

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE\*

(See other instructions on reverse side)

Form approved.  
Budget Bureau No. 42-R355.5.

5. LEASE DESIGNATION AND SERIAL NO.

NM - 03549

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Bolack

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Dakota

11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA

12. COUNTY OR PARISH  
San Juan NM  
13. STATE  
NM

15. DATE SPUNDED 4-1-78

16. DATE T.D. REACHED 4-28-78

17. DATE COMPL. (Ready to prod.) 5-28-78

18. ELEVATIONS (DF, BEB, RT, GR, ETC.)\* 5954' GL

19. ELEV. CASINGHEAD

20. TOTAL DEPTH, MD & TVD 6815

21. PLUG, BACK T.D., MD & TVD 6800

22. IF MULTIPLE COMPL., HOW MANY\*

23. INTERVALS DRILLED BY

ROTARY TOOLS

CABLE TOOLS

0-TD

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

Dakota 6642-6797

25. WAS DIRECTIONAL SURVEY MADE

yes

26. TYPE ELECTRIC AND OTHER LOGS RUN

GR, DNL, CSG INSP Log

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"	36	307	13-3/4 & 12-1/4	275 SX	None
7"	23	2599	8-3/4	450 SX	None
4 1/2"	10.5	6815	6 1/2	325 SX	None

29. LINER RECORD

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

30. TUBING RECORD

SIZE	DEPTH SET (MD)	PACKER SET (MD)
2-3/8	6635	6635

31. PERFORATION RECORD (Interval, size and number)

6642-6660 W/ 1 JSPF  
6737-47 W/ 2 JSPF

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

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
6642-6797	Acid w/ 2000 GAL 15% Acid
6642-6797	Frac'd w/ 102,000 gal. 20#
	Gel wtr. w/ 90,000 #
	20-40 SD & 20,000 # 10-20 SD

33. PRODUCTION

DATE FIRST PRODUCTION	PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)	WELL STATUS (Producing or shut-in)					
5-28-78	Flowing	SI					
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
6-6-78	3	1					
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)	
137	612			2133 AOF			

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

to be sold

35. LIST OF ATTACHMENTS

Logs previously forwarded

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

SIGNED *C. J. Patterson* TITLE Administrative Supervisor DATE 7/5/79

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

Received

# 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 land 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 33.

**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: "Stack 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.
			TOP
			MEAS. DEPTH
			TRUE VERT. DEPTH
FRUITLAND		2273	Sand, Shale, Coal
PICTURED CLIFFS	2273	2363	Sand Shale
MESA VERDE	3926	5025	Sand, Shale, Coal, Gas
GALLUP	5697	5800	Sand, Shale
DAKOTA	6547		Sand, Shale, Gas