

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 _____				5. LEASE DESIGNATION AND SERIAL NO. SF-078106	
b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other _____				6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
2. NAME OF OPERATOR Amoco Production Company				7. UNIT AGREEMENT NAME Gallegos Canyon Unit	
3. ADDRESS OF OPERATOR 501 Airport Drive — Farmington, NM 87401				8. FARM OR LEASE NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 1800' FSL x 835' FEL, Section 15, T28N, R12W At top prod. interval reported below Same At total depth Same				9. WELL NO. 208E	
14. PERMIT NO. _____ DATE ISSUED _____				10. FIELD AND POOL, OR WILDCAT Basin Dakota	
15. DATE SPUDDED 2-5-80				11. SEC. T., R., M. OR BLOCK AND SURVEY OR AREA NE/4, SE/4, Section 15, T28N; R12W	
16. DATE T.D. REACHED 2-14-80				12. COUNTY OR PARISH San Juan	
17. DATE COMPL. (Ready to prod.) 4-5-80				13. STATE NM	
18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 5655' GL				19. ELEV. CASINGHEAD	
20. TOTAL DEPTH, MD & TVD 6286		21. PLUG, BACK T.D., MD & TVD 6249		22. IF MULTIPLE COMPL., HOW MANY* _____	
23. INTERVALS DRILLED BY _____ ROTARY TOOLS 0-TD				CABLE TOOLS _____	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 6044-6109', 5972-5988'; Dakota				25. WAS DIRECTIONAL SURVEY MADE No	
26. TYPE ELECTRIC AND OTHER LOGS RUN Compensated Neutron Log Through Casing				27. WAS WELL CORED No	
28. CASING RECORD (Report all strings set in well)					
CASING SIZE		WEIGHT, LB./FT.		DEPTH SET (MD)	
9-5/8"		32.3#		295'	
4-1/2"		11.6#		6286'	
29. LINER RECORD					
SIZE		TOP (MD)		BOTTOM (MD)	
30. TUBING RECORD					
SIZE		DEPTH SET (MD)		PACKER SET (MD)	
2-3/8"		6151'		None	
31. PERFORATION RECORD (Interval, size and number) 6044-6109', 5972-5988', a total of 136, .375" holes.					
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.					
DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED			
5972-6109'		114,000 gallons of frac fluid			
		225,000# of 20-40 sand			
33.* PRODUCTION					
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Flowing			WELL STATUS (Producing or shut-in) SI
DATE OF TEST		HOURS TESTED		CHOKED SIZE	
4-30-80		3 hours		.750	
FLOW. TUBING PRESS.		CASING PRESSURE		CALCULATED 24-HOUR RATE	
104 PSIG		605 PSIG		1344	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) To be sold					
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 _____		TITLE Dist. Adm. Supvr.		DATE 5-14-80	

*(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

DESCRIPTION, CONTENTS, ETC.

38. GEOLOGIC MARKERS

NAME

MEAS. DEPTH

TRUE VERT. DEPTH

TOP

FORMATION

TOP

BOTTOM

93

310

1236

1510

1622

3160

4258

5126

5503

5898

5950

5990

6081

Ojo Alamo

Kirtland

Fruitland

Picture Cliff

Lewis Shale

Mesaverde

Mancos Shale

Gallup

Mancos Shale

Greenhorn

Graneros

Dakota

Sand

Shale

Sand

Sand

Shale

Sand

Shale

Shaly Sand

Shale

Limestone

Sand & Shale

Sand