

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. Jicarilla Contract 155	
b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other _____		6. IF INDIAN, ALLOTTEE OR TRIBE NAME Jicarilla Apache	
2. NAME OF OPERATOR Amoco Production Company		7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR 501 Airport Drive Farmington, NM 87401		8. FARM OR LEASE NAME Jicarilla Contract 155	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 1690' FSL x 1660' FEL, Section 32, T26N, R5W At top prod. interval reported below Same At total depth Same		9. WELL NO. 12E	
14. PERMIT NO.		DATE ISSUED	
15. DATE SPUDDED 7-1-79		16. DATE T.D. REACHED 7-16-79	
17. DATE COMPL. (Ready to prod.) 3-18-80		18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 6514' GL	
19. ELEV. CASINGHEAD		20. TOTAL DEPTH, MD & TVD 7400'	
21. PLUG, BACK T.D., MD & TVD 7373'		22. IF MULTIPLE COMPL., HOW MANY*	
23. INTERVALS DRILLED BY →		ROTARY TOOLS O-TD	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 6980-7002', 7106-7208', 7273-7346', Dakota		25. WAS DIRECTIONAL SURVEY MADE No	
26. TYPE ELECTRIC AND OTHER LOGS RUN Cement Bond Log, Correlation Log Induction Electric-SP-Gamma Ray, Compensated Formation Density-Compensated		27. WAS WELL CORED No	
28. CASING RECORD (Report all strings set in well) Neutron-Gamma Ray, Temperature Log			
CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE
8-5/8"	24.0#	341'	12-1/4"
4-1/2"	11.6#	7400'	7-7/8"
29. LINER RECORD			
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*
30. TUBING RECORD			
SIZE	DEPTH SET (MD)	PACKER SET (MD)	
2-3/8"	7225'	None	
31. PERFORATION RECORD (Interval, size and number) 6980-7002', 7106-7208', 7273-7346', a total of 228, .3" holes.			
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED	
6980-7002'		33,100 gal of frac fluid x	
		141,200# of 20-40 sand	
7106-7346'		120,000 gal of frac fluid x	
		240,000# of 20-40 sand	
33.* PRODUCTION			
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Flowing	
WELL STATUS (Producing or shut-in) SI			
DATE OF TEST 4-28-80	HOURS TESTED 3 hours	CHOKE SIZE .750	PROD'N. FOR TEST PERIOD →
FLOW. TUBING PRESS. 72 PSIG	CASING PRESSURE 434 PSIG	CALCULATED 24-HOUR RATE →	OIL—BBL. 121
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) To be sold			
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 Dist. Adm. Supvr.	
DATE 5-14-80		MAY 15 1980	

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

FARMINGTON DISTRICT

BY M. L. Kuchera

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	2048	2408	Sand			
Kirtland	2408	2655	Shale			
Fruitland	2655	2790	Sand			
Pictured Cliffs	2790	2860	Sand			
Lewis	2860	3676	Shale			
Chacra	3676	3720	Sand			
Lewis	3720	4430	Shale			
Mesaverde	4430	5205	Sand			
Mancos	5205	6143	Shale			
Callup	6143	6702	Sand x Shale			
Mancos	6702	6884	Shale			
Greenhorn	6884	6943	Limestone			
Graneros	6943	6967	Shale			
Dakota	6967		Sand			