

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 _____				5. LEASE DESIGNATION AND SERIAL NO. SF-079035-A																									
b. TYPE OF COMPLETION: NEW WELL ☐ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☒ DIFF. RESVR. ☐ Other <u>Recompletion</u>				6. IF INDIAN, ALLOTTEE OR TRIBE NAME																									
2. NAME OF OPERATOR <u>Crutkin Oil Company</u>				7. UNIT AGREEMENT NAME																									
3. ADDRESS OF OPERATOR <u>P.O. Box 780, Farmington, New Mexico</u>				8. FARM OR LEASE NAME <u>Breach A</u>																									
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface <u>1980 F S/L and 1980 F E/L</u> At top prod. interval reported below <u>Same</u> At total depth <u>Same</u>				9. WELL NO. <u>679</u>																									
14. PERMIT NO.				12. COUNTY OR PARISH <u>Rio Arriba</u>																									
DATE ISSUED				13. STATE <u>New Mexico</u>																									
15. DATE SPEDDED <u>5-21-51</u>		16. DATE TEST REACHED <u>7-3-51</u>		10. FIELD AND POOL, OR WILDCAT <u>Blanco-Mesa Verde</u>																									
17. DATE COMPL. (Ready to prod.) <u>9-25-79</u>		18. ELEVATIONS (DF, RSL, RT OR ETC)* <u>6498 Cr.</u>		11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA <u>Section 9 26N 6W</u>																									
20. TOTAL DEPTH, MD & TVD <u>6692</u>		21. PLUG BACK T.D., MD & TVD <u>5303</u>		23. INTERVALS SPILLED BY <u>Rotary Tools</u>																									
22. IF MULTIPLE COMPL. HOW MANY*		24. PRODUCING INTERVAL(S) OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* <u>5082 to 5300</u>		25. WAS DIRECTIONAL SURVEY MADE <u>No</u>																									
26. TYPE ELECTRIC AND OTHER LOGS RUN <u>No New Logs Run</u>				27. WAS WELL CURED <u>No</u>																									
28. CASING RECORD (Report all strings set in well)																													
<table border="1" style="width:100%"><tr><th>CASING SIZE</th><th>WEIGHT, LB./FT.</th><th>DEPTH SET (MD)</th><th>HOLE SIZE</th><th>CEMENTING RECORD</th><th>AMOUNT FILLED</th></tr><tr><td>10 3/4</td><td>40#</td><td>500</td><td>15</td><td>200</td><td>None</td></tr><tr><td>7</td><td>23#</td><td>6615</td><td>8 3/4</td><td>150</td><td>None</td></tr><tr><td colspan="6">See Cementing details reverse side</td></tr></table>						CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT FILLED	10 3/4	40#	500	15	200	None	7	23#	6615	8 3/4	150	None	See Cementing details reverse side					
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30. TUBING RECORD																													
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32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.																													
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33. PRODUCTION																													
DATE FIRST PRODUCTION <u>10-2-79</u>		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) <u>Flowing</u>			WELL STATUS (Producing or shut-in)																								
DATE OF TEST <u>10-2-79</u>	HOURS TESTED <u>3 hrs.</u>	CHOKE SIZE <u>3/4</u>	PROD'N. FOR TEST PERIOD <u>105</u>	OIL—BBL.	GAS—MCF.																								
FLOW. TUBING PRESS.	CASING PRESSURE <u>85</u>	CALCULATED 24-HOUR RATE <u>680</u>	OIL—BBL.	GAS—MCF.	WATER—BBL.																								
				<u>823</u>																									
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) <u>Vented</u>																													
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 <u>L. J. [Signature]</u>		TITLE <u>Superintendent</u>		DATE <u>10-3-79</u>																									

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

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other in-
structions on
reverse side)Form approved,
Budget Bureau No. 42-3355.5.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG*

