

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 Amoco Production Company							
3. ADDRESS OF OPERATOR 501 Airport Drive, Farmington, NM 87401							
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 1810' FNL x 1520' FWL At top prod. interval reported below Same At total depth Same							
14. PERMIT NO.				DATE ISSUED			
15. DATE SPUDDED 12-8-80							
16. DATE T.D. REACHED 12-17-80							
17. DATE COMPL. (Ready to prod.) 4-21-81							
18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 6583' GL							
20. TOTAL DEPTH, MD & TVD 5395'		21. PLUG, BACK T.D., MD & TVD 5311'		22. IF MULTIPLE COMPL., HOW MANY* 2		23. INTERVALS DRILLED BY 0-TD	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 3751-3785, and 3849-3862 - Otero Chacra							25. WAS DIRECTIONAL SURVEY MADE No
26. TYPE ELECTRIC AND OTHER LOGS RUN GR; SP; DIL; Compensated Neutron; TDT							27. WAS WELL CORED No
28. CASING RECORD (Report all strings set in well)							
CASING SIZE		WEIGHT, LB./FT.		DEPTH SET (MD)		HOLE SIZE	
8 5/8"		24#		302'		12 1/4"	
5 1/2"		14#		5391'		7 7/8"	
29. LINER RECORD							
SIZE		TOP (MD)		BOTTOM (MD)		SACKS CEMENT*	
30. TUBING RECORD							
SIZE		DEPTH SET (MD)		PACKER SET (MD)			
1 1/4"		3874'					
31. PERFORATION RECORD (Interval, size and number) 3751-3785 and 3849-3862, with 2 spf, a total of 94, .38" holes.							
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.							
DEPTH INTERVAL (MD)				AMOUNT AND KIND OF MATERIAL USED			
3751-3862				80,000 gallons of foam and 123,500 pounds of 10-20 sand.			
33.* PRODUCTION							
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Flowing				WELL STATUS (Producing or shut-in) Shut-In	
DATE OF TEST		HOURS TESTED		CHOKE SIZE		PROD'N. FOR TEST PERIOD	
5-29-81		3 Hrs.		.75"		→	
FLOW. TUBING PRESS.		CASING PRESSURE		CALCULATED 24-HOUR RATE		OIL—BBL.	
165 psig		605 psig		→		2139	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) To be sold.							
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	
L. E. J.		Dist. Admin. Supvr.				JUL 6 1981	

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

NMOC

FARMINGTON DISTRICT

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
Ojo Alamo	2312	2490				
Kirtland	2490	2680				
Fruitland	2680	2870				
Pictured Cliff	2870	2924				
Chacra	3748	3810				
Cliffhouse	4532	4594				
Menefee	4594	5054				
Point Lookout	5054	5250				