

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 ☐		5. LEASE DESIGNATION AND SERIAL NO. 14-20-603-2034	
b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐		6. IF INDIAN, ALLOTTEE OR TRIBE NAME Navajo	
2. NAME OF OPERATOR Solar Petroleum, Inc.		7. UNIT AGREEMENT NAME Navajo Tribe of Indians F	
3. ADDRESS OF OPERATOR 1099 18th Street #2900 Denver, Colorado 80202		8. FARM OR LEASE NAME 161	
4. LOCATION OF WELL (Report location clearly and in accordance with State requirements)* At surface 10 FFL 1330 FEL At top prod. interval reported below At total depth		9. WELL NO. Horseshoe Gallup	
14. PERMIT NO.		10. FIELD AND POOL, OR WILDCAT	
DATE ISSUED		11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA 9 T31N 17W	
12. COUNTY OR PARISH San Juan		13. STATE New Mexico	
15. DATE SPUNDED 8-26-83	16. DATE T.D. REACHED 8-30-83	17. DATE COMPL. (Ready to prod.) 12-2-83	18. ELEVATIONS (DF, REB, RT, GR, ETC.)* 52376
19. ELEV. CASINGHEAD 5237 GL	20. TOTAL DEPTH, MD & TVD 1012		
21. PLUG, BACK T.D., MD & TVD N/A	22. IF MULTIPLE COMPL., HOW MANY* ---	23. INTERVALS DRILLED BY ---	24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* OH 981-1012
25. TYPE ELECTRIC AND OTHER LOGS RUN DENSITY			26. WAS DIRECTIONAL SURVEY MADE YES
27. WAS WELL CORED Yes			
28. CASING RECORD (Report all strings set in well)			
CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE
8 5/8	25#	88.40 GL	12 1/4
5 1/2	15.5#	981 GL	7 7/8
		CEMENTING RECORD	
		80.5cf CIB 2% CaCl2 flocele	
		184.8cf Howcolite, 2% CaCl2 & flocele folwd 40.3cf Cl.B	
		same add.	
29. LINER RECORD			
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*
30. TUBING RECORD			
SIZE	DEPTH SET (MD)	PACKER SET (MD)	
2 3/8	999.05		
31. PERFORATION RECORD (Interval, size and number) Open Hole 981-1012			
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED	
981-1011		11,000 gals cross linked gel	
		17,000 #'s 20-40 SD.	
33. PRODUCTION			
DATE FIRST PRODUCTION 12-2-83		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Pump	
WELL STATUS (Producing or shut-in) Producing			
DATE OF TEST 12-25-83	HOURS TESTED 24	CHOKE SIZE	PROD'N. FOR TEST PERIOD
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL. .90
			GAS—MCF. TSTM
			WATER—BBL. 89.1
			OIL GRAVITY-API (CORR.) 39.7
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) TSTM			
TEST WITNESSED BY Joe Cantu			
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>Maria O'Keefe</u> TITLE <u>Engineering Technician</u> JAN 20 1984			

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

FARMINGTON RESOURCE AREA

BY Sm

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, 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: 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.	NAME	MEAS. DEPTH	TOP TRUE VERT. DEPTH	
HAWKES		981	CORED 982 TO 1012. SD. 184-1000'				
GALUP	981	1012.	REMAINDER SH & SILT --				

RECEIVED

JAN 23 1984

CON. DIV.

DIST.