

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 _____		7. UNIT AGREEMENT NAME _____	
b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other _____		8. FARM OR LEASE NAME Florence	
2. NAME OF OPERATOR Tenneco Oil Company		9. WELL NO. 68	
3. ADDRESS OF OPERATOR P. O. Box 1714, Durango, Colorado		10. FIELD AND POOL, OR WILDCAT Basin Dakota	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements) At surface 1190 FSL 2510 FEL At top prod. interval reported below At total depth Same		11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA Sec. 20, T27N - R6W	
14. PERMIT NO. _____ DATE ISSUED _____		12. COUNTY OR PARISH San Juan	
15. DATE SPUNDED 6/14/66		13. STATE New Mexico	
16. DATE T.D. REACHED 7/3/66		18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 6744' Cr.	
17. DATE COMPL. (Ready to prod.) 8/5/66		19. ELEV. CASINGHEAD 6744	
20. TOTAL DEPTH, MD & TVD 7460		21. PLUG, BACK T.D., MD & TVD 7410	
22. IF MULTIPLE COMPL., HOW MANY* _____		23. INTERVALS DRILLED BY _____	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 7212 - 7390 Dakota		25. WAS DIRECTIONAL SURVEY MADE Yes	
26. TYPE ELECTRIC AND OTHER LOGS RUN IES and Density		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	1004	12 1/4
4 1/2"	10.5 & 11.6	7460	7 7/8
CEMENTING RECORD		AMOUNT PULLED	
350 sx		None	
1st stage 150 sx			
2nd stage 200 sx			
3rd stage 550 sx			
29. LINER RECORD			
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*
30. TUBING RECORD			
SIZE	DEPTH SET (MD)	PACKER SET (MD)	
2 3/8	7345		
31. PERFORATION RECORD (Interval, size and number)			
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED	
7380 - 7373		30000 # ad, 48390 gal. vtr.	
7281 - 7285		36000 gal. vtr, 30000# ad, (500	
7212 - 7222		30000# ad, 34000 gal vtr, (gals	
		500 gals. acid (acid	
33. PRODUCTION			
DATE FIRST PRODUCTION Shut in		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Flowing	
WELL STATUS (Producing or shut-in) Shut in		GAS-OIL RATIO	
DATE OF TEST 8/5/66	HOURS TESTED 3	CHOKE SIZE 3/4"	PROD'N. FOR TEST PERIOD 2839
FLOW. TUBING PRESS. 200	CASING PRESSURE 552	CALCULATED 24-HOUR RATE 2839	GAS GRAVITY-API (CORR.) 56
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)			
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 Harold C. Nichols		TITLE Senior Production Clerk	
DATE 9/14/66			

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

DISTRIBUTION:
5-USGS, 1-Continental, 1-File

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, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES			38. GEOLOGIC MARKERS			
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH	TRUE VERT. DEPTH
Pictured Cliffs Hosentwende Dakota	2795	2830	Sand - Gas			
	4720	5055	Sand - Gas			
	7153	7504	Sand - Gas			