Form 9-330 (Kev. 5-63) SUBMIT IN DUPLICATE UNITED STATES Form approved Budget Bureau (See other in-structions on reverse side) DEPARTMENT OF THE INTERIOR 5. LEASE DESIGNATION AND SERIAL NO. GEOLOGICAL SURVEY SF-077123 - NM-04208 6. IF INDIAN, ALLOTTEE OR THEE NAME WELL COMPLETION OR RECOMPLETION REPORT AND LOG* ia. TYPE OF WELL: WELL GAS X DRY 7 UNIT AGREEMENT NAME b. TYPE OF COMPLETION: NEW WORK OVER DEEP-PLUG BACK S. FARM OR LEASE NAME 2. NAME OF OPERATOR Warren Com. Tenneco Oil Company WELL NO 5 1937 JUL P. O. Box 1714, Durango, Colorado 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*

1000 FMI. 1585 FEL U. S. GEOLOGICAL SURVEY 10 FIELD AND POOL OR WILD AT Basin Dakota 11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA At top prod. interval reported below A: total depth Sec 14, T-28-N, R-9-W 12. COUNTY OR PARISH San Juan New Mexico 15. DATE SPUDDED 16. DATE T.D. REACHED COMPL. (Ready to prod.) 19. ELEV. CASINGHEAD 18. ELEVATIONS (DF. RKB, RT. GR. ETC.)* 5/5/67 6/15/67 5/13/67 6106 Gr. 6106 7032 ROTARY TOOLS 22. IF MULTIPLE HOW MANY* 20. TOTAL 23. INTERVALS DRILLED BY 7020 0 - 70320 24. PRODUCING INTERVAL(S), OF THIS COMPLETION-TOP, BOTTOM, NAME (MD AND TVD)* WAS DIRECTIONAL SURVEY MADE 6314-7004 Yes 27. was well cored 26. TYPE ELECTRIC AND OTHER LOGS RUN Induction, Gamma Ray, Density, Temp. No CASING RECORD (Report all strings set in 10ell) CASING SIZE WEIGHT, LB./FT. DEPTH SET (MD) HOLE SIZE CEMENTING RECORD AMOUNT PULLED 10-3/4 32.75# 301 12-1/4 300 sx None 2637 7-5/8 24# 9-7/8 315 sx 4-1/2 10.5# 7030 6 - 3/4300 sx 29. LINER RECORD 30. TUBING RECORD SIZE TOP (MD) BOTTOM (MD) SACKS CEMENT* SCREEN (MD) DEPTH SET (MD) PACKER SET (MD) SIZE None 2-3/8 7006 None 31. PERFORATION 7004-07 (Interval, size an 6922 6814-18 ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC. DEPTH INTERVAL (MD) AMOUNT AND KIND OF MATERIAL USED 6978-91 6904 60,000# sd, 3500# beacs 7004-6952 6963-73 6902 70,000 gals wtr. 60,000# sd, 3500# 6952-53 6891 6925-6814 beacs 6925 6846-60 80,000 gals wtr. 33.* PRODUCTION PRODUCTION METHOD (Flowing, gas lift, pumping-size and type of pump) ELL STATUS (Producing or shut-in) Flowing SI DATE OF TEST HOURS TESTED CHOKE SIZE PROD'N. FOR TEST PERIOD OLL-BBT. 6/15 3/4 CASING PRESSURE OIL-BBL. GAS-MCF. GRAVITY-API (CORR.) CALCULATED 24-HOUR RATE 1726 5824 34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) DIL COM. OOM. 35. LIST OF ATTACHMENTS Cist. 3 36. I hereby certify that the foregoing and attached information is complete and correct as determined m all avails SIGNED TITLE July 3, 1967 DATE __ Wagner

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

5 USGS

1 Cont.

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 (\$), Anothom (\$) and name (\$) (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": At a check 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 course ion report on this form for each interval to be separately produced. (See instruction for items 22 and 24 above.)

FORMATION	4125	5000	DESCRIPTION, CONTENTS, ETC.	NAME	TOP	
Mesaverde			Sand & Shale (Not tested)		MEAS. DEPTH	TRUE VERT. DEPT
Jakota	6795	7010	Sand & Shale (Gas-Dry)	M esav erde Gallup Greenhorn Dakota	4125 5890 6658 6765	
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