

Form approved.
Budget Bureau No. 42-R355.6.

(See other instructions on reverse side)

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											
GEORGE COLEMAN											
3. ADDRESS OF OPERATOR											
P. O. Box 1915, Farmington, New Mexico 87401											
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)											
At surface 1650' FSL - 1180' FEL											
At top prod. interval reported below											
At total depth											
14. PERMIT NO. DATE ISSUED											
12-27-74											
15. DATE SPUDDED 16. DATE T.D. REACHED 17. DATE COMPL. (Ready to prod.) 18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 19. ELEV. CASINGHEAD											
6-6-74 6-16-74 2-21-1975 6776' 6777'											
20. TOTAL DEPTH, MD & TVD 21. PLUG, BACK T.D., MD & TVD 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											
6231' 5180' 0-6231' - 5146' to 5152' Yes											
26. TYPE ELECTRIC AND OTHER LOGS RUN 27. WAS WELL CORED											
IES, CNL, Sonic/GR. Yes											
28. CASING RECORD (Report all strings set in well)											
Casing Size Weight, lb./ft. Depth Set (MD) Hole Size Cementing Record Amount Pulled											
8 5/8" 24 # 620' 12 1/4" 300 Sacks											
5 1/2" 15.5 # 5180' 7 7/8" 550 Sacks											
29. LINER RECORD 30. TUBING RECORD											
Size Top (MD) Bottom (MD) Sacks Cement* Screen (MD) Size Depth Set (MD) Packer Set (MD)											
31. PERFORATION RECORD (Interval, size and number) 32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.											
5146' - 5152' - W2JSPF											
33.* PRODUCTION											
Date First Production Production Method (Flowing, gas lift, pumping—size and type of pump) Well Status (Producing or shut-in)											
2-20-75 Flowing casing Shut-in											
Date of Test Hours Tested Choke Size Prod'n. for Test Period Oil—BBL. Gas—MCF. Water—BBL. Gas-Oil Ratio											
2-20-75 24 1/2" 2 222 0 111 to 1											
Flow. Tubing Press. Casing Pressure Calculated 24-Hour Rate Oil—BBL. Gas—MCF. Water—BBL. Oil Gravity-API (Corr.)											
Pumping 28# 2 222 0											
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) TEST WITNESSED BY											
Vented W. M. Gallaway											
35. LIST OF ATTACHMENTS											
Test.											
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records											
SIGNED George E. Coleman TITLE Operator DATE 3-26-1975											

***(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 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
OJO Alamo	700	780	sandstone, water bearing by log.	Fruitland Coal	1500	
Pictured Cliffs	1520	1605	sandstone, water bearing by log.	Pictured Cliffs	1520	
Cliffhouse	2257	2334	sandstone, water bearing by log.	Top Mesaverde	2257	
Point Lookout	4000	4135	sandstone, water bearing by log.	(Cliffhouse)		
Gallup	5140	5158	sandstone, gas bearing, probably depleted	Point Lookout	4000	
	5200	5250	sandstone, water bearing by log.	Hancos	4135	
Gallup	6064	6233	sandstone, water bearing by log.	Gallup (Skelly Zone)	4980	
Dakota		Log TD		Greenhorn	5890	
				Dakota	5985	