

Form approved.  
Budget Bureau No. 42-R355.5.

## 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 _____                                                                                                                                                                                                                                                                                                                                                                                  |                                                               | 7. UNIT AGREEMENT NAME _____                                                                                                                                                                                                                                                                                                 |                                              |                     |                                  |                   |                                                               |               |            |             |            |                                                                                                                                                                                                                                     |             |               |                |                 |               |               |              |  |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------|---------------------|----------------------------------|-------------------|---------------------------------------------------------------|---------------|------------|-------------|------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|---------------|----------------|-----------------|---------------|---------------|--------------|--|--|
| b. TYPE OF COMPLETION: 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 _____                                                                                                                                                                                                                                                                                               |                                                               | 8. FARM OR LEASE NAME<br><b>Ute Mountain Tribal "p"</b>                                                                                                                                                                                                                                                                      |                                              |                     |                                  |                   |                                                               |               |            |             |            |                                                                                                                                                                                                                                     |             |               |                |                 |               |               |              |  |  |
| 2. NAME OF OPERATOR<br><b>AMOCO PRODUCTION COMPANY</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                               | 9. WELL NO.<br><b>3</b>                                                                                                                                                                                                                                                                                                      |                                              |                     |                                  |                   |                                                               |               |            |             |            |                                                                                                                                                                                                                                     |             |               |                |                 |               |               |              |  |  |
| 3. ADDRESS OF OPERATOR<br><b>301 Airport Drive, Farmington, New Mexico 87401</b>                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                               | 10. FIELD AND POOL, OR WILDCAT<br><b>Ute Dome Dakota</b>                                                                                                                                                                                                                                                                     |                                              |                     |                                  |                   |                                                               |               |            |             |            |                                                                                                                                                                                                                                     |             |               |                |                 |               |               |              |  |  |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State regulations)<br>At surface <b>1530' NW &amp; 1980' NW</b><br>At top prod. interval reported below <b>Same</b><br>At total depth <b>Same</b>                                                                                                                                                                                                                                                                                                  |                                                               | 11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA<br><b>SE 1/4 NW 1/4 Section 10, T-11-N, R-14-W</b>                                                                                                                                                                                                                         |                                              |                     |                                  |                   |                                                               |               |            |             |            |                                                                                                                                                                                                                                     |             |               |                |                 |               |               |              |  |  |
| 14. PERMIT NO. _____ DATE ISSUED <b>DEC 9 1971</b><br><b>OIL CON. COM.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                               | 12. COUNTY OR PARISH<br><b>San Juan</b>                                                                                                                                                                                                                                                                                      |                                              |                     |                                  |                   |                                                               |               |            |             |            |                                                                                                                                                                                                                                     |             |               |                |                 |               |               |              |  |  |
| 15. DATE SPUDDED <b>9-17-71</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                               | 13. STATE<br><b>New Mexico</b>                                                                                                                                                                                                                                                                                               |                                              |                     |                                  |                   |                                                               |               |            |             |            |                                                                                                                                                                                                                                     |             |               |                |                 |               |               |              |  |  |
| 16. DATE T.D. REACHED <b>9-23-71</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | 17. DATE COMPL. (Ready to prod.) <b>12-2-71</b>               | 19. ELEV. CASINGHEAD<br>—                                                                                                                                                                                                                                                                                                    |                                              |                     |                                  |                   |                                                               |               |            |             |            |                                                                                                                                                                                                                                     |             |               |                |                 |               |               |              |  |  |
| 20. TOTAL DEPTH, MD & TVD<br><b>3125'</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | 21. PLUG, BACK T.D., MD & TVD<br><b>3049'</b>                 | 22. IF MULTIPLE COMPL., HOW MANY? <b>3</b>                                                                                                                                                                                                                                                                                   |                                              |                     |                                  |                   |                                                               |               |            |             |            |                                                                                                                                                                                                                                     |             |               |                |                 |               |               |              |  |  |
| 23. INTERVALS DRILLED BY<br><b>0-7D</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                               | 24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*<br><b>2810-3026' Dakota</b>                                                                                                                                                                                                                    |                                              |                     |                                  |                   |                                                               |               |            |             |            |                                                                                                                                                                                                                                     |             |               |                |                 |               |               |              |  |  |
| 26. TYPE ELECTRIC AND OTHER LOGS RUN<br><b>Induction-Electric, Density, Dipmeter</b>                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                               | 25. WAS DIRECTIONAL SURVEY MADE<br><b>No</b>                                                                                                                                                                                                                                                                                 |                                              |                     |                                  |                   |                                                               |               |            |             |            |                                                                                                                                                                                                                                     |             |               |                |                 |               |               |              |  |  |
| 27. WAS WELL CORED<br><b>No</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                               | 28. CASING RECORD (Report all strings set in well)                                                                                                                                                                                                                                                                           |                                              |                     |                                  |                   |                                                               |               |            |             |            |                                                                                                                                                                                                                                     |             |               |                |                 |               |               |              |  |  |
