

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 _____

b. TYPE OF COMPLETION:

NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other _____

2. NAME OF OPERATOR

Chace Oil Company, Inc.

3. ADDRESS OF OPERATOR

313 Washington, SE, Albuquerque, NM 87108

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

At surface Unit 'K' - 1850' FSL and 1850' FSL

At top prod. interval reported below

At total depth

14. PERMIT NO.

15. DATE SPUDDED 6-11-82 16. DATE T.D. REACHED 6-24-82 17. DATE COMPL. (Ready to prod.) 8-9-82 18. ELEVATIONS (DF, REB, RT, GR, ETC.)* 7216 GR 7230 KB 19. ELEV. CASINGHEAD 7217

20. TOTAL DEPTH, MD & TVD 7141 KB 21. PLUG, BACK T.D., MD & TVD 7097 KB 22. IF MULTIPLE COMPL., HOW MANY* 23. INTERVALS DRILLED BY 24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD) 25. WAS DIRECTIONAL SURVEY MADE

Tocito: 6372'-6484'

26. TYPE ELECTRIC AND OTHER LOGS RUN

Induction and Density

27. WAS WELL CORED

No

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

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	AMOUNT PULLED
8 5/8"	23 #	219' KB	9 5/8"	200 sks.
4 1/2"	11.6	7141 KB	7 7/8"	1000 sks.

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					2 3/8"	6858' KB	

31. PERFORATION RECORD (Interval, size and number)

Tocito: 6372', 6374', 6434', 6438',
6442', 6444', 6476', 6478', 6480',
6482', 6484', - 4 SPF

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
6372-6484	300 gal. 7 1/2% Hcl, 10,500# 20/40 sand, 836 bbls. H2O

33. PRODUCTION

DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)				WELL STATUS (Producing or shut-in)	
8-8-82		Pump				Producing	
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
1-16-82	24	3/4"	→	9	6	3	667
FLOW, TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)	
135	160	→	9	6	3	43	

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

Sold

TEST WITNESSED BY

Andy Birdsell - Royce McCary

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

TITLE

President

DATE

2-8-83

*(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 38, 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 38. 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: "Gacks 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.)

87. SUMMARY OF POROUS ZONES: SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF; COARD INTERVALS; AND ALL WELL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CUSHION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	TOP	TRUE VERT. DEPTH
Ojo	2179	2303	Sd - no shows			
Pict. Cliffs	2505	2645	Sd - w/ sh. strks - No shows			
Chacra	2878	3504	Sd w/ sd strks			
Cliff House	4049	4166	Sd w/ sh strks - Wet			
Pt. Lookout	4445	4710	Sdy w/ coal & sh strks			
Gallup	5660	5930	Shly w/ sd strks - No shows			
Tocito	6367	6490	Sd w/ sh strks - Oil shows			
Greenhorn	6667	6726	Limy sd - Hard			
Dakota 'A'	6755	6846	Sd w/ shale strks - Oil and gas			
Dakota 'B'	6853	6910	Sd w/ shale strks - Oil and gas			
Dakota 'D'	6920	7005	Sd w/ shale strks - Oil and gas			
Burro Canyon	7024		Sd - Wet			

88. GEOLOGIC MARKERS

NAME

TOP

MEAS. DEPTH

TRUE VERT. DEPTH