

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 _____		
b. TYPE OF COMPLETION:		NEW WELL ☒	WORK OVER ☐	DEEP-EN ☐	PLUG BACK ☐	DIFF. RESVR. ☐	Other _____
2. NAME OF OPERATOR Dugan Production Corp.						5. LEASE DESIGNATION AND SERIAL NO. NM 1336	
3. ADDRESS OF OPERATOR Box 234, Farmington, NM 87401						6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 1170' FNL - 1450' FWL At top prod. interval reported below At total depth						7. UNIT AGREEMENT NAME 30-45-22758	
14. PERMIT NO.						8. FARM OR LEASE NAME Monticello	
DATE ISSUED						9. WELL NO. 1 Y	
15. DATE SPUDDED 9/7/77						10. FIELD AND POOL, OR WILDCAT WAW Pictured Cliffs	
16. DATE T.D. REACHED 9/17/77						11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA Section 3, T26N, R13W	
17. DATE COMPL. (Ready to prod.) 9-29-77						12. COUNTY OR PARISH San Juan	
18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 6201 GR						13. STATE NM	
19. ELEV. CASINGHEAD		20. TOTAL DEPTH, MD & TVD 1460'		21. PLUG, BACK T.D., MD & TVD		22. IF MULTIPLE COMPL., HOW MANY*	
23. INTERVALS DRILLED BY		ROTARY TOOLS 0-1460'		CABLE TOOLS		24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* Pictured Cliffs - 1359-1371	
25. WAS DIRECTIONAL SURVEY MADE		NO		26. TYPE ELECTRIC AND OTHER LOGS RUN IES		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	
5-1/2"	14#	45'	7-7/8"	5 SX			
2-7/8"	6.5#	1447'	4-3/4"	125 SX			
29. LINER RECORD							
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	30. TUBING RECORD		
					SIZE	DEPTH SET (MD)	PACKER SET (MD)
					1-1/4"	1363'	
31. PERFORATION RECORD (Interval, size and number) 1359-1371 - 12 Holes				32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
DEPTH INTERVAL (MD)				AMOUNT AND KIND OF MATERIAL USED			
1359-1371				250 Gas 15% HCl			
33.* PRODUCTION							
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)				WELL STATUS (Producing or shut-in) Shut-IN	
DATE OF TEST 9-29-77	HOURS TESTED 3 hrs.	CHOKE SIZE 5/8"	PROD'N. FOR TEST PERIOD →	OIL—BBL. →	GAS—MCF. 195 AOF	WATER—BBL. 0	GAS-OIL RATIO
FLOW. TUBING PRESS. 10	CASING PRESSURE 47	CALCULATED 24-HOUR RATE →	OIL—BBL. 0	GAS—MCF. 195 AOF	WATER—BBL. 0	OIL GRAVITY-API (CORR.)	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)						TEST WITNESSED BY C. Hall	
35. LIST OF ATTACHMENTS CCT 12 1977							
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records							
SIGNED [Signature]		TITLE Geologist		DATE 10-11-77			

*(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, 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				38. GEOLOGIC MARKERS		
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH	TRUE VERT. DEPTH
				Log Tops	217'	
				Kirtland	1036'	
				Fruitland		
				Pictured Cliffs	1359'	