

*** (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 12: 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.)

TD 7549' Ran 7" 23# & 26# J-55 ST&G casing to 7549' and cemented as follows: 1st Stage thru stage shoe with 375 sacks 50-50 Poz, 6% Gel, and 12 1/2# Gilsonite per sack followed by 150 sacks Neat. 2nd Stage thru stage tool set at 5507' with 320 sacks 50-50 Poz, 6% Gel and 12 1/2# Gilsonite per sack followed by 150 sacks Neat. 3rd Stage thru stage tool set at 3996' with 950 sacks 50-50 Poz, 6% Gel, and 12 1/2# Gilsonite per sack. Plug down 12:30 PM 5-29-80

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

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	GEOLOGIC MARKERS		
				NAME	MEAS. DEPTH	TRUE VERT. DEPTH
Alamo	2504	2596		Alamo	2504	2504
Pictured Cliffs	3061	3190		Pictured Cliffs	3061	3061
Chacra	3966	4100		Chacra	3966	3966
Mesa Verde	4735	5490		Mesa Verde	4735	4735
Dakota	7278	7524		Dakota	7278	7278
Hole Deviation	(Degrees)		(Degrees)			
939	1/4	6420	1			
1080	1/4	6933	1			
1561	1/4	7102	1			
2070	1/2	7549	1			
2593	1/2					
3092	1/2					
3592	1/2					
4089	1/2					
4589	3/4					
4895	3/4					
5395	3/4					
5901	3/4					

**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. RESVR. ☐	Other ☐
2. NAME OF OPERATOR Caulkins Oil Company					
3. ADDRESS OF OPERATOR P.O. Box 780 Farmington, New Mexico					
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 960' F/N & 850' F/W					
At top prod. interval reported below Same					
At total depth Same					
14. PERMIT NO.			DATE ISSUED		
15. DATE SPURRED 5-7-80					
16. DATE T.D. REACHED 5-28-80		17. DATE COMPL. (Ready to prod.) 10-23-80		18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 6615 GR	
19. ELEV. CASINGHEAD 6615					
20. TOTAL DEPTH, MD & TVD 7549		21. PLUG, BACK T.D., MD & TVD 7549		22. IF MULTIPLE COMPL., HOW MANY* Two	
23. INTERVALS DRILLED BY		ROTARY TOOLS		CABLE TOOLS	
0-7549					
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 7282-7520 Dakota					
25. WAS DIRECTIONAL SURVEY MADE					
26. TYPE ELECTRIC AND OTHER LOGS RUN E S Induction					

28. CASING RECORD (Report all strings set in well)					
CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
10 3/4"	32.75#	424	13 3/4"	250	None
7"	26 & 23#	7549	8 3/4"	1945	None

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"	7247	5520

31. PERFORATION RECORD (Interval, size and number)				32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
7498 - 7520	.42	22		DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
7416 - 7438	.42	22		7498 - 7520	60,000# 20-40 sand and
7282 - 7288	.42	6			1,234 barrels water
7294 - 7300	.42	6		7416 - 7438	60000# 20-40 sand & 1238 bbls water
7310 - 7316	.42	6		7282 - 7316	60000# 20-40 sand & 1237 bbls water

33.* PRODUCTION							
DATE FIRST PRODUCTION 10-30-80		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Flowing				WELL STATUS (Producing or shut-in) Shut In	
DATE OF TEST 10-30-80	HOURS TESTED 3	CHOKE SIZE 3/4"	PROD'N. FOR TEST PERIOD →	OIL—BBL. 	GAS—MCF. 235	WATER—BBL. 	GAS-OIL RATIO
FLOW. TUBING PRESS. 121	CASING PRESSURE PKR	CALCULATED 24-HOUR RATE →	OIL—BBL. 	GAS—MCF. 1883	WATER—BBL. 	OIL GRAVITY-API (CORR.) 	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Vented						TEST WITNESSED BY 	

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

Charles W. [Signature]

TITLE

Superintendent

DATE

11-1-80

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

NMOC

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5395	3/4					
5901	3/4					