

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 _____		
b. TYPE OF COMPLETION:		NEW WELL ☐	WORK OVER ☐	DEEP-EN ☐	PLUG BACK ☐	DIFF. RESVR. ☐	Other _____
2. NAME OF OPERATOR VAL R. REESE, INC.						7. UNIT AGREEMENT NAME None	
3. ADDRESS OF OPERATOR 900 Bank of New Mexico Building, Albuquerque, New Mexico						8. FARM OR LEASE NAME Cabezon	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 330' fsl, 835' fwl At top prod. interval reported below 330' fsl, 835' fwl At total depth 330' fsl, 835' fwl						9. WELL NO. 1	
14. PERMIT NO. USGS						DATE ISSUED 10-31-73	
15. DATE SPUDDED 11-7-73		16. DATE T.D. REACHED 11-11-73		17. DATE COMPL. (Ready to prod.) N/A		18. ELEVATIONS (DF, REB, RT, GR, ETC.)* 6270' GR	
19. ELEV. CASINGHEAD N/A		20. TOTAL DEPTH, MD & TVD 124'		21. PLUG, BACK T.D., MD & TVD		22. IF MULTIPLE COMPL., HOW MANY*	
23. INTERVALS DRILLED BY →		ROTARY TOOLS 0-324'		CABLE TOOLS None		24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* None	
25. WAS DIRECTIONAL SURVEY MADE No		26. TYPE ELECTRIC AND OTHER LOGS RUN Electrical log with gamma ray		27. WAS WELL CORED Yes			
28. CASING RECORD (Report all strings set in well)							
CASING SIZE		WEIGHT, LB./FT.		DEPTH SET (MD)		HOLE SIZE	
				NONE			
29. LINER RECORD							
SIZE		TOP (MD)		BOTTOM (MD)		SACKS CEMENT*	
				NONE			
30. TUBING RECORD							
SIZE		DEPTH SET (MD)		PACKER SET (MD)			
		NONE					
31. PERFORATION RECORD (Interval, size and number)							
NONE							
32. ACID, SHOT, FRACTURE, CEMENT SOUPE, ETC.							
DEPTH INTERVAL (MD)				AMOUNT AND KIND OF MATERIAL USED			
NONE							
33.* PRODUCTION							
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)				WELL STATUS (Producing or shut-in)	
NONE						Producing	
DATE OF TEST		HOURS TESTED		CHOKE SIZE		PROD'N. FOR TEST PERIOD	
						→	
FLOW. TUBING PRESS.		CASING PRESSURE		CALCULATED 24-HOUR RATE		OIL—BBL.	
				→			
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)							
TEST WITNESSED BY DEC 6 1973							
35. LIST OF ATTACHMENTS Electric logs (3 copies)							
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records.							
SIGNED		Val R. Reese		TITLE		President	
						DATE	
						November 30, 1973	

*(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 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.)

Core No. 1: 70' - 85', recovered 15' - 8' black carbonaceous shale, 7' gray shaley sand.

Core No. 2: 85' - 103', recovered 18' - 5' shaley sand, 11' siltstone and shale, 2' silty, cross-bedded sand.

Core No. 3: 103' - 128', recovered 5' - 5' siltstone and shale.

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		
				NAME	MEAS. DEPTH	TRUE VERT. DEPTH
Manefee shale	0'	104'	Gray shale with coal streaks	Manefee sand	104'	104'
Manefee sand	104'	114'	Gray, brown, and tan sandstones, oil saturated			
Manefee shale	114'	124' T.O.	Gray shale with sand streaks			