

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.

5. LEASE DESIGNATION AND SERIAL NO.

SF 078464

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Senter

9. WELL NO.

1-M

10. FIELD AND POOL, OR WILDCAT

Point Lookout/Mesa Verde

11. SEC., T., R., M., OR BLOCK AND SURVEY
OR AREA

Sec 24 T-31-N R-13-W

12. COUNTY OR
PARISH

San Juan

13. STATE

New Mexico

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. RESVR. ☐ OTHER ☐

2. NAME OF OPERATOR

Consolidated Oil & Gas, Inc.

3. ADDRESS OF OPERATOR

PO Box 2038 Farmington New Mexico 87401

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*

At surface

At top prod. interval reported below

At total depth

14. PERMIT NO.

DATE ISSUED

15. DATE SPUDDED

11-28-80

16. DATE T.D. REACHED

12-19-79

17. DATE COMPL. (Ready to prod.)

7-18-80

18. ELEVATIONS (DF, REB, RT, GR, ETC.)*

587' GL

19. ELEV. CASINGHEAD

20. TOTAL DEPTH, MD & TVD

7050'

21. PLUG, BACK T.D., MD & TVD

7006'

22. IF MULTIPLE COMPL.,
HOW MANY*23. INTERVALS
DRILLED BY

ROTARY TOOLS

CABLE TOOLS

7050'

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*

4572' -- 4806'

25. WAS DIRECTIONAL
SURVEY MADE

No

26. TYPE ELECTRIC AND OTHER LOGS RUN

IES -- FDC -- CNL -- Ind/GR

27. WAS WELL CORED

No

28. CASING RECORD (Report all strings set in well)

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
8 5/8	23#	231'	12 1/4	200 SX	
5 1/2	15.5#	7029'	7 7/8	987 SX	
1 st DV Tool		4950'			
2 nd DV Tool		1310'			

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					1 1/4	4605'	5002'

31. PERFORATION RECORD (Interval, size and number)

4572' -- 4806'

32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
4572' - 4806'	74 800 gal. 70 qua foam
	75 000# sand.

33.* PRODUCTION

DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)				WELL STATUS (Producing or shut-in)	
7-11-80		Flow				Shut In	
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
7-11-80	3 Hrs.	3/4			168		
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)	
100	505			1344			

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)

Vented

TEST WITNESSED BY

Sonny Wilson

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

Veryl Moore

TITLE

Production Superintendent

DATE

7-29-80

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

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) 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.	38. GEOLOGIC MARKERS		
				NAME	MEAS. DEPTH	TRUE VERT. DEPTH
Pictured Cliff	2160'					
Mesa Verde	3714'					
Dakota	6708'					

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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. RESVR. ☐	Other _____
2. NAME OF OPERATOR CONSOLIDATED OIL & GAS, INC.						5. LEASE DESIGNATION AND SERIAL NO. SF 078464	
3. ADDRESS OF OPERATOR P.O. BOX 2038 FARMINGTON, NEW MEXICO 87401						6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements): At surface 845' FEL and 1495' FSL At top prod. interval reported below At total depth						7. UNIT AGREEMENT NAME	
14. PERMIT NO. _____ DATE ISSUED _____						8. FARM OR LEASE NAME SENER 1-M	
15. DATE SPUNDED 11-28-79						9. WELL NO. 1-M	
16. DATE T.D. REACHED 12-19-79						10. FIELD AND POOL, OR WILDCAT BASIN DAKOTA	
17. DATE COMPL. (Ready to prod.) 7-18-80						11. SEC. T., R., M., OR BLOCK AND SURVEY OR AREA SEC. 24 T31N R13W	
18. ELEVATIONS (DF, REB, RT, GR, ETC.)* 5874' GR						12. COUNTY OR PARISH S.J.	
19. ELEV. CASINGHEAD						13. STATE N.M.	
20. TOTAL DEPTH, MD & TVD 7050'		21. PLUG, BACK T.D., MD & TVD 7006'		22. IF MULTIPLE COMPL., HOW MANY* 2		23. INTERVALS DRILLED BY → 7050'	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 6740' - 6958'						25. WAS DIRECTIONAL SURVEY MADE NO	
26. TYPE ELECTRIC AND OTHER LOGS RUN IES/ FDC/ CNL/ IND/ GR						27. WAS WELL CORED NO	
28. CASING RECORD (Report all strings set in well)							
CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD		AMOUNT PULLED	
8-5/8	23#	231'	12-1/4	200 SX			
5-1/2	15.5#	7029'	7-7/8	315 SX			
	1st DV Tool	4950'		382 SX			
	2nd DV Tool	1310'		290 SX			
29. LINER RECORD				30. TUBING RECORD			
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					1-1/2	6793'	5003'
31. PERFORATION RECORD (Interval, size and number)				32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
6898' - 6958'				DEPTH INTERVAL (MD) AMOUNT AND KIND OF MATERIAL USED			
6740' - 6816'				6898-6958 500 g. acid - 72,000 g. X-Link gel - 59,000# sand			
				6740 - 6816 500 g. acid - 75,000 g. X link gel - 92,500 # sand			
33. PRODUCTION							
DATE FIRST PRODUCTION 7-21-80		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) FLOWING				WELL STATUS (Producing or shut-in)	
DATE OF TEST 7-21-80	HOURS TESTED 3 hrs.	CHOKE SIZE 3/4	PROD'N. FOR TEST PERIOD →	OIL—BBL. t.s.t.m.	GAS—MCF. t.s.t.m.	WATER—BBL.	GAS-OIL RATIO
FLOW. TUBING PRESS. 0,	CASING PRESSURE 0	CALCULATED 24-HOUR RATE →	OIL—BBL. t.s.t.m.	GAS—MCF. t.s.t.m.	WATER—BBL.	OIL GRAVITY-API (CORR.)	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) VENTED						TEST WITNESSED BY SONNY WILSON	
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 Veryl Moore		TITLE PROD. SUPT.		DATE 7-29-80			

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37. SUMMARY OF POROUS ZONES:				38. GEOLOGIC MARKERS	
FORMATION		TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME
PICTURE CLIFF		2160'			
MESA VERDE		3714'			
DAKOTA		6708'			

MEAS. DEPTH		TOP
		TRUE VERT. DEPTH