

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						7. UNIT AGREEMENT NAME							
Caulkins Oil Company						8. FARM OR LEASE NAME							
3. ADDRESS OF OPERATOR						Reuter							
P.O. Box 780 Farmington, New Mexico						9. WELL NO.							
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*						343							
At surface 990 from the north and 990 from the west						10. FIELD AND POOL, OR WILDCAT							
At top prod. interval reported below same						South Blanco PC. Otero Ch							
At total depth same						11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA							
						Sec. 22 26 N. 6 W.							
15. DATE SPUDDED		16. DATE T.D. REACHED		17. DATE COMPL. (Ready to prod.)		18. ELEVATIONS (DF, REB, BT, GR, ETC.)*		19. ELEV. CASINGHEAD					
12/20/51		8/11/78		8/30/78		6655 GR		6657					
20. TOTAL DEPTH, MD & TVD		21. PLUG, BACK T.D., MD & TVD		22. IF MULTIPLE COMPL., HOW MANY*		23. INTERVALS DRILLED BY		ROTARY TOOLS					
4016		4016		two		→		0-4016					
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*								25. WAS DIRECTIONAL SURVEY MADE					
3874- 3980 Chacra								No					
2926- 3002 Pictured Cliffs													
26. TYPE ELECTRIC AND OTHER LOGS RUN								27. WAS WELL CORED					
GRN								No					
29. CASING RECORD (Report all strings set in well)													
CASING SIZE		WEIGHT, LB./FT.		DEPTH SET (MD)		HOLE SIZE		CEMENTING RECORD		AMOUNT PULLED			
10-3/4		32.75		575		15 1/4		200		None			
7"		20		2975		8-3/4		200		None			
4 1/2"		10.5		4016		6-1/8		250		None			
30. TUBING RECORD										31. PERFORATION RECORD (Interval, size and number)			
SIZE		TOP (MD)		BOTTOM (MD)		SACKS CEMENT*		SCREEN (MD)		DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED	
1 1/4										3874- 3980		fractured w/ 52,500 # 20- 40 sand and 1357 bbls water	
										2926- 3002		fractured w/ 52,500 #20- 40 sand and 1256 bbls water	
33.* PRODUCTION										32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)								WELL STATUS (Producing or shut-in)			
9-7-78		flowing								Shut In			
DATE OF TEST		HOURS TESTED		CHOKE SIZE		PROD'N. FOR TEST PERIOD		OIL—BBL.		GAS—MCF.		GAS-OIL RATIO	
9-7-78		3 Hrs.		3/4		→				76			
FLOW. TUBING PRESS.		CASING PRESSURE		CALCULATED 24-HOUR RATE		OIL—BBL.		GAS—MCF.		OIL GRAVITY-API (CORR.)			
22		298		→				610					
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)												35. LIST OF ATTACHMENTS	
Vented													
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records.													
SIGNED <u>Charles E. Veyan</u> TITLE <u>Supt.</u>													

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

SEP 14 1978

U. S. GEOLOGICAL SURVEY

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.)

New 4½ " 10.5# J-55 Smls Casing cemented at TD 4016' w/ 120 sacks 50- 50 Poz, 6% Gel followed by 130 sacks neat. Plug down 4:45 P.M. 8-11-78. Cement circulated to surface.

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				38. GEOLOGIC MARKERS		
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH	TRUE VERT. DEPTH
Pictured Cliffs	2926	3006	Gas Sand	Pictured Cliffs	2926	2926
Chacara	3873	3903	Gas Sand	Chacara		
HOLE DEVIATION TESTS (Degrees)						
	3105	¼				
	3420	¼				
	4016	½				