

Confidential

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 _____		5. LEASE DESIGNATION AND SERIAL NO. NM 13771	
b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other 50728-1003		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
2. NAME OF OPERATOR ABE M. KALAF + GEORGE KALAF OIL CON. CO. NV.		7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR P.O. BOX 50325, TUCSON, AZ		8. FARM OR LEASE NAME CIDO	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 475' FNL, 990' FEL SEC 16 T25N R1E At top prod. interval reported below At total depth		9. WELL NO. #2	
14. PERMIT NO.		DATE ISSUED 6-14-82	
12. COUNTY OR PARISH RIO ARriba		13. STATE N.M.	
15. DATE SPUDDED 5-30-83	16. DATE T.D. REACHED 6-15-83	17. DATE COMPL. (Ready to prod.) 8-30-83	18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 7102 GR
19. ELEV. CASINGHEAD 7102 GR	20. TOTAL DEPTH, MD & TVD 2875		
21. PLUG, BACK T.D., MD & TVD 2500		22. IF MULTIPLE COMPL., HOW MANY*	23. INTERVALS DRILLED BY AIR
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* GALLUP 1875-2500		25. WAS DIRECTIONAL SURVEY MADE NO	
26. TYPE ELECTRIC AND OTHER LOGS RUN NONE		27. WAS WELL CORED NO	
28. CASING RECORD (Report all strings set in well)			
CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE
10"	24	100'	12 1/4
7"	23	1875	9 7/8
		CEMENTING RECORD	
		59 cu ft cl B	
		192 cu ft BJ Lite	
		59 cu ft cl B	
		AMOUNT PULLED	
		NONE	
		NONE	
29. LINER RECORD			
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*
30. TUBING RECORD			
SIZE	DEPTH SET (MD)	PACKER SET (MD)	
2 3/8	2500		
31. PERFORATION RECORD (Interval, size and number)			
OPEN HOLE 1875-2500			
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED	
1875-2500		100 gal 15% ACID, 140 bbl water	
33. PRODUCTION			
DATE FIRST PRODUCTION 8/30/83		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) BAILING	
DATE OF TEST 10/24/83		WELL STATUS (Producing or shut-in) SHUT IN	
HOURS TESTED 21	CHOKE SIZE NONE	PROD'N. FOR TEST PERIOD 12.96	OIL—BBL. 2.6*
FLOW. TUBING PRESS. 0	CASING PRESSURE 0	GAS—MCF. T.S.T.M.	WATER—BBL. —
CALCULATED 24-HOUR RATE 12.96		OIL GRAVITY-API (CORR.) 36.5	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) * See sundry notice 10/27/83			
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 C.A. Oakley		TITLE Geologist	
DATE 10/27/83		DATE 10/27/83	

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

Nmocc

FARMINGTON RESOURCE AREA

BY

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 USED, 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
				Lewis shale	0	
				Cliff House ss	150	
				Menefee fm	260	
				Pt. Look out ss.	700	
				Upper Mancos	850	
				Gallup	1850	
				Middle Mancos	2135	
				Sanassee	2625	
				Lower Mancos	2725	