

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									
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 1000' from the West and 990' from the South									
At top prod. interval reported below		Same									
At total depth		Same									
14. PERMIT NO.		DATE ISSUED									
15. DATE SPUDDED		16. DATE T.D. REACHED		17. DATE COMPL. (Ready to prod.)		18. ELEVATIONS (DF, RKB, RT, GR, ETC.)*		19. ELEV. CASINGHEAD			
5-5-77		5-10-77		5-19-77		6602 Gr.		6602			
20. TOTAL DEPTH, MD & TVD		21. PLUG, BACK T.D., MD & TVD		22. IF MULTIPLE COMPL., HOW MANY*		23. INTERVALS DRILLED BY		ROTARY TOOLS			
3290		3271				→		0-3290			
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*		3160 to 3236 Pictured Cliffs					25. WAS DIRECTIONAL SURVEY MADE		No		
26. TYPE ELECTRIC AND OTHER LOGS RUN		Induction Electric					27. WAS WELL CORED		No		
28. CASING RECORD (Report all strings set in well)											
CASINO SIZE		WEIGHT, LB./FT.		DEPTH SET (MD)		HOLE SIZE		CEMENTING RECORD		AMOUNT PULLED	
8 5/8"		24#		104		12 1/4"		100 Sacks		None	
4 1/2"		10.5#		3271		7 7/8"		544 Sacks		None	
29. LINER RECORD										30. TUBING RECORD	
SIZE		TOP (MD)		BOTTOM (MD)		SACKS CEMENT*		SCREEN (MD)		SIZE	
										1"	
										3113	
31. PERFORATION RECORD (Interval, size and number)										32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
3160-3190		.42		60 holes		DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED			
3220-3236		.42		32 holes		3160-3236		Fraced with 70,000#			
								20-40 sand and 1740 bbls			
								water			
33. PRODUCTION											
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)									
6-2-77		Flowing									
DATE OF TEST		HOURS TESTED		CHOKE SIZE		PROD'N. FOR TEST PERIOD		OIL—BBL.		GAS—MCF.	
6-2-77		3 hrs.		3/4		→				155	
FLOW. TUBING PRESS.		CASING PRESSURE		CALCULATED 24-HOUR RATE		OIL—BBL.		GAS—MCF.		WATER—BBL.	
76		665		→				1246			
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		Charles E. Wagoner						TITLE		Superintendent	
										DATE	
										6-4-77	

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

This acreage dedicated to Gas Company of New Mexico

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.)

Cemented new 4 1/2" 10,5# H-40 casing at 3271' with 444 sacks 65-35-12 Gel cement followed by 100 sacks Neat. Ran temperature survey and found cement top at 300'.

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.
Alamo	2662	2676	Water Sand
Pictured Cliffs	3160	3236	Gas Sand
Hole deviations Tests (Degrees)			
	104'		1/2
	648		1
	750		1
	1250		1
	1860		1 1/4
	2283		1 1/2
	2526		1 1/2
	2688		1 1/2
	2866		1 3/4
	3260		1 3/4

38.

GEOLOGIC MARKERS

NAME	TOP	
	MEAS. DEPTH	TRUE VERT. DEPTH
Alamo	2662	2662
Pictured Cliffs	3160	3160