

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.

5. LEASE DESIGNATION AND SERIAL NO.

SF 078621-A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

East Bisti Unit

8. FARM OR LEASE NAME

East Bisti Unit

9. WELL NO.

120

10. FIELD AND POOL, OR WILDCAT

11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA

Sec. 24-25N-11W

12. COUNTY OR PARISH
San Juan13. STATE
New Mexico

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL: OIL WELL ☐ GAS WELL ☐ DRY ☐ Other Water Supply

b. TYPE OF COMPLETION:

NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other

2. NAME OF OPERATOR

Skelly Oil Company

3. ADDRESS OF OPERATOR

Box 730 - Hobbs, New Mexico

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)

At surface

760' FSL & 240' FSL Sec. 24-25N-11W

At top prod. interval reported below

At total depth

14. PERMIT NO.

DATE ISSUED

12. COUNTY OR PARISH

13. STATE

15. DATE SPUDDED

July 10, 1964

16. DATE T.D. REACHED

July 19, 1964

17. DATE COMPL. (Ready to prod.)

January 27, 1965

18. ELEVATIONS (DF, RKB, RT, GR, ETC.)*

6537' KB

19. ELEV. CASINGHEAD

20. TOTAL DEPTH, MD & TVD

2640' MD

21. PLUG, BACK T.D., MD & TVD

-

22. IF MULTIPLE COMPL., HOW MANY*

-

23. INTERVALS DRILLED BY

ROTARY TOOLS

CABLE TOOLS

0-2640'

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*

2120-2639' - Menefee of the Mesa Verde

25. WAS DIRECTIONAL SURVEY MADE

No

26. TYPE ELECTRIC AND OTHER LOGS RUN

Lane Wells' - Induction Electrolog

27. WAS WELL CORED

No

28. CASING RECORD (Report all strings set in well)

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
16"	42.8#	124'	20"	200	--
9-5/8"	36#	2639'	15"	300	--

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
None					5-1/2"	2098'	-

31. PERFORATION RECORD (Interval, size and number)

9-5/8" JD casing slotted 2120-2639'.

32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
2120-2639'	Acid 2000 Gals. 7-1/2% HCL
2120-2639'	Acid Water Frac - 2000 gals. acid & 42,000 gals. water

33.* PRODUCTION

DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)				WELL STATUS (Producing or shut-in)	
Jan. 27, 1965		Pumping - Roda Pump				Producing	
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	WATER—BBL.	GAS-OIL RATIO	
Feb. 9, 1965	24	-	→	→	9200	-	
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.)

None

35. LIST OF ATTACHMENTS

None

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records

SIGNED (ORIGINAL SIGNED) H. E. Aab

TITLE Dist. Superintendent

DATE Feb. 12, 1965

*(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 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 to the Bureau, the summary record will be submitted to the Bureau as a separate report.

tion 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.

18: Indicate which elevation is used as reference (where not otherwise shown).
 19: If this well is completed for separate production from more than one formation, indicate the formation.
 20: Indicate the depth measurements given in other spaces on this form and in any attachments.
 21: If this well is completed for separate production from more than one formation, indicate the formation.
 22: Indicate the depth measurements given in other spaces on this form and in any attachments.
 23: If this well is completed for separate production from more than one formation, indicate the formation.
 24: Indicate the depth measurements given in other spaces on this form and in any attachments.
 25: If this well is completed for separate production from more than one formation, indicate the formation.

interval, or intervals, top(s), bottom(s) and name(s) (if any) for 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 27: *Backs 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.)

[illegible]