

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. NM 25440	
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 checked="" type="checkbox"/> Other _____		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
2. NAME OF OPERATOR Dugan Production Corp.		7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR Box 234, Farmington, NM 87401		8. FARM OR LEASE NAME Big Eight	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 1530' FSL - 840' FWL At top prod. interval reported below At total depth		9. WELL NO. 1	
14. PERMIT NO.		DATE ISSUED	
10. FIELD AND POOL, OR WILDCAT Bisti Lower Gallup		11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA Sec 8 T24N R9W	
12. COUNTY OR PARISH San Juan		13. STATE NM	
15. DATE SPUDDED 1-9-76	16. DATE T.D. REACHED 3-18-76	17. DATE COMPL. (Ready to prod.) 6-22-79	18. ELEVATIONS (DF, REB, RT, OR, ETC.)* 6771' GR
19. ELEV. CASINGHEAD			
20. TOTAL DEPTH, MD & TVD 6392'	21. PLUG, BACK T.D., MD & TVD 6375'	22. IF MULTIPLE COMPL., HOW MANY* Dual	23. INTERVALS DRILLED BY →
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TGP, BOTTOM, NAME (MD AND TVD)* Gallup 5342 - 5384			25. WAS DIRECTIONAL SURVEY MADE NO
26. TYPE ELECTRIC AND OTHER LOGS RUN GO IES and Density Log			27. WAS WELL CORED No
28. CASING RECORD (Report all strings set in well)			
CASINO SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE
8-5/8"	24#	199'	12-1/4"
4-1/2"	10.5#	6392'	7-7/8"
CEMENTING RECORD		AMOUNT PULLED	
115 sx		---	
2 stages 465 cu ft		---	
1328 cu ft		---	
29. LINER RECORD			
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*
None			
30. TUBING RECORD			
SIZE	DEPTH SET (MD)	PACKER SET (MD)	
2-3/8"	5422' GR		
31. PERFORATION RECORD (Interval, size and number) 5342-54 5375-84			
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED	
		See Sundry Notice 6-22-79 for detailed information.	
33. PRODUCTION			
DATE FIRST PRODUCTION 6-22-79	PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Pumping		WELL STATUS (Producing or shut-in) Producing
DATE OF TEST 6-22-79	HOURS TESTED 24 hrs	CHOKE SIZE none	PROD'N. FOR TEST PERIOD →
FLOW. TUBING PRESS. 60	CASING PRESSURE 60	CALCULATED 24-HOUR RATE →	OIL—BBL. 27 BOPD
GAS—MCF. 37 MCFGPD		WATER—BBL. ---	
OIL GRAVITY-API (CORR.)		---	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)			
TEST WITNESSED BY Jacobs			
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 Thomas A. Dugan		TITLE Petroleum Engineer	
DATE 7-6-79			

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

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, pursuant to applicable Federal and/or State laws and regulations, 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.

tion and pressure tests, 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 16: Indicate which elevation is used as reference (where not otherwise shown) for depth measurements given in feet 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: "Stacks 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.)

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.	NAME	TOP	
					MEAS. DEPTH	TRUE VERT. DEPTH