

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE

(See other In-
structions on
reverse side)Form approved
Budget Bureau No. 42 R3-55

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL: OIL WELL ☐ GAS WELL ☒ DRY ☐ Other _____		5. LEASE DESIGNATION AND SERIAL NO. NM - 03604	
b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. LVSBR. ☐ Other _____		6. IF INDIAN, ALIQUOT OR TRUST NAME --	
2. NAME OF OPERATOR Atlantic Richfield Company		7. UNIT AGREEMENT NAME --	
3. ADDRESS OF OPERATOR 501 Lincoln Tower Bldg., 1860 Lincoln St., Denver, Colo. 80295		8. FARM OR LEASE NAME Marion W. Federal Comm.	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface Unit I - NE 1/4 - 1500' f/South & 990' f/East lines Sec. 24 At top prod. interval reported below Approx. same At total depth Approx. same		9. WELL NO. 6-A	
14. PERMIT NO. Mr. McGrath		10. FIELD AND POOL, OR WILDCAT Blanco Mesaverde & Chacra	
DATE ISSUED 5-2-77		11. SECTION, R., M., OR BLOCK AND SURVEY OR AREA Section 24-27N-6W	
15. DATE SPUDDED 8/24/77		12. COUNTY OR PARISH San Juan	
16. DATE W. REACHED 9/4/77		13. STATE New Mexico	
17. DATE COMPLE. (Ready to prod.) 12/03/77		18. ELEVATIONS (DP, RKB, ET, GR, ETC.)* 6571' GR, 6584' KB	
19. ELEV. CASING HEAD 6571' GR		20. TOTAL DEPTH, MD & TVD 5375' MD	
21. PLUG, EACH T.D., MD & TVD 5321' MD		22. IF MULTIPLE COMPLE., HOW MANY* Two	
23. INTERVALS DRILLED BY --		24. PROPPING INTERVAL(S) OF THIS COMPLETION--TOP, BOTTOM, NAME (MD AND TVD)* Mesaverde - Top 5190' MD Bottom 5304' MD	
25. WAS DIRECTIONAL SURVEY MADE No		26. TYPE ELECTRIC AND OTHER LOGS RUN DIFL, CBI/CN, CR, CBL	
27. WAS WELL CORED No		28. CASING RECORD (Report all strings set in well)	
29. LINER RECORD		30. TUBING RECORD	
31. PRODUCTION RECORD (Interval, size and number)		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
33. PRODUCTION		34. DISPOSITION OF GAS (Selling, used for fuel, vented, etc.)	
35. TEST OR ATTACHMENT		36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records	

SIGNED: [Signature] TITLE: Operations Info. Ass't. DATE: 1-5-78.

*(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 32, below regarding separate reports for separate completions.

If not filed prior to the time this summary report is submitted, copies of all currently available logs (drillers' logs, logs, 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 filed on this form, see Item 25.

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 10: Locations which elevation is used as reference (where not otherwise shown) for depth measurements given in other spaces on this form and in any other logs.

Items 22 and 24: If this well is completed for a future production flow more than one interval zone (multiple completion), so state in Item 22, and in Item 24 show the producing bottom hole or intervals, top(s), bottom(s) and names(s). (If any) for only the interval reported in Item 22. Submit a separate report (page) on this form, separately identified, for each additional interval to be separately produced, showing the additional data pertinent to such interval.

Item 23: *See also General.* Attached supplemental reports 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.)

27. SUMMARY OF FORMER ZONES:				38. GEOLOGIC MARKERS	
SHOW ALL IMPERMEANT 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.	NAME	MEAS. DEPTH TRUE VERT. DEPTH
				Pictured Cliffs	2823'
				Chacota	3028'
				Macroronde:	4504'
				Cliff House	4629'
				Nerefee	5116'
				Point Lookout	5310'
				Manor	