mexico		8. FARM OR LEASE NAME Richardson																									
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements) At surface 1570' PBL & 1660' PBL At top prod. interval reported below At total depth		9. WELL NO. 5																									
14. PERMIT NO. U. S. GEOLOGICAL SURVEY		10. FIELD AND POOL, OR WILDCAT Blanco Mesaverte																									
15. DATE SPUNDED 9/12/65		11. SEC. T. R. M. OR BLOCK AND SURVEY OR AREA Sec. 21, T. 21N. R. 12W																									
16. DATE T.D. REACHED 9/11/65		12. COUNTY OR PARISH Santa Fe																									
17. DATE COMPL. (Ready to prod.) 11/5/65		13. STATE New Mexico																									
18. ELEVATIONS (DF, REB, RT, GR, ETC.) * 6131 OR		19. ELEV. CASINGHEAD																									
20. TOTAL DEPTH, MD & TVD 7196		21. PLUG, BACK T.D., MD & TVD 7169																									
22. IF MULTIPLE COMPL., HOW MANY * 2		23. INTERVALS DRILLED BY 5160 to TD																									
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD) * Blanco Mesaverte - 4894-4924		25. WAS DIRECTIONAL SURVEY MADE Yes																									
26. TYPE ELECTRIC AND OTHER LOGS RUN Formation Density Log, Casing Inspection Log		27. WAS WELL CORED No																									
28. CASING RECORD (Report all strings set in well)																											
<table border="1"><thead><tr><th>CASING SIZE</th><th>WEIGHT, LB./FT.</th><th>DEPTH SET (MD)</th><th>HOLE SIZE</th><th>CEMENTING RECORD</th><th>AMOUNT PULLED</th></tr></thead><tbody><tr><td>10-3/4"</td><td>32.35#</td><td>163'</td><td>12 1/2"</td><td>135 mx</td><td></td></tr><tr><td>7-5/8"</td><td>26#</td><td>5186'</td><td>8-3/4"</td><td>95 mx</td><td></td></tr><tr><td>4 1/2"</td><td>9.5 #</td><td>7195'</td><td>6 1/2"</td><td>1 st. str. 30 mx 2nd str. 275 mx</td><td></td></tr></tbody></table>				CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED	10-3/4"	32.35#	163'	12 1/2"	135 mx		7-5/8"	26#	5186'	8-3/4"	95 mx		4 1/2"	9.5 #	7195'	6 1/2"	1 st. str. 30 mx 2nd str. 275 mx	
CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED																						
10-3/4"	32.35#	163'	12 1/2"	135 mx																							
7-5/8"	26#	5186'	8-3/4"	95 mx																							
4 1/2"	9.5 #	7195'	6 1/2"	1 st. str. 30 mx 2nd str. 275 mx																							
29. LINER RECORD																											
<table border="1"><thead><tr><th>SIZE</th><th>TOP (MD)</th><th>BOTTOM (MD)</th><th>SACKS CEMENT*</th><th>SCREEN (MD)</th></tr></thead><tbody><tr><td></td><td></td><td></td><td></td><td></td></tr></tbody></table>				SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)																			
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)																							
30. TUBING RECORD																											
<table border="1"><thead><tr><th>SIZE</th><th>DEPTH SET (MD)</th><th>PACKER SET (MD)</th></tr></thead><tbody><tr><td>2-3/8"</td><td>6986</td><td>6980</td></tr></tbody></table>				SIZE	DEPTH SET (MD)	PACKER SET (MD)	2-3/8"	6986	6980																		
SIZE	DEPTH SET (MD)	PACKER SET (MD)																									
2-3/8"	6986	6980																									
31. PERFORATION RECORD (Interval, size and number)																											
Blanco Mesaverte - 4894-4924, 2 shots per foot																											
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE LOG																											
<table border="1"><thead><tr><th>DEPTH INTERVAL' (MD)</th><th>AMOUNT AND KIND OF FLUID</th></tr></thead><tbody><tr><td>4894-4924</td><td>20,000 # 10/20</td></tr><tr><td></td><td>20,000# 20/40</td></tr></tbody></table>				DEPTH INTERVAL' (MD)	AMOUNT AND KIND OF FLUID	4894-4924	20,000 # 10/20		20,000# 20/40																		
DEPTH INTERVAL' (MD)	AMOUNT AND KIND OF FLUID																										
4894-4924	20,000 # 10/20																										
	20,000# 20/40																										
33.* PRODUCTION																											
<table border="1"><thead><tr><th>DATE FIRST PRODUCTION</th><th>PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)</th><th>WELL STATUS (Flowing or shut-in)</th></tr></thead><tbody><tr><td></td><td>Flowing</td><td>Flowing</td></tr></tbody></table>				DATE FIRST PRODUCTION	PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)	WELL STATUS (Flowing or shut-in)		Flowing	Flowing																		
DATE FIRST PRODUCTION	PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)	WELL STATUS (Flowing or shut-in)																									
	Flowing	Flowing																									
<table border="1"><thead><tr><th>DATE OF TEST</th><th>HOURS TESTED</th><th>CHOKE SIZE</th><th>PROD'N. FOR TEST PERIOD</th><th>OIL—BBL.</th><th>GAS—MCF.</th><th>WATER—BBL.</th><th>GAS-OIL RATIO</th></tr></thead><tbody><tr><td>11/22/65</td><td>3 hours</td><td>3/4"</td><td></td><td></td><td></td><td></td><td></td></tr></tbody></table>				DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO	11/22/65	3 hours	3/4"													
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO																				
11/22/65	3 hours	3/4"																									
<table border="1"><thead><tr><th>FLOW. TUBING PRESS.</th><th>CASING PRESSURE</th><th>CALCULATED 24-HOUR RATE</th><th>OIL—BBL.</th><th>GAS—MCF.</th><th>WATER—BBL.</th><th>OIL GRAVITY-API (CORR.)</th></tr></thead><tbody><tr><td></td><td>177</td><td></td><td></td><td>2212</td><td></td><td></td></tr></tbody></table>				FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)		177			2212												
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)																					
	177			2212																							
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)																											
Sold - Southern Union Gathering System																											
35. LIST OF ATTACHMENTS																											
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records																											
ORIGINAL SIGNED BY JOE C. SALMON TITLE District Superintendent DATE 1/25/66																											

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

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 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: "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; 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	TOP	TRUE VERT. DEPTH