

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 Caulkins Oil Company						5. LEASE DESIGNATION AND SERIAL NO. N M 03553	
3. ADDRESS OF OPERATOR Post Office Box 780, Farmington, New Mexico						6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 790 from South and 1650 from East At top prod. interval reported below Same At total depth Same						7. UNIT AGREEMENT NAME	
14. PERMIT NO.						DATE ISSUED	
15. DATE SPUDDED- 8-22-74						19. ELEV. CASINGHEAD 6694	
16. DATE T.D. REACHED- 8-28-74						10. FIELD AND POOL, OR WILDCAT South Blanco	
17. DATE COMPL. (Ready to prod.) 11-2-74						11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA Sec. 21 26N 6W	
18. ELEVATIONS (DF, RSB, RT, GR, ETC.)* 6707 DF						12. COUNTY OR PARISH Rio Arriba	
20. TOTAL DEPTH, MD & TVD 4000'						13. STATE New Mexico	
21. PLUG, BACK T.D., MD & TVD 4000'						23. INTERVALS DRILLED BY ROTARY TOOLS 0-4000'	
22. IF MULTIPLE COMPL., HOW MANY* (2)						CABLE TOOLS	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 3002-3022 Pictured Cliffs						25. WAS DIRECTIONAL SURVEY MADE No	
26. TYPE ELECTRIC AND OTHER LOGS RUN Induction						27. WAS WELL CORED No	
3. CASING RECORD (Report all strings set in well)							
CASING SIZE		WEIGHT, LB./FT.		DEPTH SET (MD)		HOLE SIZE	
8 5/8"		20#		140'		12 1/4"	
4 1/2"		12.6#		4000'		7 7/8"	
29. LINER RECORD							
SIZE		TOP (MD)		BOTTOM (MD)		SACKS CEMENT*	
30. TUBING RECORD							
SIZE		DEPTH SET (MD)		PACKER SET (MD)			
1"		2935		3812			
31. PERFORATION RECORD (Interval, size and number)							
3002-3022 40 holes .41 dia.							
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.							
DEPTH INTERVAL (MD)				AMOUNT AND KIND OF MATERIAL USED			
3002-3022				40,000# 20-40 sand			
				and 1010 bbls. water			
33.* PRODUCTION							
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)				WELL STATUS (Producing or shut-in)	
11-12-74		Flow				Shut in	
DATE OF TEST		HOURS TESTED		CHOKE SIZE		PROD'N. FOR TEST PERIOD	
11-12-74		3 Hrs.		3/4"		OIL—BBL. 146	
FLOW. TUBING PRESS.		CASING PRESSURE		CALCULATED 24-HOUR RATE		GAS—MCF. 1167	
71		490		→		WATER—BBL.	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)						TEST WITNESSED BY	
Vented							
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				DATE	
Charles E. Wiggins		Superintendent				12-5-74	

*(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.)

4 1/2" casing cemented thru shoe with 15 sacks

33 International Packer 33 Q 33121

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
Alamo	2320	2448	Water sand			
Pictured Cliffs	3010	3024	Gas sand			
Chacra	3848	3966	Gas sand			
Deviation Test		(Degrees)				
180		3/4				
680		1 1/2				
1332		2 1/4				
1872		2 1/2				
2515		3				
3342		2 3/4				
3762		1 1/4				
4000		1/4				