

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. 14-20-0603-742	
b. TYPE OF COMPLETION: NEW WELL ☐ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other P/A		6. IF INDIAN, ALLOTTEE OR TRIBE NAME Navajo Tribal Land	
2. NAME OF OPERATOR Rijan Oil Company, Inc.		7. UNIT AGREEMENT NAME None	
3. ADDRESS OF OPERATOR 341 Korber Bldg., Albuquerque, New Mexico		8. FARM OR LEASE NAME Rijan Oil Company, Inc.	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 330' fsl, 170' fwl At top prod. interval reported below None At total depth 330' fsl, 170' fwl		9. WELL NO. No. 1 Rijan	
14. PERMIT NO. U.S.G.S.		DATE ISSUED 5-30-67	
15. DATE SPUNDED 9-12-67		16. DATE T.D. REACHED 9-18-67	
17. DATE COMPL. (Ready to prod.) None		18. ELEVATIONS (DF, HKB, BT, OR, ETC.)* 5037' Gr., 5043' RKB	
19. ELV. CASING HEAD None		10. FIELD AND POOL, OR WILDCAT Slickrock Extension	
20. TOTAL DEPTH, MD & TVD 790'		11. SEC. T., R., M., OR BLOCK AND SURVEY OR AREA Sec. 31 T30N-R16W	
21. PLUG, BACK P.D., MD & TVD 790'		12. COUNTY OR PARISH San Juan County	
22. IF MULTIPLE COMPL., HOW MANY* None		13. STATE N. Mexico	
23. INTERVALS DRILLED BY →		ROTARY TOOLS 0'-790'	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* None		CABLE TOOLS None	
25. WAS DIRECTIONAL SURVEY MADE Vertical Survey less than 20		26. TYPE ELECTRIC AND OTHER LOGS RUN Induction Electric log to 745'. Air drilled from 745'-790'.	
27. WAS WELL CORED No		28. CASING RECORD (Report all strings set in well)	
29. LINER RECORD		30. TUBING RECORD	
31. PERFORATION RECORD (Interval, size and number) None		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC. DEPTH INTERVAL (MD) None AMOUNT AND KIND OF MATERIAL USED None	
33.* DATE FIRST PRODUCTION None		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) None	
DATE OF TEST		HOURS TESTED	
CHOKE SIZE		PROD'N. FOR TEST PERIOD	
OIL—BBL.		GAS—MCF.	
FLOW. TUBING PRESS.		CASING PRESSURE	
CALCULATED 24-HOUR RATE		OIL—BBL.	
GAS—MCF.		WATER—BBL.	
OIL GRAVITY-API (CORR.)		TEST WITNESSED BY	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) None		35. LIST OF ATTACHMENTS 3 copies of Induction Electric Logs.	
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records			
SIGNED [Signature]		TITLE Geologist	
DATE September 21, 1967			

*(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

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	GEOLOGIC MARKERS		
				NAME	MEAS. DEPTH	TRUE VERT. DEPTH
Mancoes	0'	206'	Shale with so. bentonite ska.	Gallup	206'	206'
Gallup	206'	228'	Sandstone no shows	Sanastee	270'	270'
Gallup Saela	228'	270'	Shale	Greenhorn	658'	658'
Sanastee	270'	304'	Tight sandstone & Shale no shows	Dakota	785'	785'
Lower Mancoes	304'	658'	Shale	(1st Porosity)	790' T.D.	790' T.D.
Greenhorn	658'	726'	Limestone, bentonite & shale.			
Graneros	726'	785'	Shale			
Dakota	785'	790' T.D.	Sandstone. Show of oil and sulfur water.			