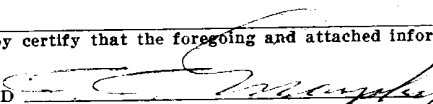


UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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 Re-entry of P & A Wildcat		5. LEASE DESIGNATION AND SERIAL NO. Tract 714-20-0003-027					
b. TYPE OF COMPLETION: NEW WELL ☐ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other _____		6. INDIAN ALLOTTEE OR TRIBE NAME Navajo					
2. NAME OF OPERATOR Amurda Petroleum Corporation		7. UNIT AGREEMENT NAME					
3. ADDRESS OF OPERATOR P. O. Box 1469, Durango, Colorado		8. NAME OF LEASE Navajo Tract 64					
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements): At surface N 1/4 NW 1/4, Sec. 20, T-27N., R-17W., San Juan County, New Mexico At top prod. interval reported below At total depth		9. WELL NO. 1					
14. PERMIT NO.		DATE ISSUED					
10. WELL AND POOL, OR WILDCAT Wildcat		11. SEC., T., R., M., OR BLOCK AND SURVEY Sec. 20, T-27N., R-17W., South Table Mesa Area					
12. COUNTY OR DISTRICT San Juan		13. STATE New Mexico					
15. DATE SPUDDED	16. DATE T.D. REACHED	17. DATE COMPL. (Ready to prod.)	18. ELEVATIONS (DF, REB, RT, GR, ETC.)*	19. ELEV. CASINGHEAD			
20. TOTAL DEPTH, MD & TVD	21. PLUG, BACK T.D., MD & TVD	22. IF MULTIPLE COMPL., HOW MANY*	23. INTERVALS DRILLED BY →	ROTARY TOOLS CABLE TOOLS			
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*				25. WAS DIRECTIONAL SURVEY MADE			
26. TYPE ELECTRIC AND OTHER LOGS RUN				27. WAS WELL CORED			
28. CASING RECORD (Report all strings set in well)							
CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED		
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.		
					DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED
33.* PRODUCTION							
DATE FIRST PRODUCTION 3/19/68		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Flowing - Perforated Interval 7000' - 7104'				WELL STATUS (Producing or Shut-in) Shut-in	
DATE OF TEST 3/19/68	HOURS TESTED 3-1/4	CHOKE SIZE 32/64"	PROD'N. FOR TEST PERIOD →	OIL—BBL. -	GAS—MCF. 2,031	WATER—BBL. -	GAS-OIL RATIO -
TUBING PRESS. 2300	CHOKING PRESSURE 700-750	CALCULATED 24-HOUR RATE →	OIL—BBL. -	GAS—MCF. 2,031	WATER—BBL. -	OIL GRAVITY-API (CORR.) -	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Shut-in no market to date.						TEST WITNESSED BY D. F. Purce	
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 Field Clerk		DATE 3-27-68			

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

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 38, 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 38. 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.)

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