| <table border="1" style="width: 100%; border-collapse: collapse;"> <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> <tr> <td><b>8-5/8"</b></td> <td><b>24#</b></td> <td><b>345'</b></td> <td><b>11"</b></td> <td><b>200 sx</b></td> <td><b>None</b></td> </tr> <tr> <td><b>5-1/2"</b></td> <td><b>14#</b></td> <td><b>3093'</b></td> <td><b>7-7/8"</b></td> <td><b>500 sx</b></td> <td><b>None</b></td> </tr> </table> |                                                               | CASING SIZE                                                                                                                                                                                                                                                                                                                  | WEIGHT, LB./FT.                              | DEPTH SET (MD)      | HOLE SIZE                        | CEMENTING RECORD  | AMOUNT PULLED                                                 | <b>8-5/8"</b> | <b>24#</b> | <b>345'</b> | <b>11"</b> | <b>200 sx</b>                                                                                                                                                                                                                       | <b>None</b> | <b>5-1/2"</b> | <b>14#</b>     | <b>3093'</b>    | <b>7-7/8"</b> | <b>500 sx</b> | <b>None</b>  |  |  |
| CASING SIZE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | WEIGHT, LB./FT.                                               | DEPTH SET (MD)                                                                                                                                                                                                                                                                                                               | HOLE SIZE                                    | CEMENTING RECORD    | AMOUNT PULLED                    |                   |                                                               |               |            |             |            |                                                                                                                                                                                                                                     |             |               |                |                 |               |               |              |  |  |
| <b>8-5/8"</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | <b>24#</b>                                                    | <b>345'</b>                                                                                                                                                                                                                                                                                                                  | <b>11"</b>                                   | <b>200 sx</b>       | <b>None</b>                      |                   |                                                               |               |            |             |            |                                                                                                                                                                                                                                     |             |               |                |                 |               |               |              |  |  |
| <b>5-1/2"</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | <b>14#</b>                                                    | <b>3093'</b>                                                                                                                                                                                                                                                                                                                 | <b>7-7/8"</b>                                | <b>500 sx</b>       | <b>None</b>                      |                   |                                                               |               |            |             |            |                                                                                                                                                                                                                                     |             |               |                |                 |               |               |              |  |  |
| 29. LINER RECORD                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                               | 30. TUBING RECORD                                                                                                                                                                                                                                                                                                            |                                              |                     |                                  |                   |                                                               |               |            |             |            |                                                                                                                                                                                                                                     |             |               |                |                 |               |               |              |  |  |
| <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th>SIZE</th> <th>TOP (MD)</th> <th>BOTTOM (MD)</th> <th>SACKS CEMENT*</th> <th>SCREEN (MD)</th> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> </tr> </table>                                                                                                                                                                                                                                                                  |                                                               | SIZE                                                                                                                                                                                                                                                                                                                         | TOP (MD)                                     | BOTTOM (MD)         | SACKS CEMENT*                    | SCREEN (MD)       |                                                               |               |            |             |            | <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th>SIZE</th> <th>DEPTH SET (MD)</th> <th>PACKER SET (MD)</th> </tr> <tr> <td><b>2-3/8"</b></td> <td><b>3002'</b></td> <td><b>2970'</b></td> </tr> </table> |             | SIZE          | DEPTH SET (MD) | PACKER SET (MD) | <b>2-3/8"</b> | <b>3002'</b>  | <b>2970'</b> |  |  |
| SIZE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | TOP (MD)                                                      | BOTTOM (MD)                                                                                                                                                                                                                                                                                                                  | SACKS CEMENT*                                | SCREEN (MD)         |                                  |                   |                                                               |               |            |             |            |                                                                                                                                                                                                                                     |             |               |                |                 |               |               |              |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                               |                                                                                                                                                                                                                                                                                                                              |                                              |                     |                                  |                   |                                                               |               |            |             |            |                                                                                                                                                                                                                                     |             |               |                |                 |               |               |              |  |  |
| SIZE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | DEPTH SET (MD)                                                | PACKER SET (MD)                                                                                                                                                                                                                                                                                                              |                                              |                     |                                  |                   |                                                               |               |            |             |            |                                                                                                                                                                                                                                     |             |               |                |                 |               |               |              |  |  |
| <b>2-3/8"</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | <b>3002'</b>                                                  | <b>2970'</b>                                                                                                                                                                                                                                                                                                                 |                                              |                     |                                  |                   |                                                               |               |            |             |            |                                                                                                                                                                                                                                     |             |               |                |                 |               |               |              |  |  |
| 31. PERFORATION RECORD (Interval, size and number)<br><b>2920-2950' x 2 SPF</b><br><b>2992-2996' x 2 SPF</b><br><b>3008-3010' x 3 SPF</b>                                                                                                                                                                                                                                                                                                                                                                                  |                                                               | 32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.<br><table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th>DEPTH INTERVAL (MD)</th> <th>AMOUNT AND KIND OF MATERIAL USED</th> </tr> <tr> <td><b>2920-2950'</b></td> <td><b>20,000 gallons Gas Frac III, 20,000 pounds 20-40 sand.</b></td> </tr> </table> |                                              | DEPTH INTERVAL (MD) | AMOUNT AND KIND OF MATERIAL USED | <b>2920-2950'</b> | <b>20,000 gallons Gas Frac III, 20,000 pounds 20-40 sand.</b> |               |            |             |            |                                                                                                                                                                                                                                     |             |               |                |                 |               |               |              |  |  |
| DEPTH INTERVAL (MD)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | AMOUNT AND KIND OF MATERIAL USED                              |                                                                                                                                                                                                                                                                                                                              |                                              |                     |                                  |                   |                                                               |               |            |             |            |                                                                                                                                                                                                                                     |             |               |                |                 |               |               |              |  |  |
