

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 AMCOB PRODUCTION COMPANY							
3. ADDRESS OF OPERATOR 501 Airport Drive, Farmington, New Mexico 87401							
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 1820' NW 1/4 & 1310' NW 1/4, Section 4, T-25-N, R-5-W At top prod. interval reported below Same At total depth Same							
14. PERMIT NO.				DATE ISSUED			
15. DATE SPUDDED 3-18-61		16. DATE T.D. REACHED 6-9-61		17. DATE COMPL. (Ready to prod.) 11-16-72		18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 6440' CL	
20. TOTAL DEPTH, MD & TVD 7464'		21. PLUG, BACK T.D., MD & TVD 7419'		22. IF MULTIPLE COMPL., HOW MANY* 2		23. INTERVALS DRILLED BY Rotary Tools	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* Mosavado 5096-5266'						25. WAS DIRECTIONAL SURVEY MADE	
26. TYPE ELECTRIC AND OTHER LOGS RUN Cement Bond Log, Gamma Ray Neutron Log						27. WAS WELL CORRED	
28. CASING RECORD (Report all strings set in well)							
CASING SIZE		WEIGHT, LB./FT.		DEPTH SET (MD)		HOLE SIZE	
8-5/8"		201		535'		12-1/4"	
4-1/2"		9.34		7464'		7-7/8"	
						Stage Tool 3005'	
29. LINER RECORD							
SIZE		TOP (MD)		BOTTOM (MD)		SACKS CEMENT*	
30. TUBING RECORD							
SIZE		DEPTH SET (MD)		PACKER SET (MD)			
2-3/8"		7035'		7035'			
31. PERFORATION RECORD (Interval, size and number)				32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
Mosavado - Perf 1 SPV 5096-5101, 5129-34, 5170-83, 5191-96, 5213-18, 5261-66				DEPTH INTERVAL (MD)			
				5340			
				5096			
				5096-5266			
				AMOUNT AND KIND OF MATERIAL USED			
				Squeezed x 75 oz.			
				Squeezed x 130 oz.			
				SPV x 34,600 gal. water & 40,000 lb. sand			
33. PRODUCTION							
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of)				WELL STATUS (Producing or shut-in)	
		Flowing				SI	
DATE OF TEST		HOURS TESTED		CHOKE SIZE		PROD'N. FOR TEST PERIOD	
11-16-72		3 hr.		.750		Oil—BBL.	
FLOW, TUBING PRESS.		CASING PRESSURE		CALCULATED 24-HOUR RATE		OIL—BBL.	
		66 psig		→		→	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) To be sold							
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		J. ARNOLD SHELTON		TITLE		Adm Engineer	
						DATE	
						December 5, 1972	

*(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.

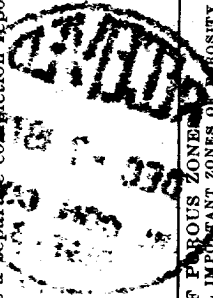
Item 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

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 PERVIOUS ZONES SHOW ALL IMPORTANT ZONES OF PROSITY AND CONTENTS THEREOF; CORED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, FLUIDS USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES			38. GEOLOGIC MARKERS		
FORMATION	TOP	BOTTOM	NAME	TOP	
				MEAS. DEPTH	TRUE VERT. DEPTH
Differenciated sands & shales	0	2902			
Pictured Cliffs sands & shales	2902	2984			
Lewis shale	2984	4560			
Gilchrist sand	4560	4630			
Interflow sands, shales & coals	4630	5090			
Point Lecheur sands & shales	5090	5288			
Montes shale	5288	6142			
Galley sands & shales	6142	6707			
Bentonite sands & shales	6707	7020			
Greenhorn sands & shales	7020	7057			
Greenhorn sands & shales	7057	7236			
Dakota sands & shales	7236	7464			