

Form 9-330
(Rev. 5-68)

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other instructions 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 RECEIVED				5. LEASE DESIGNATION AND SERIAL NO. NR 03999	
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 General Petroleum Corp.				7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR Box 234, Farmington, N. M. 87401				8. FARM OR LEASE NAME Rock Island	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 1160' fml 910' fml Sec. 22, T29N, R9W At top prod. interval reported below Same as above At total depth Same as above				9. WELL NO. 1	
14. PERMIT NO.				DATE ISSUED FEB 2 1967	
15. DATE SPUDDED 12-12-66				16. DATE T.D. REACHED 12-26-66	
17. DATE COMPL. (Ready to prod.) 12-31-66				18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 5754 GF	
20. TOTAL DEPTH, MD & TVD 6850		21. PLUG, BACK T.D., MD & TVD 6848		22. IF MULTIPLE COMPL., HOW MANY*	
23. INTERVALS DRILLED BY Surface T.D.				24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 6581 - 6846 Dakota	
25. WAS DIRECTIONAL SURVEY MADE Yes				26. TYPE ELECTRIC AND OTHER LOGS RUN Induction - Gamma Ray - Formation Density	
27. WAS WELL CORED No				28. CASING RECORD (Report all strings set in well)	
CASING SIZE		WEIGHT, LB./FT.		DEPTH SET (MD)	
16 3/4		32.40		199	
9 5/8		24.0		2633	
8 1/2		10.5		6850	
HOLE SIZE		CEMENTING RECORD		AMOUNT PULLED	
13 3/4		150 sx		-	
9 7/8		225 sx Diamix, 50 sx Class "C"		-	
6 3/4		645 cu. ft. Diacel 100 sx Class "C"		-	
29. LINER RECORD				30. TUBING RECORD	
SIZE		TOP (MD)		DEPTH SET (MD)	
		None		1 1/4	
31. PERFORATION RECORD (Interval, size and number)				32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
6581-83, 6620-22, 6658-60 6665-67, 6672-74, 6717-19 6726-26, 6760-62, 6770-72 6779-81, 6816-18, 6826-28 6836-38, 6844-46				AMOUNT AND KIND OF MATERIAL USED 80,000# sd. 93,828 Water 1.44 BPH 20 Balls	
33. PRODUCTION					
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)			WELL STATUS (Producing or shut-in)
		Flow			Shut-in
DATE OF TEST		HOURS TESTED		CHOKE SIZE	
1-17-67		3		3/4	
FLOW, TUBING PRESS.		CASING PRESSURE		CALCULATED 24-HOUR RATE	
123		1051		1605	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)				TEST WITNESSED BY	
CAOF - 2040				T. A. Dugan	
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				DATE	
				1/31/67	
TITLE				Consulting Engineer	

*(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.

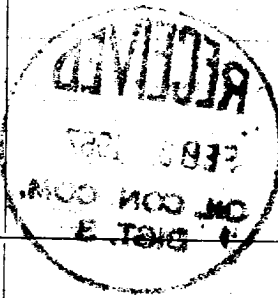
Item 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

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.						
									
			Log Tools Cliff House Henshaw Point Lookout Hencos Callup Greenhorn Graceros Dalaba 3914 4088 4508 4604 5598 6460 6521 6570						
			<table border="1"> <thead> <tr> <th>NAME</th> <th>MEAN DEPTH</th> <th>TRUE VERT. DEPTH</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> <td></td> </tr> </tbody> </table>	NAME	MEAN DEPTH	TRUE VERT. DEPTH			
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