

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 ☐		2. NAME OF OPERATOR Amoco Production Company		5. LEASE DESIGNATION AND SERIAL NO. SF-047039 B	
b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other ☐		3. ADDRESS OF OPERATOR 501 Airport Drive 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 1600' FSL x 1520' FEL Section 18, T28N, R10W At top prod. interval reported below Same At total depth Same		14. PERMIT NO.		7. UNIT AGREEMENT NAME	
		DATE ISSUED		8. FARM OR LEASE NAME Day Gas Com "A"	
15. DATE SPUDDED 11-3-79		16. DATE T.D. REACHED 11-8-79		9. WELL NO.	
17. DATE COMPL. (Ready to prod.) 12-15-79		18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 5888' GL		10. FIELD AND POOL, OR WILDCAT Fulcher Kutz-Pictured Cliffs	
20. TOTAL DEPTH, MD & TVD 2200		21. PLUG, BACK T.D., MD & TVD 2169		11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA NW/4 SE/4 Section 18, T28N, R10W	
22. IF MULTIPLE COMPL., HOW MANY*		23. INTERVALS DRILLED BY ROTARY TOOLS CABLE TOOLS O-TD		12. COUNTY OR PARISH San Juan	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 1958-1996', Pictured Cliffs		25. WAS DIRECTIONAL SURVEY MADE No		13. STATE NM	
26. TYPE ELECTRIC AND OTHER LOGS RUN Induction Gamma Ray, Density Porsity, Neutron Porsity		27. WAS WELL CORED No			
28. CASING RECORD (Report all strings set in well)					
CASING SIZE		WEIGHT, LB./FT.		DEPTH SET (MD)	
8-5/8"		24.0#		327	
4-1/2"		10.5#		2199	
29. LINER RECORD					
SIZE		TOP (MD)		BOTTOM (MD)	
30. TUBING RECORD					
SIZE		DEPTH SET (MD)		PACKER SET (MD)	
2-3/8"		2000		None	
31. PERFORATION RECORD (Interval, size and number) 1958-1966', 1970-1976', 1980-1996', .4, 2 SPF total of 76 holes					
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.					
DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED			
1958-1996'		46,536 gallons frac fluid and 80,000# of sand			
33. PRODUCTION					
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Flowing			
DATE OF TEST 12-28-79		HOURS TESTED 3 hours		CHOKE SIZE .75	
FLOW. TUBING PRESS. 48		CASING PRESSURE 155		CALCULATED 24-HOUR RATE →	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) To be sold		PROD'N. FOR TEST PERIOD →		OIL—BBL. GAS—MCF. 90	
35. LIST OF ATTACHMENTS		OIL—BBL. GAS—MCF. 716		WATER—BBL. OIL GRAB SAMPLE (FORR.)	
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records		Original Signed By SIGNED E. E. SVOBODA TITLE Dist. Adm. Supvr. DATE FEB 6 '80 FARMINGTON DISTRICT 1-9-80			

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

NMOCCT

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:		38. GEOLOGIC MARKERS	
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		NAME	MEAS. DEPTH
FORMATION	TOP	NAME	MEAS. DEPTH
Pictured Cliffs	1950	None	
	2070		