

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 078622

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Lively

9. WELL NO.

18

10. FIELD AND POOL, OR WILDCAT

Basin Dakota

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

Sec. 1, T26N, R8W

12. COUNTY OR PARISH

San Juan

13. STATE

N.M.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL: OIL ☐ GAS ☒ DRY ☐ Other _____

b. TYPE OF COMPLETION:

NEW WELL ☒ WORK OVER ☐ DEEPEN ☐ - PLUG BACK ☐ - DIFF. DESVR. ☐ - Other _____

2. NAME OF OPERATOR

Lively Exploration Company

3. ADDRESS OF OPERATOR

Box 234, Farmington, New Mexico 87401

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* 1974

At surface 800' FSL - 1180' FWL

At top prod. interval reported below

At total depth

14. PERMIT NO.

DATE ISSUED

15. DATE SPUDDED

1-5-74

16. DATE T.D. REACHED

1-22-74

17. DATE COMPL. (Ready to prod.)

2-9-74

18. ELEVATIONS (DF, REB, RT, GE, ETC.)*

6140' GR - 6153' RKB

19. ELEV. CASINGHEAD

20. TOTAL DEPTH, MD & TVD

6730'

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

6665'

22. IF MULTIPLE COMPL., HOW MANY*

23. INTERVALS - ROTARY TOOLS

CABLE TOOLS

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

6472' - 6652' Dakota

26. TYPE ELECTRIC AND OTHER LOGS RUN

IES and Density logs

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

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	AMOUNT POLLED
8-5/8"	24#	220' RKB	12-1/4"	None
4-1/2"	10.5#	6730' RKB	7-7/8"	None
			454 cu ft (first stage)	None
			1688 cu ft (second stage)	None

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					1-1/4"	6635' RKB	

31. PERFORATION RECORD (Interval, size and number)

Perforated 2 jets/ft:

6652-6647', 6633-6628', 6617-6612',
6608-6603', 6599-6594', 6576-6571',
6532-6527', and 6477-6472'.

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
	See completion report for detailed frac information.

33.* PRODUCTION

DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)				WELL STATUS (Producing or shut-in)	
		Flowing				Shut-in	
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
3-6-74	3	5/8"	—————→	—————		—————	—————
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)	
2081 SI	2385 SI	—————→	—————	2203 AOF	—————	—————	

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)

TEST WITNESSED BY

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 by T. A. Dugan
Thomas A. Dugan

TITLE Engineer

DATE 3-7-74

*(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, State, 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.

It is 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: "Sticks 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:			38. GEOLOGIC MARKERS		
FORMATION	TOP	BOTTOM	NAME	MEAS. DEPTH	TRUE VERT. DEPTH
			<u>Log Tops</u>		
			Ojo Alamo	1407'	
			Kirtland	1482'	
			Fruitland	1985'	
			Pictured Cliffs	2140'	
			Lewis	2219'	
			Cliff House	3730'	
			Menefee	3857'	
			Point Lookout	4404'	
			Mancos	4587'	
			Gallup	5545'	
			Greenhorn	6360'	
			Graneros sh	6415'	
			Graneros sd	6466'	
			Dakota	6500'	