

**UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY**

SUBMIT IN DUPLICATE\*

(See other instructions 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 \_\_\_\_\_

b. TYPE OF COMPLETION:  
NEW WELL  WORK OVER  DEEP-EN  PLUG BACK  DIFF. RESVR.  Other \_\_\_\_\_

2. NAME OF OPERATOR \_\_\_\_\_

3. ADDRESS OF OPERATOR  
BRINKHOFF DRILLING COMPANY, INC.

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)\*  
870 DENVER CLUB BUILDING DENVER, COLORADO  
At surface \_\_\_\_\_  
At top prod. interval reported below \_\_\_\_\_  
At total depth 610' FNL, 790' FEL  
NE/4 NE/4

14. PERMIT NO. \_\_\_\_\_ DATE ISSUED \_\_\_\_\_

15. DATE SPUNDED 3/27/67 16. DATE T.D. REACHED 4/5/67 17. DATE COMPL. (Ready to prod.) P & A 4/16/67 18. ELEVATIONS (DF, REB, ET, GR, ETC.)\* 6863' 19. ELEV. CASINGHEAD \_\_\_\_\_

20. TOTAL DEPTH, MD & TVD 5634' 21. PLUG, BACK T.D., MD & TVD \_\_\_\_\_ 22. IF MULTIPLE COMPL., HOW MANY\* \_\_\_\_\_ 23. INTERVALS DRILLED BY \_\_\_\_\_ ROTARY TOOLS \_\_\_\_\_ CABLE TOOLS \_\_\_\_\_

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)\*  
Dry Hole 25. WAS DIRECTIONAL SURVEY MADE Yes

26. TYPE ELECTRIC AND OTHER LOGS RUN  
Log Well Induction Electrolog and Gamma Ray Attenuation 27. WAS WELL CORED No

28. CASING RECORD (Report all strings set in well)

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT FULLED
<u>8-5/8"</u>	<u>24"</u>	<u>291'</u>	<u>12-1/4"</u>	<u>150 sacks, 2% CaCl<sub>2</sub></u>	<u>None</u>

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)

30. TUBING RECORD

SIZE	DEPTH SET (MD)	PACKER SET (MD)

31. PERFORATION RECORD (Interval, size and number)

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED

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

33.\* PRODUCTION  
DATE FIRST PRODUCTION \_\_\_\_\_ PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) \_\_\_\_\_ WELL STATUS (Producing or shut-in) \_\_\_\_\_

DATE OF TEST \_\_\_\_\_ HOURS TESTED \_\_\_\_\_ CHOKE SIZE \_\_\_\_\_ PROD'N. FOR TEST PERIOD \_\_\_\_\_ OIL—BBL. \_\_\_\_\_ GAS—MCF. \_\_\_\_\_ WATER—BBL. \_\_\_\_\_ GAS-OIL RATIO \_\_\_\_\_

FLOW. TUBING PRESS. \_\_\_\_\_ CASING PRESSURE \_\_\_\_\_ CALCULATED 24-HOUR RATE \_\_\_\_\_ OIL—BBL. \_\_\_\_\_ GAS—MCF. \_\_\_\_\_ WATER—BBL. \_\_\_\_\_ OIL GRAVITY-AP (CORR.) \_\_\_\_\_

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 [Signature] TITLE Geologist DATE June 2, 1967

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

**RECEIVED**  
JUN 26 1967  
U. S. GEOLOGICAL SURVEY  
FARMINGTON, N.M.

# 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 38, 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:** "Seals 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

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	GEOLOGIC MARKERS	MEAS. DEPTH	TRUE VERT. DEPTH
Cliff House Mancos Gallup	3230' 4260' 4990'	NO CORES OR TESTS 3330' 4360' 5360'		Ojo Alamo Kirtland Fruitland Pictured Cliffs Lewls Masa Verde Chacra Cliff House Manefee Point Lookout Mancos Upper Gallup Lower Gallup T O	1393' 1393' 1674' 1816' 1990' 2256' 2653' 3329' 3395' 4072' 4256' 5090' 5255' 5484'	