

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 ☐	GAS WELL ☒	DRY ☐	Other _____		
b. TYPE OF COMPLETION:		NEW WELL ☒	WORK OVER ☐	DEEP-EN ☐	PLUG BACK ☐	DIFF. RESER. ☐	Other _____
2. NAME OF OPERATOR Cotton Petroleum Corporation						5. LEASE DESIGNATION AND SERIAL NO. Contract #129	
3. ADDRESS OF OPERATOR 717-17th Street, Suite 2200, Denver, Colorado 80202						6. IF INDIAN, ALLOTTEE OR TRIBE NAME Jicarilla Apache	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 1850' FWL & 900' FNL At top prod. interval reported below At total depth						7. UNIT AGREEMENT NAME	
14. PERMIT NO.						DATE ISSUED 3-10-80	
12. COUNTY OR PARISH Rio Arriba						13. STATE New Mexico	
15. DATE SPUDDED 4-11-80		16. DATE T.D. REACHED 4-16-80		17. DATE COMPL. (Ready to prod.) 5-15-80		18. ELEVATIONS (DF, REB, RT, GR, ETC.)* 6869' GR	
19. ELEV. CASINGHEAD		20. TOTAL DEPTH, MD & TVD 4072'		21. PLUG, BACK T.D., MD & TVD 4041'		22. IF MULTIPLE COMPL., HOW MANY*	
23. INTERVALS DRILLED BY		24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* Chacra 3825'-3962'		25. WAS DIRECTIONAL SURVEY MADE No		26. TYPE ELECTRIC AND OTHER LOGS RUN DIL, CNL/FDC/GR	
27. WAS WELL CORED No		CASING RECORD (Report all strings set in well)					
CASINO SIZE		WEIGHT, LB./FT.		DEPTH SET (MD)		HOLE SIZE	
8 5/8"		24#		385'		12 1/4	
4 1/2"		10.5#		4072'		7 7/8	
CEMENTING RECORD		AMOUNT PULLED					
300 sxs to surface		0					
700 sxs							
LINER RECORD		TUBING RECORD					
SIZE		TOP (MD)		BOTTOM (MD)		SCREEN (MD)	
2 3/8		3900		N/A			
31. PERFORATION RECORD (Interval, size and number) 3825, 26, 28, 39, 40, 41, 49, 51, 53, 55, 62, 64, 66, 3900, 5, 13, 17, 19, 21, 30, 32, 38, 43, 45, 49, 62		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.					
DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED					
3825-3962		55,500 gal foam, 40,000# sd.					
PRODUCTION		33.*					
DATE FIRST PRODUCTION 5-15-80		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Flowing		WELL STATUS (Producing or shut-in) SI			
DATE OF TEST 5-15-80		HOURS TESTED 3		CHOKE SIZE 3/4"		PROD'N. FOR TEST PERIOD 0	
OIL—BBL. 0		GAS—MCF. 55		WATER—BBL. trace		GAS-OIL RATIO -----	
FLOW. TUBING PRESS. 23		CASING PRESSURE 136		CALCULATED 24-HOUR RATE 0		OIL GRAVITY-API (CORR.) -----	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Vented during test		TEST WITNESSED BY H. Eledge					
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		Division Production Manager		DATE 5-29-80	

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

INSTRUC 3

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 USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES				38. GEOLOGIC MARKERS		
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	TOP	
					MEAS. DEPTH	TRUE VERT. DEPTH
PC	2966'	2996'	Gas	Kirtland PC Lewis Chacra	2698'	
Chacra	3825'	3962'	Gas		2962'	
					3065'	
					3813'	