

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other in-
structions on
reverse side)Form approved. 1
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 "TIGHT HOLE"				
2. NAME OF OPERATOR Dietrich Exploration Co.											
3. ADDRESS OF OPERATOR 410 17th Street - suite 2450, Denver, Colorado 80202											
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 1650' from the North line and 1850' from the West line At top prod. interval reported below At total depth											
14. PERMIT NO.				DATE ISSUED							
15. DATE SPUDDED 11-19-80		16. DATE T.D. REACHED 12-1-80		17. DATE COMPL. (Ready to prod.) N/A		18. ELEVATIONS (DF, REB, RT, OR, ETC.)* 7040 gr. 7053 kb.		19. ELEV. CASINGHEAD 7042			
20. TOTAL DEPTH, MD & TVD 6654		21. PLUG, BACK T.D., MD & TVD 6620		22. IF MULTIPLE COMPL., HOW MANY* N/A		23. INTERVALS DRILLED BY →		ROTARY TOOLS Surface to 6654		CABLE TOOLS	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 6560 - 6574 Dakota								25. WAS DIRECTIONAL SURVEY MADE		26. TYPE ELECTRIC AND OTHER LOGS RUN	
27. WAS WELL CURED								28. WAS WELL CURED		29. WAS WELL CURED	
29. 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		23#		293		12 1/4		200 sks		None	
4 1/2		10.5#		6652		7 7/8		1st stage - 464 sks 2nd stage - 400 sks		None	
29. LINER RECORD											
SIZE		TOP (MD)		BOTTOM (MD)		SACKS CEMENT*		SCREEN (MD)		TUBING RECORD	
N/A										SIZE N/A	
31. PERFORATION RECORD (Interval, size and number) 6560 - 6574 - .40" holes 2/ft. 28 holes						32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.					
33.* PRODUCTION						DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED			
						6560-6574		750 gal. 15% HCL acid squeezed with 100 sks class B cement. 12-19-80			
DATE FIRST PRODUCTION N/A		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.	
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 Mike Hicks			
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				Agent		DATE 3/4/81			

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

NMOC

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:

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.	38. GEOLOGIC MARKERS		
				NAME	MEAS. DEPTH	TRUE VERT. DEPTH
Ojo Alamo	1525					
Pictured Cliffs	2065					
Cliff House	3565					
Menefee	4065					
Point Lookout	4295					
Mancos	4490					
Gallup	5250					
Base Greenhorn	6350					
Dakota	6420					