

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

Sunset International Petroleum Corp.

3. ADDRESS OF OPERATOR

201 Wall Bldg. Midland, Texas

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*

At surface 800 Ft. from N.L. 1840 Ft from E.L.

At top prod. interval reported below 6394

At total depth 6576

14. PERMIT NO.

DATE ISSUED

12. COUNTY OR
PARISH
San Juan13. STATE
N.M.

15. DATE SPUDDED

3-3-66

16. DATE T.D. REACHED

3-20-66

17. DATE COMPL. (Ready to prod.)

3-26-66

18. ELEVATIONS (DF, RKB, RT, GR, ETC.)*

6003 GR

19. ELEV. CASINGHEAD

6003

20. TOTAL DEPTH, MD & TVD

6576

21. PLUG, BACK T.D., MD & TVD

6565

22. IF MULTIPLE COMPL.,
HOW MANY*23. INTERVALS
DRILLED BY

ROTARY TOOLS

6576

CABLE TOOLS

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*

6394 to 6552

25. WAS DIRECTIONAL
SURVEY MADE
yes

26. TYPE ELECTRIC AND OTHER LOGS RUN

Schlumberger

27. WAS WELL CORED

no

28. CASING RECORD (Report all strings set in well)

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
9 5/8	32	321	11"	150 sks. cir. to surface	
5 1/2	15.5	6576	7 7/8	1425 sks. cir. to surface	

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)

30. TUBING RECORD

SIZE	DEPTH SET (MD)
2 3/8	6388

31. PERFORATION RECORD (Interval, size and number)

6550-52 6536-44 6526-33 6520-24

6514-18 6454-85 6408-16 6394-98

32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
6514- 6552	25,000 lbs 20-40 30,260 gal W
6485 - 6454	40,000 lbs 20-40 10,000 lbs 10-20
	49,770 Gal. Water
6408 - 6394	17,500 lbs 20-40 22,670 Gal. W

33.* PRODUCTION

DATE FIRST PRODUCTION

PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)

WELL STATUS (Producing or
shut-in)

DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
3-29-66	3	3/4	→	-	3734		
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	TEST WINDING	DATE
293	861	→		3,432			

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)

TEST WINDING
APR 25 1966

35. LIST OF ATTACHMENTS

U. S. GEOLOGICAL SURVEY
FARMINGTON, N. M.

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records

SIGNED

[Signature]

TITLE

Prod* Superintendent

DATE

4-19-66

*(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 identifying, for each additional interval to be separately produced, showing the additional data pertinent to such interval.

Item 29: "Seals 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
Flint Hills	1995					
Mosburne	3605					
Wolff	2500					
Wolff	6285					
Wolff	6409					
Dale	6455					