

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. NM-013642	
1b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other _____				6. IF INDIAN, ALLOTTEE OR TRIBE NAME N/A	
2. NAME OF OPERATOR Koch Exploration Company (Division of Koch Ind., Inc.)				7. UNIT AGREEMENT NAME N/A	
3. ADDRESS OF OPERATOR P.O. Box 2256; Wichita, Kansas 67201				8. FARM OR LEASE NAME Gardner	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 1030' FSL & 870' FEL At top prod. interval reported below At total depth				9. WELL NO. 4-A	
14. PERMIT NO. N/A				DATE ISSUED N/A	
15. DATE SPUNDED 9-4-80				16. DATE T.D. REACHED 9-21-80	
17. DATE COMPL. (Ready to prod.) 10-20-80				18. ELEVATIONS (DF, R&B, RT, GR, ETC.)* GR 6670'	
19. ELEV. CASINGHEAD N/A				20. TOTAL DEPTH, MD & TVD 6250	
21. PLUG, BACK T.D., MD & TVD 6035				22. IF MULTIPLE COMPL., HOW MANY* →	
23. INTERVALS DRILLED BY →				ROTARY TOOLS X	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 5520-6008' Mesa Verde (39 holes)				25. WAS DIRECTIONAL SURVEY MADE No	
26. TYPE ELECTRIC AND OTHER LOGS RUN SNP, CNL, FDC, Caliper, GR, Ind.					
28. CASING RECORD (Report all strings set in well)					
CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOE SIZE	CEMENTING RECORD	AMOUNT CULLED
10-3/4	28	212	14-3/4	275 SX	None
7	20 & 26	3542	8-3/4	475 SX	None
4-1/2	10.5	6171	6-1/4	375 SX	None
29. LINER RECORD					
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	
30. TUBING RECORD					
SIZE	DEPTH SET (MD)	PACKER SET (MD)			
2-3/8	5980	None			
31. PERFORATION RECORD (Interval, size and number) 0.38" Jet					
5620	5661	5720	5809	5896	5925
5625	5689	5725	5845	5898	5933
5627	5693	5727	5847	5905	5940
5646	5695	5735	5860	5918	5946
5653	5697	5807	5892	5920	5950
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.					
DEPTH INTERVAL (MD)			AMOUNT AND KIND OF MATERIAL USED		
5807-6008			1000 gal 15% HCl, fraced w/200,000 gal slick wtr & 20,000# 20-40 sd.		
5620-5735			750 gal 15% HCl, fraced w/106,500 gal slick wtr & 93,000# 20-40 sd.		
33.* PRODUCTION					
DATE FIRST PRODUCTION 10-20-80		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Flowing			WELL STATUS (Producing or shut-in) Shut-in
DATE OF TEST 10-30-80	HOURS TESTED 4	CHOKE SIZE 2"	PROD'N. FOR TEST PERIOD →	OIL—BBL. 0	GAS—MCF. 353
FLOV. TUBING PRESS. 50		CASING PRESSURE 725	CALCULATED 24-HOUR RATE →	OIL—BBL. 0	GAS—MCF. 2120
WATER—BBL. tr load		OIL GRAVITY-API (CORR.) N/A			
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Vented, will be sold					TEST WITNESSED BY Larry Tholkes
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 <u>Dwight L. Schmitt</u>		TITLE <u>Operations Manager</u>		DATE <u>11-4-80</u>	

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

FARMINGTON DISTRICT

BY 2

NMOCC

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	TOP	
FORMATION	TOP	BOTTOM		MEAS. DEPTH	TRUE VERT. DEPTH
			Fruitland	3233	+3448
			Pictured Cliff	3587	+3094
			Cliff House	5202	+1479
			Menefee	5611	+1070
			Point Lookout	5915	+ 766