

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE\*

(See other instructions on reverse side)

Form approved.  
Budget Bureau No. 42-R355.5

## WELL COMPLETION OR RECOMPLETION REPORT AND LOG\*

1a. TYPE OF WELL:		OIL WELL <input checked="" type="checkbox"/>	GAS WELL <input type="checkbox"/>	DRY <input type="checkbox"/>	Other _____		
b. TYPE OF COMPLETION:		NEW WELL <input checked="" type="checkbox"/>	WORK OVER <input type="checkbox"/>	DEEP-EN <input type="checkbox"/>	PLUG BACK <input type="checkbox"/>	DIFF. RESVR. <input type="checkbox"/>	Other _____
2. NAME OF OPERATOR COLUMBIA							
3. ADDRESS OF OPERATOR P.O. Box 1000							
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 450' FSL + 1830' FWL At top prod. interval reported below SAME At total depth SAME.							
14. PERMIT NO.				DATE ISSUED			
15. DATE SPUDDED 1-2-79				16. DATE T.D. REACHED 1-25-79			
17. DATE COMPL. (Ready to prod.) 4-21-79				18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 6882' GR			
20. TOTAL DEPTH, MD & TVD 7732'		21. PLUG, BACK T.D., MD & TVD 7732'		22. IF MULTIPLE COMPL., HOW MANY* →		23. INTERVALS DRILLED BY ROTARY-ALL	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 6486-6736 Gallup. 7314-7530 Dakota						25. WAS DIRECTIONAL SURVEY MADE YES	
26. TYPE ELECTRIC AND OTHER LOGS RUN SP-165, GR-FDC, CB-, VDL, CCL						27. WAS WELL CORED NO.	

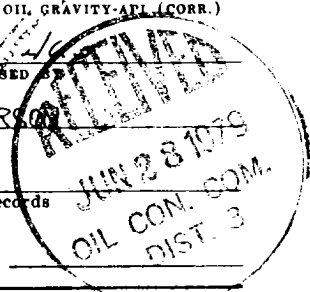
28. CASING RECORD (Report all strings set in well)					
CASINO SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
8 5/8"	24"	624'	12 1/4"	400 sk	50 sk
5 1/2"	17", 13.5"	7732'	7 7/8"	1150 sk	-

29. LINER RECORD					30. TUBING RECORD		
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					2 3/8"	7518' KB	

31. PERFORATION RECORD (Interval, size and number)				32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
6486' 89, 42, 651 3, 16, 19, 22, 25, 28, 35, 37, 55, 57, 647, 49, 67, 69 6715, 17, 30, 33, 6736. w/14SPF				DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
7314' 17, 20, 31, 34, 37, 40, 51, 54, 57, 60, 7468, 71, 74				6486-7736	30 bbls 15% HCl-NH <sub>4</sub> , 30,000 gal gelled wtr.
7512, 15, 18, 21, 24, 27, 30 w/14SPF					120,000 gal X-link gel, 380,000 # 20/40 sd.
				7314-7530	126 gals 15% HCl-NH <sub>4</sub> , 30,000 gals gelled wtr.
					90,000 gal X-link gel, 321,500 # 20/40 sd.

33.* PRODUCTION							
DATE FIRST PRODUCTION 5-3-79		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) FLWA				WELL STATUS (Producing or shut-in) PROD	
DATE OF TEST 5-3-79	HOURS TESTED 24	CHOKE SIZE NA	PROD'N. FOR TEST PERIOD →	OIL—BBL. 65	GAS—MCF. 130	WATER—BBL. 21	GAS-OIL RATIO 2000
FLOW. TUBING PRESS. NA	CASING PRESSURE NA	CALCULATED 24-HOUR RATE →	OIL—BBL. 65	GAS—MCF. 130	WATER—BBL. 21	OIL GRAVITY-API (CORR.) 46	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) vented						TEST WITNESSED BY B.E. ANDERSON	

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 W. A. Butterfield	TITLE ADMINISTRATIVE SUPERVISOR	DATE JUN 28 1979



# 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: SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF; CORED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CUSHION TEST, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES				38. GEOLOGIC MARKERS		
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH	TRUE VERT. DEPTH
54.55.	0	5440		Pictured Cliffs	3037	
"		6448		Chacra	4000	
"		6757		Cliff House	4800	
"		7245		Gallup	6448	
"		TD		Dakota	7320	