| <b>2920-2950'</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <b>20,000 gallons Gas Frac III, 20,000 pounds 20-40 sand.</b> |                                                                                                                                                                                                                                                                                                                              |                                              |                     |                                  |                   |                                                               |               |            |             |            |                                                                                                                                                                                                                                     |             |               |                |                 |               |               |              |  |  |
| 33.* PRODUCTION                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                               |                                                                                                                                                                                                                                                                                                                              |                                              |                     |                                  |                   |                                                               |               |            |             |            |                                                                                                                                                                                                                                     |             |               |                |                 |               |               |              |  |  |
| DATE FIRST PRODUCTION _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                               | PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)<br><b>Flowing</b>                                                                                                                                                                                                                                       |                                              |                     |                                  |                   |                                                               |               |            |             |            |                                                                                                                                                                                                                                     |             |               |                |                 |               |               |              |  |  |
| WELL STATUS (Producing or shut-in)<br><b>Shut In</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                               |                                                                                                                                                                                                                                                                                                                              |                                              |                     |                                  |                   |                                                               |               |            |             |            |                                                                                                                                                                                                                                     |             |               |                |                 |               |               |              |  |  |
| DATE OF TEST<br><b>12-2-71</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | HOURS TESTED<br><b>3</b>                                      | CHOKE SIZE<br><b>0.75"</b>                                                                                                                                                                                                                                                                                                   | PROD'N. FOR TEST PERIOD<br><b>4913 (AOP)</b> |                     |                                  |                   |                                                               |               |            |             |            |                                                                                                                                                                                                                                     |             |               |                |                 |               |               |              |  |  |
| FLOW. TUBING PRESS.<br><b>406</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | CASING PRESSURE<br><b>682</b>                                 | CALCULATED 24-HOUR RATE<br><b>4913 (AOP)</b>                                                                                                                                                                                                                                                                                 | WATER—BBL.<br><b>12,434</b>                  |                     |                                  |                   |                                                               |               |            |             |            |                                                                                                                                                                                                                                     |             |               |                |                 |               |               |              |  |  |
| 34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)<br><b>To be sold to El Paso Natural Gas Co.</b>                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                               | TEST WITNESSED BY<br><b>DEC 8 1971</b>                                                                                                                                                                                                                                                                                       |                                              |                     |                                  |                   |                                                               |               |            |             |            |                                                                                                                                                                                                                                     |             |               |                |                 |               |               |              |  |  |
| 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 _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                               | TITLE <b>D. A. Wayman, Area Engineer</b>                                                                                                                                                                                                                                                                                     |                                              |                     |                                  |                   |                                                               |               |            |             |            |                                                                                                                                                                                                                                     |             |               |                |                 |               |               |              |  |  |
| DATE _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                               | DATE <b>December 7, 1971</b>                                                                                                                                                                                                                                                                                                 |                                              |                     |                                  |                   |                                                               |               |            |             |            |                                                                                                                                                                                                                                     |             |               |                |                 |               |               |              |  |  |

**\*(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:<br>SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF; CORED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING<br>DEPTH INTERVAL TESTED, CUSHION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES |     | 38. GEOLOGIC MARKERS |                                                                                                                                                                                                                                                                                                                                                                    |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| FORMATION                                                                                                                                                                                                                                             | TOP | BOTTOM               | DESCRIPTION, CONTENTS, ETC.                                                                                                                                                                                                                                                                                                                                        |
| BUT NO. 1: 2910-2965'                                                                                                                                                                                                                                 |     |                      | <p>Tool open 10 minutes with very strong blow after one minute and increased to 409 MCFD rate through 1 1/2" choke at end of blow. Shut in one hour. Opened tool and blow at 1073 MCFD rate through 3/4" choke. After 40 minutes the top packer failed. IFF 1403, IFF 120, IFF 213, IFF 903, IFF 187, IFF 280, IFF 1379. Recovered 180' GCM and 1070' SWC mud.</p> |
|                                                                                                                                                                                                                                                       |     |                      | <p>100 TOPS</p> <p>Mancos</p> <p>Gallup</p> <p>Delora</p> <p>Morrison</p>                                                                                                                                                                                                                                                                                          |
|                                                                                                                                                                                                                                                       |     |                      | <p>MEAS. DEPTH</p> <p>1070'</p> <p>2132'</p> <p>2810'</p> <p>3028'</p>                                                                                                                                                                                                                                                                                             |
|                                                                                                                                                                                                                                                       |     |                      | <p>TOP</p> <p>TRUE VERT. DEPTH</p>                                                                                                                                                                                                                                                                                                                                 |