

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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> DRY <input type="checkbox"/> Other _____		5. LEASE DESIGNATION AND SERIAL NO. MOOC 142001014	
b. TYPE OF COMPLETION: NEW WELL <input type="checkbox"/> WORK OVER <input type="checkbox"/> DEEP-EN <input type="checkbox"/> PLUG BACK <input type="checkbox"/> DIFF. RESVR. <input type="checkbox"/> Other <u>P&A</u>		6. IF INDIAN, ALLOTTEE OR TRIBE NAME Isleta	
2. NAME OF OPERATOR SHELL OIL COMPANY		7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR P. O. BOX 831, HOUSTON, TX 77001		8. FARM OR LEASE NAME Isleta	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface <u>660' FWL & 2200' FNL, Section 16</u> At top prod. interval reported below At total depth		9. WELL NO. No. 2	
14. PERMIT NO.		DATE ISSUED	
15. DATE SPUDDED <u>11-23-79</u>		16. DATE T.D. REACHED <u>5-15-80</u>	
17. DATE COMPL. (Ready to prod.) <u>P&A 5-25-80</u>		18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* <u>GL 5000'</u>	
19. ELEV. CASINGHEAD		10. FIELD AND POOL, OR WILDCAT Wildcat	
20. TOTAL DEPTH, MD & TVD		11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA Section 16, T8N, R2E	
21. PLUG, BACK T.D., MD & TVD		12. COUNTY OR PARISH Bernalillo	
22. IF MULTIPLE COMPL., HOW MANY*		13. STATE New Mexico	
23. INTERVALS DRILLED BY		24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*	
ROTARY TOOLS <u>X</u>		25. WAS DIRECTIONAL SURVEY MADE	
CABLE TOOLS		26. TYPE ELECTRIC AND OTHER LOGS RUN DIL/CNL/FDC/BHC/Sonic	
27. WAS WELL CORED Yes		28. CASING RECORD (Report all strings set in well)	
29. LINER RECORD		30. TUBING RECORD	
31. PERFORATION RECORD (Interval, size and number)		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
33.*		34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)	
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 <u>S. M. Gobe</u>		TITLE <u>Supervisor</u>	
DATE <u>SEP-4-80</u>		DATE <u>SEP-4-80</u>	

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

FARMINGTON DISTRICT

BY

Plugging Detail, Isleta #2

Plug No. 1	21,100-20,950	50 sx
Plug No. 2	17,358	50 sx
Plug No. 3	14,425-14,675	75 sx
Plug No. 4	11,425	35 sx
Plug No. 5	8325	35 sx
Plug No. 6	5950-6050	35 sx
Plug No. 7	4850-5050	106 sx
Plug No. 8	2000-1900	71 sx
Plug No. 9	625-425	142 sx
Plug No. 10	Surface	50 sx

RECEIVED
 JUN 15 1960
 OIL CONS. DISTRICT OFFICE
 SANTA FE