1a. TYPE OF WELL: OIL WELL ☐ GAS WELL ☒ DRY ☐ Other _____		5. LEASE DESIGNATION AND SERIAL NO. SF-079035-A	
b. TYPE OF COMPLETION: NEW WELL ☐ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☒ DIFF. RESVR. ☒ Other <u>ReCompletion</u>		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
2. NAME OF OPERATOR Carlkins Oil Company		7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR P.O. Box 780, Farmington, New Mexico		8. FARM OR LEASE NAME Brecht A	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 1980 F S/1 and 1980 F E/L At top prod. interval reported below Same		9. WELL NO. 679	
10. FLOOR AND MOOL OR WILCOAT Otero-Chaco		11. SECTION, TOWNSHIP, RANGE AND SURVEY OR AREA Section 9 16N 6W	
12. COUNTY OR TERRITORY Rio Arriba		13. STATE New Mexico	
14. PERMIT NO.	DATE ISSUED	15. ELEVATION OF WELL (FT. OR M.)	
		6498	
16. DATE T.D. REACHED	17. DATE COMPL. (Ready to prod.)	18. ELEVATION OF CASINGHEAD	
5-21-51	9-25-79	5496	
20. TOTAL DEPTH, MD & TVD 6692 Gr.	21. PLUG BACK T.D., MD & TVD 5303	22. IF MULTIPLE COMPL., HOW MANY* Two	23. INTERVAL DRILLED BY Rotary Tools
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MI AND TVD)* 2803 to 3896			25. WAS DIRECTIONAL SURVEY MADE No
26. TYPE ELECTRIC AND OTHER LOGS RUN No New Logs run			27. WAS CIL RUN
28. CEMENTING RECORD (Report all strings set in well)			
CASING SIZE	WEIGHT, LB/FT.	DEPTH, SET (MD)	JOINT SIZE
10 3/4	40#	500	15
7	3#	6615	8 3/4
See Reverse Side for recementing details			
29. LINER RECORD			
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*
30. TUBING RECORD			
SIZE	DEPTH SET (MD)	PACKER SET (MD)	
1 1/4	5205		
31. PERFORATION RECORD (Interval, size and number)			
32. ACID, SHOT, FRACTURE CEMENT SQUEEZE, ETC.			
DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED	
3803 to 3896		50,000% 20-40 sand	
		1340 lbs water	
33. PRODUCTION			
DATE FIRST PRODUCTION 10-2-79		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Flowing	
DATE OF TEST 10-2-79		WELL STATUS (Producing or shut-in) Shut in	
HOURS TESTED 3 hrs.	CHOKE SIZE 3/4	PROD'N FOR TEST PERIOD →	OIL—BBL. 68
FLOW. TUBING PRESS. 85	CASING PRESSURE 680	CALCULATED 24-HOUR RATE →	GAS—MCF. 549
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Vented		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 <u>Charles E. Chiquet</u>		TITLE <u>Superintendent</u>	
DATE <u>10-3-79</u>			

*(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 respect to local area or regional procedures, shall be shown below or will be submitted by the local Federal and/or State office. See instructions on items 22 and 23, 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 each 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.)

After plugging back to 5420', 7" casing, was perforated with 2 holes @ 5345 and 2 holes @ 4045, cement retainer was set in 7" casing @ 5303'. 7" casing was then cemented thru perforation 5345 to. Perf. 4045 with 170 sacks Neat cement. Tubing was pulled out of cement retainer and 3 lbs cement were reversed out. Tubing was pulled then 7" casing was cemented from perforations 4045 to surface with 480 sacks 65-35 Poz containing 12% Gel followed by 50 sacks Neat. Plug down 4:00 PM 8-2-79. Had good circulation throughout job. Hole was cleaned out then casing was tested with 3000#. No decrease

37 SUMMARY OF FORMATS ZONES: IN PRESENCE.
SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THROUGH: CORRELATION INTERVALS, AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CUSHION TEST, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES

38 GEOLOGIC MARKERS

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	THICKNESS	DEPTH	TRUE VERT. DEPTH
Alamo	2283	2398	Water Sand	Alamo	2398		2398
Pictured Cliffs	2087	2930	Gas Sand	Pictured Cliffs	2930		2930
Chacra	3785	3910	Gas Sand	Chacra	3910		3910
Cliff House	4585	4610	Water Sand	Cliff House	4585		4585
Point Lookout	5115	5295	Water Sand	Point Lookout	5115		5115