

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. CESVR. ☐	Other _____
2. NAME OF OPERATOR						5. LEASE DESIGNATION AND SERIAL NO.	
Pioneer Production Corp.						NM 013365	
3. ADDRESS OF OPERATOR						6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
P O Box 208, Farmington, NM 87401						7. UNIT AGREEMENT NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*						8. FARM OR LEASE NAME	
At surface 1120' FSL - 1800' FWL						Phillips	
At top prod. interval reported below						9. WELL NO.	
At total depth						#2E	
14. PERMIT NO.						10. FIELD AND POOL, OR WILDCAT	
DATE ISSUED						Basin Dakota	
15. DATE SPOUDED						11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA	
12-2-80						Sec 22 T28N R11W	
16. DATE T.D. REACHED						12. COUNTY OR PARISH	
17. DATE COMPL. (Ready to prod.)						San Juan	
18. ELEVATIONS (DF, RKB, RT, GR, ETC.)*						13. STATE	
5635' GL						NM	
19. ELEV. CASINGHEAD						24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*	
20. TOTAL DEPTH, MD & TVD						6053-6214, Dakota	
6307'						25. WAS DIRECTIONAL SURVEY MADE	
21. PLUG, BACK T.D., MD & TVD						NO	
22. IF MULTIPLE COMPL., HOW MANY*						27. WAS WELL CORED	
single						NO	
23. INTERVALS DRILLED BY						28. CASING RECORD (Report all strings set in well)	
ROTARY TOOLS						CABLE TOOLS	
JD						AMOUNT PULLED	
29. LINER RECORD						30. TUBING RECORD	
SIZE						SIZE	
TOP (MD)						DEPTH SET (MD)	
BOTTOM (MD)						PACKER SET (MD)	
SACKS CEMENT*						None	
SCREEN (MD)						1 1/2"	
31. PERFORATION RECORD (Interval, size and number)						32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
6053, 54, 79, 80						DEPTH INTERVAL (MD)	
6133, 37, 41, 45, 47, 51, 55, 58, 60, 63,						AMOUNT AND KIND OF MATERIAL USED	
91, 93						See Sundry Notice of 1-29-81 for details.	
6205, 14						18 holes	
33.* PRODUCTION						34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)	
DATE FIRST PRODUCTION						TEST WITNESSED BY	
PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)						WELL STATUS (Producing or shut-in)	
flowing						SI	
35. LIST OF ATTACHMENTS						36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records	
DATE OF TEST						SIGNED _____	
HOURS TESTED						TITLE _____	
CHOKE SIZE						Agent	
PROD'N. FOR TEST PERIOD						DATE 3-10-81	
OIL—BBL.						THOMAS A. DUGAN	
GAS—MCF.						* (See Instructions and Spaces for Additional Data on Reverse Side)	
WATER—BBL.						R3	
GAS-OIL RATIO							
FLOW. TUBING PRESS.							
CASING PRESSURE							
CALCULATED 24-HOUR RATE							
OIL—BBL.							
GAS—MCF.							
WATER—BBL.							
OIL GRAVITY-API (CORR.)							

* (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:			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				
FORMATION	TOP	BOTTOM	NAME	MEAS. DEPTH
			TOP	TRUE VERT. DEPTH
			Fruitland	1064'
			P.C.	1558'
			Lewis	1722'
			Cliff House	3095'
			Menefee	3220'
			Pt. Lookout	3940'
			Mancos	4242'
			Gallup	5150'
			Greenhorn	5945'
			Graneros	6013'
			Dakota	6047'
			NOTE: Estimated tops	
			Ojo Alamo	420'
			Kirtland	590'