

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 AAA Operating Company, Inc.						5. LEASE DESIGNATION AND SERIAL NO. SF 078476	
3. ADDRESS OF OPERATOR 3545 First International Building, Dallas, Texas 75270						6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 1870 FSL and 1440 FWL At top prod. interval reported below At total depth						7. UNIT AGREEMENT NAME K	
14. PERMIT NO. _____ DATE ISSUED _____						8. FARM OR LEASE NAME Federal E	
15. DATE SPUDDED 5-11-79						9. WELL NO. 3A	
16. DATE T.D. REACHED 6-1-79						10. FIELD AND POOL, OR WILDCAT Blanco Mesaverde	
17. DATE COMPLETION (Ready to prod.) 3-3-80						11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA Sec. 13 T27N R8W	
18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* GR 6575						12. COUNTY OR PARISH San Juan	
19. ELEV. CASINGHEAD 6578						13. STATE New Mexico	
20. TOTAL DEPTH, MD & TVD 5565		21. PLUG, BACK T.D., MD & TVD		22. IF MULTIPLE COMPL., HOW MANY*		23. INTERVALS DRILLED BY →	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* Multiple Producing zones from 4556 to 5483						25. WAS DIRECTIONAL SURVEY MADE Yes	
26. TYPE ELECTRIC AND OTHER LOGS RUN IES, GR, CND, Collar Locator, Cement Bond						27. WAS WELL CORED No	
28. CASING RECORD (Report all strings set in well)							
CASING SIZE		WEIGHT, LB./FT.		DEPTH SET (MD)		HOLE SIZE	
8-5/8		24#		204		12-3/4	
4-1/2		9.5#		5633		7-7/8	
29. LINER RECORD				30. TUBING RECORD			
SIZE		TOP (MD)		BOTTOM (MD)		PACKER SET (MD)	
31. PERFORATION RECORD (Interval, size and number) 127 Perforations from 4556 to 5483				32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
DEPTH INTERVAL (MD)				AMOUNT AND KIND OF MATERIAL USED			
4556 to 5483				Frac'd in 6 stages with 333,500# of 20/40 sd and 373,000 gal. H2O (1% KCL)			
33.* PRODUCTION							
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Flowing				WELL STATUS (Producing or shut-in) Waiting on Line	
DATE OF TEST 3-4-80		HOURS TESTED 3 Hours		CHOKE SIZE 3/4" T&C		PROD'N. FOR TEST PERIOD →	
FLOW. TUBING PRESS. 1180		CASING PRESSURE 1180		CALCULATED 24-HOUR RATE →		OIL—BBL. AOF=3350	
						GAS—MCF. 1340	
						WATER—BBL. GRVITY-API (CORR.)	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)							
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 Larry D. Bragdon		TITLE Geologist				DATE 3-17-80	

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

NM000

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	TOP	
					MEAS. DEPTH	TRUE VERT. DEPTH
Pictured Cliffs	2848	2930		Fruitland	2744	
Chacra	3832	3864		Pictured Cliffs	2848	
Mesaverde	4552	5480		Chacra	3832	
				Mesaverde	4552	

