

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN DUPLICATE*

(See other In-
structions on
reverse side)

Form approved.
Budget Bureau No. 1004-0137
Expires August 31, 1985

WELL COMPLETION OR RECOMPLETION REPORT AND LOG*

RECEIVED

1a. TYPE OF WELL: OIL WELL ☐ GAS WELL ☐ DRY ☒ Other _____		5. LEASE DESIGNATION AND SERIAL NO. NM-28998
b. TYPE OF COMPLETION: NEW WELL ☐ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESER. ☐ Other <u>DEC 12 1986</u>		6. IF INDIAN, ALLOTTEE OR TRIBE NAME N/A
2. NAME OF OPERATOR Gary-Williams Oil Producer, Inc.		7. UNIT AGREEMENT NAME N/A
3. ADDRESS OF OPERATOR 115 Inverness Drive East, Englewood, CO 80112-5116		8. FARM OR LEASE NAME Chijulla 36
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 600' FNL and 700' FEL (NE NE) Section 36-T21N-R2W At top prod. interval reported below At total depth Same as above Date Re-entered _____		9. WELL NO. 1
14. PERMIT NO. _____ DATE ISSUED _____		10. FIELD AND POOL, OR WILDCAT Wildcat
15. DATE LOGGED 11/30/86		11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA NE NE Sec. 36-T21N-R2W
16. DATE T.D. REACHED 12/2/86		12. COUNTY OR PARISH Sandoval
17. DATE COMPL. (Ready to prod.) P & A'd 12/2/86		13. STATE NM
18. ELEVATIONS (OF RKB, RT, GR, ETC.)* GL 7426' 6926		19. ELEV. CASINGHEAD ---
20. TOTAL DEPTH, MD & TVD 1240'		21. PLUG BACK T.D., MD & TVD ---
22. IF MULTIPLE COMPL., HOW MANY* ---		23. INTERVALS DRILLED BY ROTARY TOOLS 0-1240
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* N/A		25. WAS DIRECTIONAL SURVEY MADE No
26. TYPE ELECTRIC AND OTHER LOGS RUN Sample Log		27. WAS WELL COILED No

CASING RECORD (Report all strings set in well)					
CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
8-5/8"	24#	253'	12-1/4"	N/A	N/A

LINER RECORD					TUBING RECORD		
SIZE	TOP (MD)	BOTTOM (MD)	BACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
N/A					N/A		

31. PERFORATION RECORD (Interval, size and number)	32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.
N/A	DEPTH INTERVAL (MD) N/A
	AMOUNT AND KIND OF MATERIAL USED

33.* DATE FIRST PRODUCTION _____		PRODUCTION METHOD <u>Flowing, gas lift, pumping—size and type of pump</u>				WELL STATUS (Producing or shut-in) Plugged and Abandoned	
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-API (CORR.)	

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) _____ TEST WITNESSED BY _____

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 Operations Manager DATE 12/5/86

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

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, flowing and shut-in pressures, and recoveries):	38. GEOLOGIC MARKERS				
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	TOP MEAS. DEPTH TRUE VERT. DEPTH
				Picture Cliff Chacra	610' KB 1060' KB